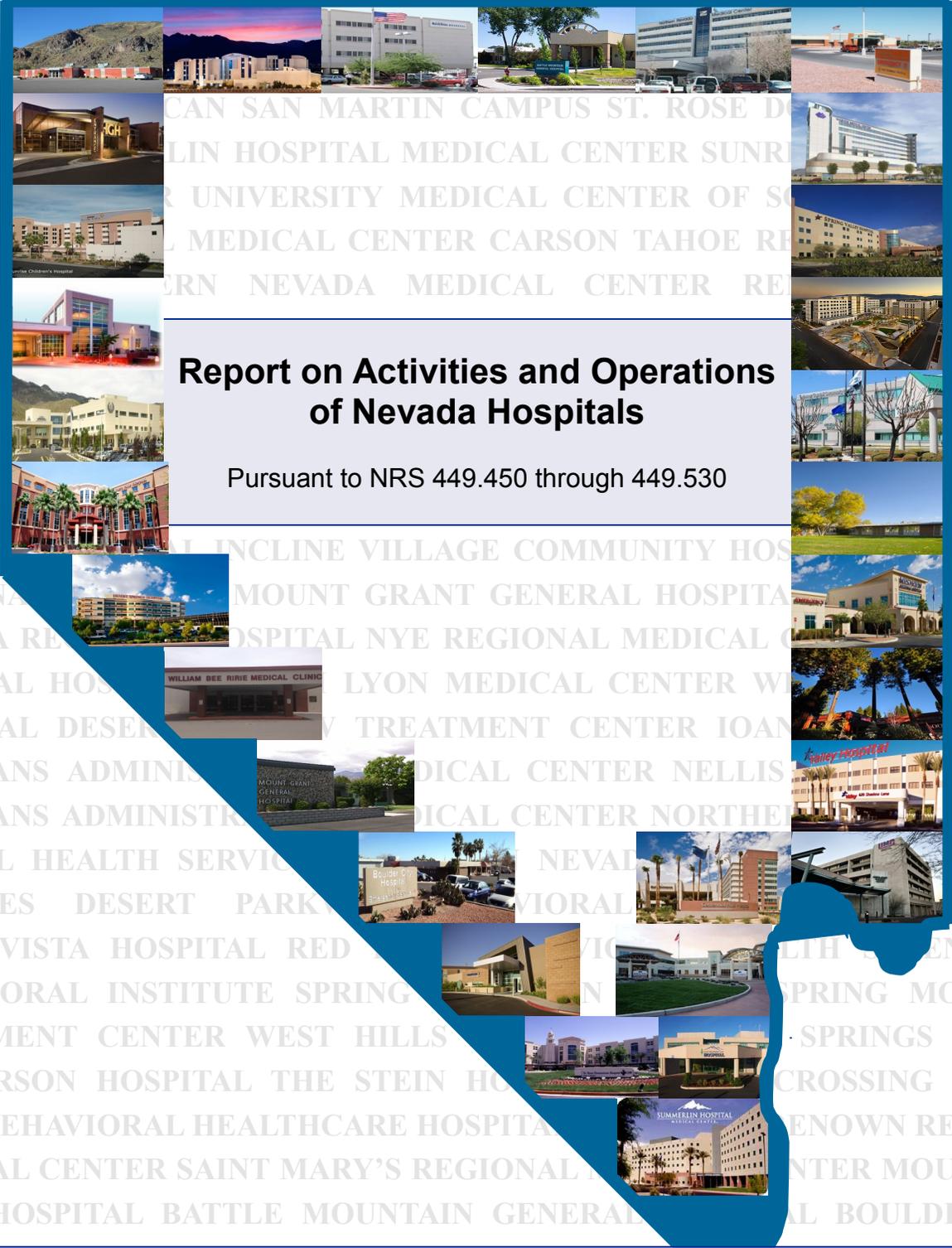


CENTENNIAL HILLS HOSPITAL MEDICAL CENTER DESERT SPRINGS HOSPITAL  
 MEDICAL CENTER MOUNTAINVIEW HOSPITAL NORTH VISTA HOSPITAL  
 SOUTHERN VALLEY HOSPITAL CAMPUS SIENNA HOSPITAL AND  
 HOSPITAL ST. ROSE DESERT HOSPITAL ST. ROSE DESERT HOSPITAL  
 CAMPUS LIN HOSPITAL MEDICAL CENTER SUNRISE HOSPITAL  
 MEDICAL CENTER UNIVERSITY MEDICAL CENTER OF SONOMA COUNTY  
 VALLEY MEDICAL CENTER CARSON TAHOE REGIONAL MEDICAL CENTER  
 CENTER NORTHERN NEVADA MEDICAL CENTER REGIONAL MEDICAL CENTER  
 MEDICAL CENTER SAINT BANNER HOSPITAL  
 MARY'S HOSPITAL CHURCHVIEW HOSPITAL  
 CHURCHVIEW HOSPITAL BOULDER REGIONAL MEDICAL CENTER  
 REGIONAL MEDICAL CENTER INCLINE VILLAGE COMMUNITY HOSPITAL  
 REGIONAL MEDICAL CENTER MOUNT GRANT GENERAL HOSPITAL  
 NEVADA REGIONAL MEDICAL CENTER NYE REGIONAL MEDICAL CENTER  
 GENERAL HOSPITAL LYON MEDICAL CENTER WILSON MEDICAL CENTER  
 HOSPITAL DESERT TREATMENT CENTER IOANNA MEDICAL CENTER  
 VETERANS ADMINISTRATION MEDICAL CENTER NELLIS MEDICAL CENTER  
 VETERANS ADMINISTRATION MEDICAL CENTER NORTHERN NEVADA  
 MENTAL HEALTH SERVICES NEVADA BEHAVIORAL HEALTH SERVICES  
 SERVICES DESERT PARK MONTEVISTA HOSPITAL REDUCED VISION CENTER  
 BEHAVIORAL INSTITUTE SPRING TREATMENT CENTER WEST HILLS  
 TREATMENT CENTER WEST HILLS HENDERSON HOSPITAL THE STEIN HOSPITAL  
 HENDERSON HOSPITAL THE STEIN HOSPITAL RENO BEHAVIORAL HEALTHCARE HOSPITAL  
 MEDICAL CENTER SAINT MARY'S REGIONAL MEDICAL CENTER MOUNTAIN'S  
 EDGE HOSPITAL BATTLE MOUNTAIN GENERAL HOSPITAL BOULDER CITY



**Report on Activities and Operations  
of Nevada Hospitals**

Pursuant to NRS 449.450 through 449.530



State of Nevada  
 Department of Health and Human Services  
**Division of Health Care Financing and Policy**

Richard Whitley  
 Director  
 Department of Health and Human Services

Marta Jensen  
 Acting Administrator  
 Division of Health Care Financing and Policy



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## **ATTACHMENT A**

PERSONAL HEALTH CHOICES, TWENTY-EIGHTH EDITION (CY 2011 - 2015)



# REPORT ON ACTIVITIES AND OPERATIONS OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

## AUTHORITY AND OVERVIEW

### AUTHORITY

The Division of Health Care Financing and Policy (DHCFP) was created on July 1, 1997 (state fiscal year 1998). The Division is responsible for carrying out the provisions of Nevada Revised Statutes (NRS) 449, “Medical and Other Related Facilities.”

The Director of the Department of Health and Human Services (DHHS) is required to prepare a report on DHHS activities and operations pertaining to the provisions of NRS 449.450 through 449.530, inclusive, for the preceding fiscal year. The report must be transmitted to the Governor, the Legislative Committee on Health Care, and the Interim Finance Committee on or before October 1 of each year (NRS 449.520).

The functions and activities subject to NRS 449.450 through 449.530, inclusive, have been delegated to DHCFP.

DHCFP's responsibilities include:

1. Collecting financial information and other reports from hospitals;
2. Collecting health care information from hospitals and other providers;
3. Conducting analyses and studies relating to the cost of health care in Nevada and comparisons with other states;
4. Preparing and disseminating reports based on such information and analyses; and
5. Suggesting policy recommendations and reporting the information collected.

### OVERVIEW OF NRS 449.450 - 449.530

The definitions of specific titles and terminology used in NRS 449.450 through 449.530 are defined in NRS 449.450. The Director may adopt regulations, conduct public hearings and investigations, and exercise other powers reasonably necessary to carry out the provisions of NRS 449.450 through 449.530, inclusive, as authorized in NRS 449.460. The Director also has the authority to utilize staff or contract with appropriate independent and qualified organizations to carry out the duties mandated by NRS 449.450 through NRS 449.530, inclusive, as authorized in NRS 449.470.

### Committee on Hospital Quality of Care

Each hospital licensed to operate in Nevada is required to form a committee to ensure the quality of care provided by the hospital. Requirements for such committees are specified by the Joint Commission on Accreditation of Healthcare Organizations or by the Federal Government pursuant to Title XIX of the Social Security Act (NRS 449.476).

## Authority and Overview

### Health Care Administration Fee

The Director, by regulation, imposes fees upon admitted health care insurers to cover the costs of carrying out the provisions of NRS 449.450 to 449.530, inclusive. The legislature approves an annual amount to be collected and NRS 449.465 authorizes a \$50 fee for the support of the Legislative Committee on Health Care. The amount authorized in state fiscal year (SFY) 2016 by the legislature was \$987,129. Under Nevada Administrative Code (NAC) 449.953, the Division has the authority to impose penalties for late payments, however, no late payments were received in SFY 2016.

Number of health insurers estimated to pay:		416
Fee per admitted health insurer:	DHCFP	\$2,552
	LCB	\$50
TOTAL FEE PER ADMITTED HEALTH INSURER:		\$2,602
Actual number of health insurers that paid:		416
Total Fees/Actual Payment received for SFY 2016:		\$1,082,432
Penalties collected by DHCFP:		\$0
Amount transferred to Legislative Committee*:		\$20,800

*\* 416 insurers paid the fee (416 x \$50)*

### SUBMISSION OF DATA BY HOSPITALS

#### NRS Provisions

Each hospital in the State of Nevada shall use a discharge form prescribed by the Director and shall include in the form all information required by the Department. The information in the form shall be reported monthly to the Department, which will be used to increase public awareness of health care information concerning hospitals in Nevada (NRS 449.485).

Every institution which is subject to the provision of NRS 449.450 to 449.530, inclusive, shall file financial statements or reports with the Department (NRS 449.490).

#### Manner in which Healthcare Providers are Reporting Information

##### Monthly Reporting

In conjunction with the University of Nevada, Las Vegas (UNLV) Center for Health Information Analysis (CHIA), DHCFP continues to maintain a statewide database of Universal Billing (UB) form information obtained from hospitals pursuant to this section. The UB database is also utilized by outside providers to analyze Nevada's health care trends. Additional information is included under the *Published Reports* section that follows.

The information reported by hospitals includes admission source, payer class, zip code, acuity level, diagnosis and procedures. This level of detail allows for trend analysis using various parameters, including specific illnesses and quality of care issues. The detail of the UB database is also available, upon request, in an electronic medium to researchers. Researchers may receive data after approval of a Limited Data Set Use Agreement.

In the 2007 Legislative Session, DHCFP adopted regulations to implement Assembly Bill 146 that requires greater transparency in reporting. DHCFP contracted with UNLV CHIA to create a Transparency Website. The purpose of the Transparency Website is to increase public awareness of health care information concerning inpatient and outpatient hospitals and ambulatory surgical centers in this State. Diagnostic Related Groups (DRG), diagnoses and treatments, physician name, as well as nationally recognized quality indicators Potentially Preventable Readmissions and Provider Preventable Conditions, are information posted in the website. This information is available in both fixed and interactive reports. These reports enable the consumer and researchers to do comparative analyses between hospitals. The website is located at:

[www.nevadacomparecare.net](http://www.nevadacomparecare.net)

### Quarterly Reporting

Pursuant to NAC 449.960, hospitals are required to submit quarterly reports regarding their financial and utilization information in a consistent manner. Hospitals must present these reports, referred to as Nevada Healthcare Quarterly Reports (NHQRs), in accordance with the generally accepted accounting procedures issued by the American Institute of Certified Public Accountants.

Electronic submission of the NHQRs to CHIA is required. Information is submitted by the providers based on the best information available at the time the reports are entered. Revised NHQRs are to be filed when material changes are discovered. Utilization and financial reports, which include individual facilities as well as summary information, are available for both the acute care and non-acute care hospitals. Utilization reports are also available for Ambulatory Surgery, Imaging, Skilled Nursing/Intermediate Care, and Hospice Facilities. DHCFP actively works with CHIA, the Nevada Hospital Association, and other stakeholders to continually update medical provider reporting, assure consistency, and to create a more functional tool for users. These reports may be found at:

[www.nevadacomparecare.net/static-nhqr.php](http://www.nevadacomparecare.net/static-nhqr.php)

### **ICD-10 Transition**

Health care providers classify medical conditions using a standard coding system. The United States Department of Health & Human Services has mandated that all covered entities under the Health Insurance Portability and Accountability Act (HIPAA) transition to the International Classification of Diseases (ICD) 10th Edition (ICD-10) code set from the current ICD 9th Edition (ICD-9) code set, effective October 1, 2015.

## Authority and Overview

The new ICD-10 code set provides the opportunity to accommodate new procedures and diagnoses unaccounted for in the ICD-9 code set and allows for greater specificity of diagnosis-related groups and preventive services. This transition will lead to improved reimbursement for medical services, fraud detection, historical claims and diagnoses analysis for the healthcare industry, and will enable the health care industry to make more informed decisions regarding health programs to improve health outcomes.

Beginning with billing claims created from patient discharges/visits October 1, 2015, Nevada hospitals are required to utilize the ICD-10 code set in billing and in the reporting of data to CHIA.

### Published Reports

DHCFP, in conjunction with CHIA, publishes or makes available various reports deemed "desirable to the public interest" on the Transparency Website. The website allows users to download and print various reports such as statistical, utilization, sentinel events, Nevada Annual Hospital Reports, and comparative reports on DRGs, diagnosis, and procedures.

The statewide database of UB information obtained from hospitals pursuant to this section is the basic source of data used for hospital cost comparisons included in the CHIA publication *Personal Health Choices*. The latest edition for the period 2011 - 2015, published in July of 2016, is included as *ATTACHMENT A. Personal Health Choices* and additional information on the UB database may be found on the CHIA website at:

<http://nevadacomparecare.net/static-choices.php>

CHIA publishes a package of standard reports based upon the UB hospital billing records. These reports are currently available for calendar years 2008 - 2015.

Comprehensive summaries of the utilization and financial data reported by Nevada hospitals and other health care providers are available for download on CHIA's website at:

<http://nevadacomparecare.net/static-standard-reports.php>

A list of the financial and utilization reports, accessible in CHIA's website, are attached in *Exhibit 6*.

### Exhibit Data

Beginning in calendar year 2013, the Exhibits and related report data contained in the *Report on Activities and Operations* will be updated annually as a result of automation in the report generator with the UNLV CHIA NHQR database. These updates may result in changes to prior year data as compared to previous reports.

## NEVADA MEDICAID SUPPLEMENTAL PAYMENTS AND RATE CHANGES

Hospitals receive payments from the State of Nevada in accordance with provisions of the Nevada Medicaid State Plan, Titles XI and XIX for the Social Security Act, all applicable Federal regulations and other official issuance of the Department. Methods and standards used to determine rates for inpatient and outpatient services are located in the State Plan under Attachments 4.19 A through E. Standard fee schedules are updated, at a minimum, on an annual basis. The current Nevada Medicaid Fee Schedules broken out by provider type may be found at:

<http://dhcfnv.gov/Resources/Rates/FeeSchedules/>

## NEVADA MEDICAID SUPPLEMENTAL PAYMENT PROGRAMS

In order to preserve access to hospital services, Nevada Medicaid administers various supplemental payment programs that directly benefit Nevada hospitals for providing these services. A summary of total supplemental payments received by Nevada Acute Care Hospitals in state fiscal year (SFY) 2016 may be found in *Exhibit 1A*, and a five-year summary of total supplemental payments received by Nevada Acute Care Hospitals may be found in *Exhibit 1B*. These supplemental payment programs are not funded using State General Funds, but are funded through county and public entity Intergovernmental Transfers (IGTs) and Federal matching dollars in accordance with State law and Federal regulations.

5 Year Change	Nevada Medicaid Acute Care Hospital Supplemental Payments (in millions)	SFY 2012	SFY 2013	SFY 2014	SFY 2015	SFY 2016
	<b>Non-State Government Owned (Public) Hospitals</b>	\$164.3	\$161.4	\$140.1	\$160.1	\$176.7
7.52%	% increase (decrease) from prior year		(1.79%)	(13.16%)	14.27%	10.33%
	<b>Private Hospitals</b>	\$11.2	\$11.9	\$35.3	\$32.6	\$46.9
316.54%	% increase (decrease) from prior year		6.17%	195.17%	(7.66%)	43.95%
	<b>Total Nevada Acute Care Hospitals</b>	\$175.6	\$173.3	\$175.4	\$192.7	\$223.5
27.32%	% increase (decrease) from prior year		(1.28%)	1.19%	9.86%	16.01%

See *Exhibit 1B* for details.

Over the last five years, total supplemental payments received by Nevada Acute Care Hospitals have increased by 27.32% from \$175.6 million in SFY 2012 to \$223.5 million in SFY 2016. During that time, supplemental payments to Non-State Government Owned (Public) hospitals increased by 7.52% (\$12.2 million) and supplemental payments to Private hospitals increased by 316.54% (\$35.7 million). This substantial increase in supplemental payments to Private hospitals is attributable to the implementation of the Indigent Accident Fund (IAF) supplemental payment program in SFY 2014 and ongoing increases to Inpatient (IP) Private Hospital Upper Payment Limit (UPL) supplemental payment program distribution.

Additional information regarding the supplemental payment programs administered by Nevada Medicaid may be found at:

<http://dhcfnv.gov/Resources/Rates/RatesSupplementalPymtMain/>

## **Supplemental Payments & Rate Changes**

### **Disproportionate Share Hospital Supplemental Payment Program**

Title XIX of the Social Security Act authorizes Federal grants to States for Medicaid programs that provide medical assistance to low-income families, the elderly and persons with disabilities. Section 1902(a)(13)(A)(iv) of the Act requires that States make Medicaid payment adjustments for hospitals that serve a disproportionate share of low-income patients with special needs. Section 1923 of the Act contains more specific requirements related to such disproportionate share hospital payments, including aggregate annual state-specific limits on Federal Financial Participation (FFP) under Section 1923(f), and hospital-specific limits on Disproportionate Share Hospital (DSH) payments under section 1923(g). The Nevada formula for distributing these payments is authorized pursuant to NRS 422.380 – 387 and the State Plan for Medicaid Attachment 4.19-A, Pages 21-25.

DSH allotments reflect the annual maximum amount of FFP available to the State for the DSH program. The DSH allotment is determined by the Centers for Medicare and Medicaid Services (CMS) as the higher of (1) the federal fiscal year (FFY) 2004 DSH allotment or (2) the prior year's DSH allotment increased by the percentage of change in the consumer price index for all urban consumers (CPI-U) for the prior fiscal year. The resulting amount must not exceed the greater of (1) the DSH allotment for the previous fiscal year or (2) 12% of total State Plan medical assistance expenditures during the fiscal year. CMS often updates the allotment amounts prior to finalization which results in revision of the corresponding DSH payments. Both the FFY 2015 and FFY 2016 DSH allotments are currently preliminary amounts and are subject to revision by CMS.

Under the Affordable Care Act (ACA), DSH allotments were scheduled to be reduced beginning in FFY 2014 and continuing through FFY 2020 due to decreases in the rate of uninsured and under-insured individuals as estimated by the Congressional Budget Office. However, subsequent legislation has modified the amounts of the reductions, delayed the implementation of the reductions until FFY 2018, and extended the reductions through FFY 2025. The scheduled reductions to the aggregate Federal DSH allotments are as follows: \$2 billion in FFY 2018, \$3 billion in FFY 2019, \$4 billion in FFY 2020, \$5 billion in FFY 2021, \$6 billion in FFY 2022, \$7 billion in FFY 2023, \$8 billion in FFY 2024 and \$8 billion in FFY 2025. \$77,525,269 was distributed to Nevada hospitals through this program in SFY 2016, a decrease of 0.53% from SFY 2015's distribution of \$77,940,304. Due to State-level impacts of ACA, additional changes to the DSH program are anticipated in upcoming years.

### **Upper Payment Limit Supplemental Payment Programs**

Federal Medicaid regulations allow for State Medicaid Agencies to pay hospitals under a Fee-For-Service environment an amount that would equal what Medicare would have paid for the same services. This concept is referred to as the Upper Payment Limit (UPL).

Nevada currently has an Inpatient (IP) Non-State Government Owned (Public) Hospital, Outpatient (OP) Non-State Government Owned (Public) Hospital, and IP Private Hospital UPL Supplemental Payment Programs. The formulas for calculating and distributing these payments is authorized pursuant to the Medicaid State Plan Attachment 4.19 A, Pages 32 - 33a (IP Hospital UPLs) and Attachment 4.19-B, Page 20 (OP Hospital UPL). In SFY 2016, \$67,184,443, \$14,419,638 and \$7,044,242 were distributed to Nevada hospitals through the IP Public, OP Public and IP Private UPL

supplemental payment programs respectively. This represents an increase of 11.86% for the IP Public Hospital UPL, an increase of 52.49% for the OP Public UPL and an increase of 403.81% for the IP Private UPL supplemental payment programs in SFY 2015.

### **Graduate Medical Education Supplemental Payment Program**

Non-State Government Owned (Public) hospitals that participate in the Medicaid program are eligible for additional reimbursement related to the provision of Direct Graduate Medical Education (GME) activities. To qualify for these additional Medicaid payments, the hospital must also be eligible to receive GME payments from the Medicare program under provision of 42 C.F.R. § 413.75. The formula for calculating and distributing these payments is authorized pursuant to the Medicaid State Plan Attachment 4.19 A, Pages 31 and 31a. The Nevada GME methodology is based upon teaching hospital interns and residents, not Medicare slots. In state fiscal year 2016, \$15,488,484 was distributed to Nevada hospitals through this program, an increase of 23.33% over the \$12,558,221 distributed through this program in SFY 2015.

### **Indigent Accident Fund Supplemental Payment Program**

The Indigent Accident Fund (IAF) Supplemental Payment program is intended to preserve access to inpatient hospital services for needy individuals in Nevada. This supplemental payment is authorized by NRS 428.206. The formula for calculating and distributing these payments is authorized pursuant to the Medicaid State Plan, section 4.19-A, Page 32b-32d. \$41,876,300 was distributed to Nevada hospitals through this program in SFY 2016, an increase of 33.89% over the \$31,277,130 distributed through this program in SFY 2015. On August 1, 2016, CMS approved the continuation of the program for SFY 2017 and approved a significant increase to the amount to be distributed to Nevada hospitals in SFY 2017 through the IAF Supplemental Payment program.

## **NEVADA MEDICAID RATE CHANGES**

### **State Plan Amendment (SPA) 15-003: Inpatient Hospital 5% Rate Increase**

As approved during the 2015 Legislative Session, DHCFP submitted a proposal to CMS to increase specific inpatient hospital per diem rates by 5%. CMS approved the rate increases, which apply to inpatient hospital claims with an admission date on or after July 9, 2015. The projected change in annual aggregate expenditures as a result of this change is an increase in hospital reimbursement for SFY 2016 of \$29,704,247 and an increase in hospital reimbursement for SFY 2017 of \$29,970,829.

### **SPA 15-004: Provider Type (PT) 20, PT 24 and PT 77 Rates**

Effective July 1, 2015, CMS approved increased reimbursement rates for PT 20 (Physicians), PT 24 (Advanced Practice Registered Nurses) and PT 77 (Physician Assistants). This rate increase was as a result of appropriations in the 2016/2017 budget approved during the 78th (2015) Legislative Session.

### **SPA 15-009: Applied Behavioral Analysis (ABA)/Intensive Behavior Intervention (IBI) Services**

Effective January 1, 2016, CMS approved adding ABA/IBI services for children with autism to the

## **Supplemental Payments & Rate Changes**

Nevada Medicaid State Plan and adding a rate methodology to provide reimbursement for those services.

### **SPA 15-012: Pediatric and Mid-Tier Radiology**

Effective January 1, 2016, CMS approved updates to the reimbursement methodology for services billed by Advanced Practitioners of Nursing, Physicians Assistants, and Nurse Midwives, as well as the addition of language to include radiology codes.

### **SPA 15-013: Hospital Transplants and Critical Access Hospital (CAH) Psychiatric/Substance Abuse Rates**

Effective January 1, 2016, CMS approved increased reimbursement rates for inpatient hospital services and procurement related to transplants. Additionally, this amendment added psychiatric/substance abuse services for CAHs to the list of services reimbursed at the general acute care hospital rates, for interim payment purposes.

### **SPA 16-001: Ambulatory Surgical Center (ASC) Cornea Procurement Rate**

Effective April 1, 2016, CMS approved the establishment of a rate to allow and reimburse for Cornea Procurement in the ASC setting.

### **SPA 16-004: Behaviorally Complex Services and Nursing Facility Rates**

Nevada Medicaid State Plan language was changed for Behaviorally Complex Services to reflect the assigned rates for each level of the Behaviorally Complex add on rates. Language was also updated to reflect clarification regarding negotiated rates for Nursing Facilities. Pediatric Level I and II rates were updated to reflect a flat rate structure which will enable facilities receiving these rates to participate in supplemental payments effective April 25, 2016.

### **SPA 16-012: Community Paramedicine Services**

Effective July 1, 2016, CMS approved updates to the coverage and reimbursement sections of the Nevada Medicaid State Plan to include rates for newly established community paramedicine services.

### **Enhanced Capitation Rates to Managed Care Organizations**

In December 2014, CMS approved increases to the capitation rates paid to the two Nevada Medicaid-contracted managed care organizations in order to allow an increase in payments for beneficiary access to Nevada safety net providers and mental health services. The capitation rates are certified annually, and the approvals now include the calendar year (CY) 2014, CY 2015 and CY 2016 rate periods. Due to recent CMS regulations, including proposed rules relating to the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), revisions to this payment model are anticipated to occur in the upcoming years.

**SUMMARY INFORMATION AND ANALYSES  
HOSPITALS WITH 100 OR MORE BEDS**

NRS 449.490 requires reporting for hospitals with 100 or more beds.<sup>1</sup> They report on capital improvements; community benefits; home office allocation methodologies; discount and collection policies; and the availability of a complete current Charge Master.

**CHARGE MASTER AVAILABILITY AT HOSPITALS**

Pursuant to NRS 449.490, subsection 4, a complete current Charge Master must be available at each hospital (with 100 or more beds) during normal business hours for review by the Director, any payer that has a contract with the hospital to pay for services provided by the hospital, any payer that has received a bill from the hospital, or any state agency that is authorized to review such information.

No violations of Charge Master availability have been reported to the Division.

**HOSPITAL INFORMATION**

General hospital information concerning eighteen acute hospitals in Nevada with more than 100 beds is presented in *Exhibit 2*. The information includes location, corporate name, number of beds, type of ownership, availability of community benefits coordinator, availability of charitable foundation, if the hospital conducts teaching and research, trauma center information, and if the hospital is a sole provider of any specific clinical services in their area.

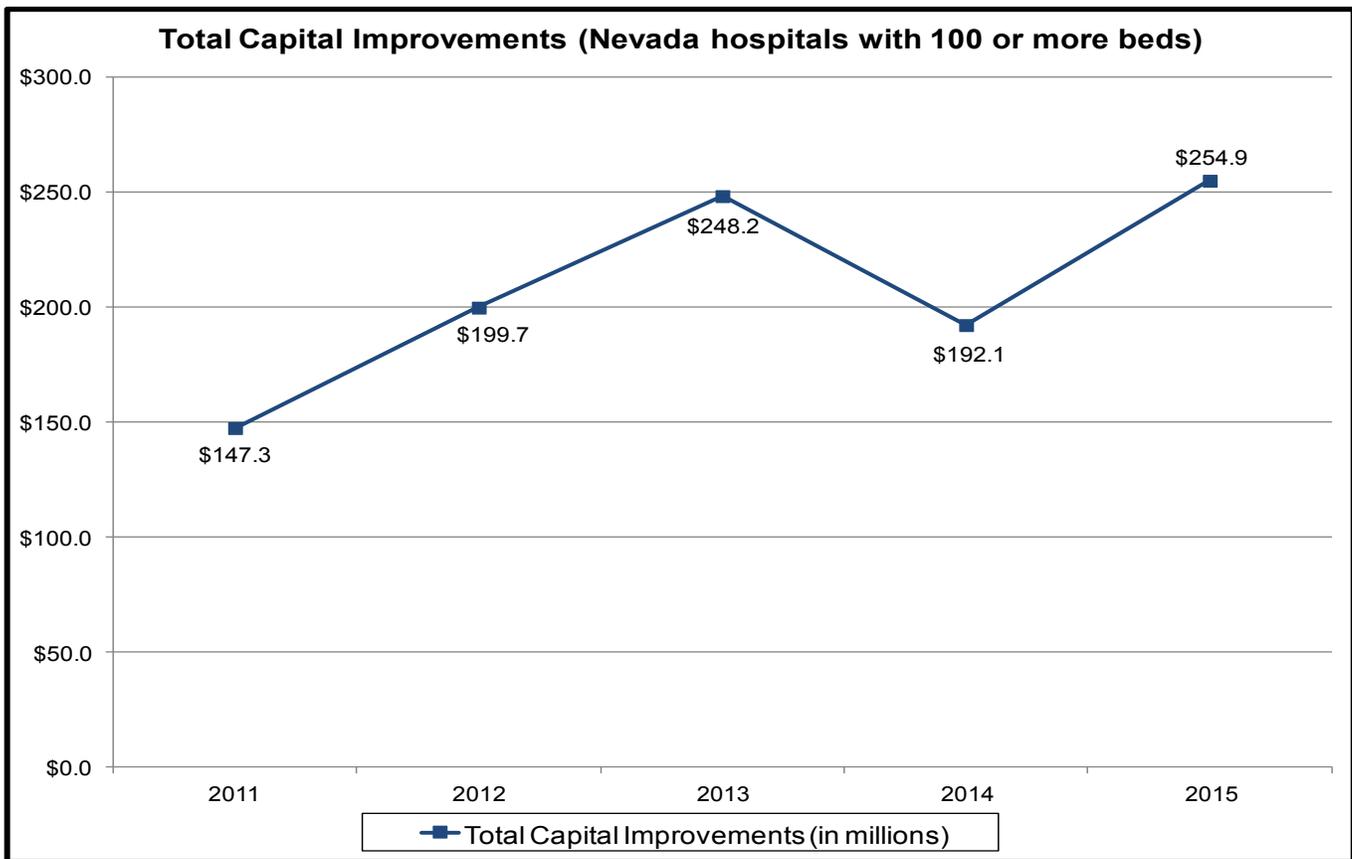
**SUMMARY OF CAPITAL IMPROVEMENT REPORTS**

Capital Improvements cover three areas: New Major Services Lines, Major Facility Expansions and Major Equipment. In order to avoid duplication of reporting, no costs are reported for the addition of Major Service Lines. The costs for Major Expansions do not include equipment. A threshold of \$500,000 has been established for reporting Major Equipment additions. Capital Improvements that do not meet the reporting thresholds are reported in aggregate. Hospitals reported Capital Improvement costs for 2015 as follows:

Major Expansions	\$ 75,703,261
Major Equipment	\$ 65,585,310
Additions Not Required to be Reported Separately	\$113,569,540
<b>Total</b>	<b>\$254,858,111</b>

<sup>1</sup> Mountain’s Edge Hospital (opened July 1, 2015) did not provide this information to DHCFP. Henderson Hospital (currently under construction; anticipated completion in 2016 Q4) is included in these reports (see *Exhibits 2-5*).

## Summary - Hospitals with 100 or More Beds



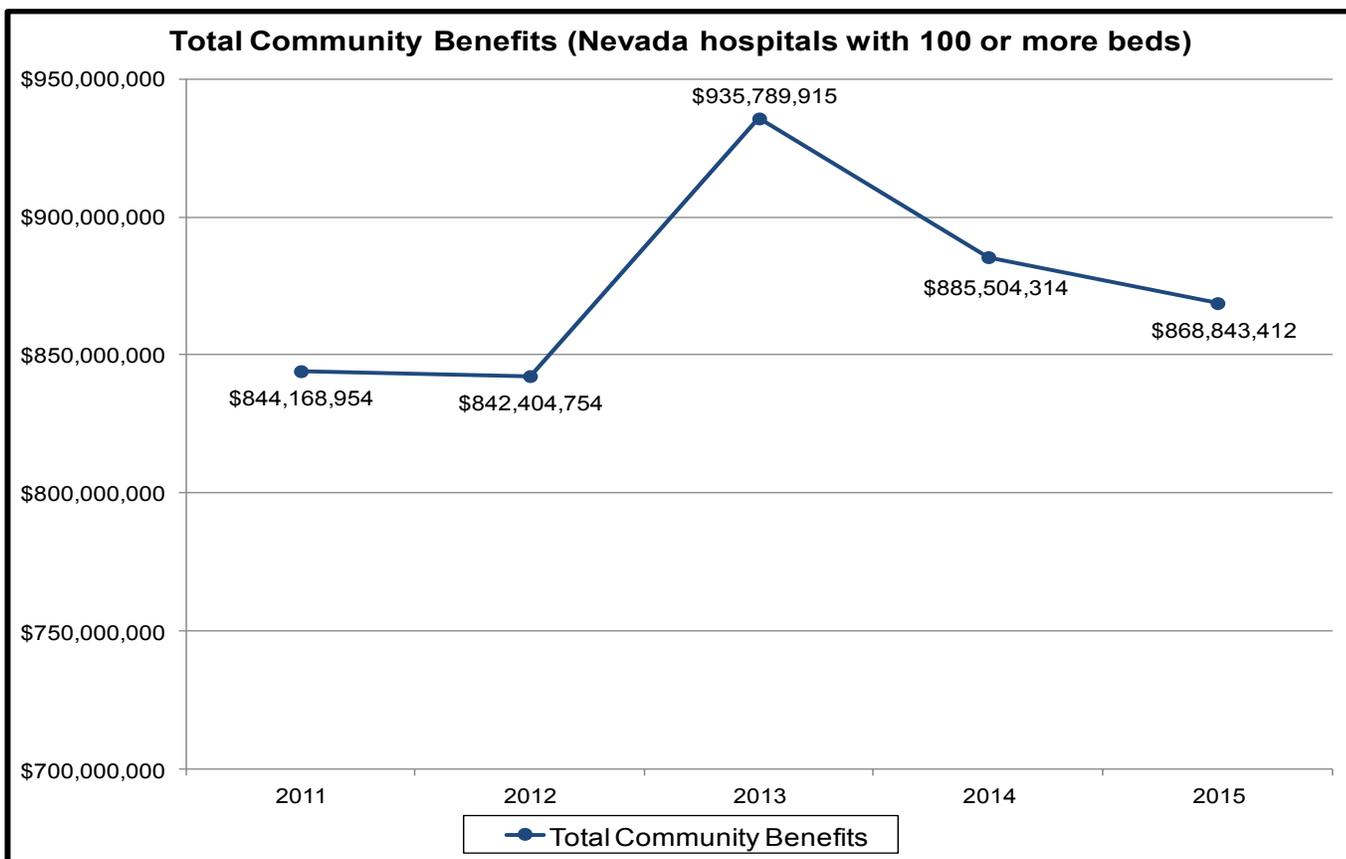
Capital Improvements					
	2011	2012	2013	2014	2015
<b>Total Capital Improvements (in millions)</b>	\$147.3	\$199.7	\$248.2	\$192.1	\$254.9
<b>Percentage Change</b>	43.01%	35.57%	24.29%	(22.60%)	32.69%

See *Exhibit 3* for details.

Capital Improvements in 2011, 2012, and 2013 saw increases of 43.01%, 35.57%, and 24.29% respectively. Although 2014 showed a decline in capital improvements of 22.60% from 2013, Capital Improvements in 2015 increased 32.69% to \$254.9 million. When comparing the Total Capital Improvements in 2011 of \$147.3 million to the \$254.9 million in 2015, the five-year period resulted in an increase in Capital Improvements of 73.05%.

### EXPENSES INCURRED FOR PROVIDING COMMUNITY BENEFITS

The Total Community Benefits reported for 2015 was \$868,843,412. Subsidized Health Care Services costs accounted for \$782,097,186 of the total; providing Health Professions Education totaled \$37,895,438; Community Health Improvement Services totaled to \$26,434,765; and Other Categories totaled to \$22,416,023. Although the reported Community Benefits for 2015 decreased by 1.88% from 2014, comparing the Total Community Benefits reported in 2011 to the total reported in 2015, the five-year period resulted in a 2.92% increase.



Community Benefits					
	2011	2012	2013	2014	2015
<b>Total Community Benefits</b>	\$844,168,954	\$842,404,754	\$935,789,915	\$885,504,314	\$868,843,412
<b>Percentage Change</b>	7.95%	(0.21%)	11.09%	(5.37%)	(1.88%)

See Exhibit 4 for details.

**POLICIES AND PROCEDURES REGARDING DISCOUNTS OFFERED TO PATIENTS AND REVIEW OF POLICIES AND PROCEDURES USED TO COLLECT UNPAID PATIENT ACCOUNTS**

NRS 439B.440 allows the Director to engage an auditor to conduct an examination to determine whether hospitals are in compliance with provisions of NRS 439B. The statute refers to these engagements as audits, however, in accordance with the American Institute of Certified Public Accountants promulgations, these are “Agreed Upon Procedures” engagements, not audits. Reports of engagements performed biennially by an independent contractor detail information regarding compliance of the 16 non-county-owned hospitals that have 100 beds or more in the State. Per NRS 439B.440 subsection 3, University Medical Center of Southern Nevada in Clark County, being a county-owned hospital, is exempt from this requirement. The reports for the period July 1, 2013

## Summary - Hospitals with 100 or More Beds

through June 30, 2015, prepared by Myers and Stauffer, LC, Certified Public Accountants, were issued prior to the end of state fiscal year 2016.

The engagement tests hospitals for compliance with NRS 439B.260, 30% discount required for uninsured patients; NRS 439B.410, appropriateness of emergency room patient logs, transfers into or out of the hospital, review of policies and procedure in the emergency room, and review of any complaints in the emergency room; NRS 439B.420, review of contractual arrangements between hospital and physicians or other medical care providers; and NRS 439B.430 review of related party transactions and ensure appropriate allocation.

### SUMMARY OF COMPLIANCE ISSUES FROM REQUIRED OR PERFORMED ENGAGEMENTS

NRS 449.520 requires a summary of any trends noted from these engagements be reported. The reports covering July 1, 2013 thru June 30, 2015 show no trends of note. A summary of the compliance issues noted during the engagement were:

- Emergency Room Services
  - Eighteen concerns, at eight separate hospitals, were identified regarding transfers from emergency rooms. Thirteen of these concerns related to missing or improper documentation, and five concerned patient complaints containing implications of financial prejudice.
- Contractual Arrangement Review
  - Two instances of non-conformance with rental contract provisions were identified.
    - One instance of a lack of proof of payment for a non-rental contract was identified.
    - One instance of inconsistency between a medical office building's directory and the physician contract listing was identified.
- Reduction of Billed Charges
  - Eleven instances of exceptions to NRS 439B.260 were identified, ranging from policies notifying patients of self-pay discounts at the time of admit instead of on the first statement of the hospital bill after discharge to policies regarding maximum income levels for eligibility for self-pay patient discounts.

Corrective action plans will be required of all facilities found to be out of compliance.

### CORPORATE HOME OFFICE COST ALLOCATION METHODOLOGIES

Home office allocation methodologies for the hospitals that were subject to the above engagements were reviewed by the independent contractor with hospital staff. No exceptions were noted. These can be viewed at the end of the individual annual compliance reports on the Transparency Website:

<http://www.nevadacomparecare.net/nv-reports.php>

A brief description of each home office allocation methodology may also be found in *Exhibit 5*.

## SUMMARY INFORMATION AND ANALYSES ALL HOSPITALS

### HOSPITAL GROUPINGS

The acute care hospitals are grouped into the following categories:

- Statewide
- Clark County Hospitals
- Washoe County/Carson City Hospitals
- Rural Hospitals

Hospitals located in rural parts of Washoe (Incline Village Community Hospital) and Clark (Mesa View Regional Hospital and Boulder City Hospital) counties are included in the Rural Hospital category for CHIA reporting purposes. Data from the Rehabilitation/Specialty Hospitals and the Psychiatric Hospitals, none of which are located in a rural county, are reported separately. The CHIA website contains both financial and utilization information; the following pages of this report summarize these data.

All 35 Acute Care Hospitals, all 16 Rehab/LTC/Specialty Hospitals, and all 8 Psychiatric Hospitals reported data to CHIA in 2015.

There are also five government-operated hospitals (federal and state) in Nevada, which do not have standard private sector operating costs and revenues.

Additionally, there are two maximum security psychiatric facilities in Nevada. Lake’s Crossing Center is a maximum security psychiatric facility providing comprehensive forensic mental health services, including court-ordered evaluation and/or treatment for restoration to legal competency. Lake’s Crossing Center also provides outpatient evaluations of legal competency, risk assessments and recommendations for treatment. The Stein Hospital, a maximum security forensic facility/psychiatric hospital for mentally disordered offenders in Las Vegas, NV, opened in October 2015. The Stein Hospital is one of three hospital buildings that make up Southern Nevada Adult Mental Health Services.

Below are the inpatient days and admissions data that have been reported to CHIA for 2015:

Facility	Inpatient Days	Admissions
Desert Willow Treatment Center	14,168	263
Ioannis A. Lougaris Veterans Administration Medical Center	16,843	3,472
Nellis Air Force Base Veterans Administration Medical Center	Not Reported	Not Reported
Northern Nevada Adult Mental Health Services	10,811	1,005
Southern Nevada Adult Mental Health Services	58,336	3,466

## Summary - All Hospitals

### FINANCIAL SUMMARIES

The five-year financial summary in *Exhibit 7* presents condensed financial and utilization information for Acute Care Hospitals in Nevada. Detailed information for the individual Acute Care Hospitals are presented in *Exhibit 9*.

### Comparative Financial Indicators

In order to compare hospitals across categories, financial indicators are used. The indicators used in this report are Per Adjusted Inpatient Day and Per Adjusted Admission. The following data were utilized in calculating the indicators:

- Billed Charges and Other Operating Revenue
- Total Operating Revenue
- Operating Expenses
- Net Operating Income

The Adjusted Inpatient Days and Adjusted Admissions are calculated by converting Outpatient and Other Patient Revenue to inpatient units. The calculations for the indicators are derived by using information from the Financial Summaries for hospital Billed Charges and Other Operating Revenue, Total Operating Revenue, Operating Expenses, and Net Operating Income, and dividing those amounts by Adjusted Inpatient Days or Adjusted Admissions. The amounts calculated due to the conversion are useful for comparisons and trending analyses.

### Common Size Statements

Common size statements are “vertical analyses” that use percentages to facilitate trend analysis and data comparison. The components of financial information are represented as percentages of a common base figure. Key financial changes and trends can be highlighted by the use of common size statements. Common size statements are utilized in the Comparative Financial Summary (*Exhibit 7*). Different financial information was represented as percentages of a common base figure. Total Deductions and Operating Revenue were represented as a percentage of the Billed Charges; Other Operating Revenue, Operating Expenses, Net Operating Income, Non-Operating Revenue and Non-Operating Expenses are also represented as percentages of the Total Operating Revenue.

### ANALYSIS

#### Acute Care Hospitals

The five-year Comparative Financial Summary tables (*Exhibit 7*) were prepared for the Acute Care Hospitals. The Comparative Financial Summaries (2011 - 2015) report both the financial and the common size statement information (vertical analyses). *Exhibit 7* reports Billed Charges, Deductions, and Operating Revenue. Operating Revenue is the amount paid by patients (or third party payer) for services received. Other Operating Revenue and Non-Operating Revenue include non-patient related revenue such as investment income or tax subsidies.

*Exhibit 7* also reports Inpatient Days, Admissions, and other patient statistical information along with the calculated Per Adjusted Inpatient Day and Per Adjusted Admission information.

Hospital Profitability

The Comparative Financial Summary, Statewide Acute Care Hospitals Totals, shows the Hospital Net Income/Loss<sup>2</sup> as a percentage of Total Revenues.<sup>3</sup> After reporting statewide Net Losses for 2011, the facilities reported Net Income from 2012 through 2015. The Net Profit Margin (Net Income ÷ Total Revenues) expressed as percentages from *Exhibit 7A* are presented in the table below:

<b>Hospital Profitability (Statewide)</b>					
	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
<b>Net Profit Margin</b>	(0.07%)	0.94%	2.37%	2.40%	5.19%

The above 5.19% Net Profit Margin for 2015 reflects Nevada Acute Care Hospitals collectively earning \$290,209,176 with a Total Operating Revenue of \$5,513,114,939 in 2015. The gains and losses ranged from a Net Income of \$89,618,608 for Renown Regional Medical Center to a Net Loss of \$27,851,017 for St. Rose Dominican Hospitals San Martin Campus.

Eight out of the fourteen Clark County Acute Care Hospitals reported a Net Income. The Total Net Income for all Clark County Acute Care Hospitals was \$62,231,752. University Medical Center of Southern Nevada had the highest Net Income of \$57,624,901 and St. Rose Dominican Hospitals San Martin Campus had the biggest Net Loss of \$27,851,017.

Five of the six Washoe County/Carson City Acute Care Hospitals reported a Net Income. The Total Net Income for all Washoe County/Carson City Acute Care Hospitals was \$168,276,110. Renown Regional Medical Center had the highest Net Income of \$89,618,608 and Sierra Surgery Hospital had the biggest (and only) Net Loss of \$1,418,503.

Twelve of the fifteen Rural Acute Care Hospitals reported a Net Income. The Total Net Income for all Rural Acute Care Hospitals was \$59,701,314. Northeastern Nevada Regional Hospital had the highest Net Income of \$22,256,393 and Nye Regional Medical Center had the biggest Net Loss of \$2,885,160.

Last year, a new acute care hospital in Las Vegas, Mountain’s Edge Hospital, opened and admitted their first patient on July 1, 2015. The hospital offers physical therapy, occupational therapy, speech pathology, as well as diagnostic services and minimally invasive surgical procedures.

In mid-2015, Nye Regional Medical Center (NRMC) announced the hospital would cease operations effective August 21, 2015 for all acute care patient services and effective September 4, 2015 for the Outpatient Clinic due to ongoing financial struggles. NRMC’s initial efforts to arrange partnerships and/or affiliations with other health care organizations were unsuccessful due to the small size of the hospital and the remote location. However, due to a partnership between Renown Health and the Nye

<sup>2</sup>Net of Net Operating Income, Non-operating Revenue and Non-Operating Expense

<sup>3</sup>The sum of Total Operating Revenue and Non-Operating Revenues

## Summary - All Hospitals

County Board of Commissioners announced earlier this year, the facility reopened June 1, 2016 as *Renown Medical Group - Tonopah*. The facility now offers telehealth secure videoconferencing technology to allow residents of Tonopah much needed access to primary care and specialty providers.

Most hospitals in Nevada have corporate affiliations. These parent companies help reduce costs and also help absorb losses over multiple facilities.

There are six Universal Health Systems Inc. (UHS) Acute Care Hospitals in Nevada. Five of the hospitals are located in Clark County (collectively known as the Valley Health System) and one hospital in Washoe County. Two of the six hospitals reported losses for 2015 while four reported Net Income; this resulted in a combined Net Income of \$7,134,429 for the six hospitals. As of February 25, 2016, UHS owns and/or operates 24 acute care hospitals, 3 free-standing emergency departments and 213 inpatient and 16 outpatient behavioral health care facilities located in 37 states, Washington D.C., Puerto Rico, the US Virgin Islands and the United Kingdom. Additionally, UHS is in the process of constructing a sixth Valley Health System hospital, a new 142-bed acute care facility in Henderson, Nevada that is slated for completion in the fourth quarter of 2016. UHS also manages and/or owns outright or in partnership with physicians, four surgical hospitals and surgery/radiation oncology centers located in four states. UHS collectively experienced a 7.53% Net Profit Margin in 2015 which increased from 6.65% in 2014.<sup>4</sup>

There are three Hospital Corporation of America (HCA) Acute Care Hospitals in Nevada, all located in Clark County. All three hospitals reported a Net Income in 2015; this resulted in a combined Net Income of \$61,140,782 for the three hospitals. As of December 31, 2015, HCA operates 168 hospitals, comprised of 164 general acute care hospitals, three psychiatric hospitals and one rehabilitation hospital. In addition, HCA operates 116 freestanding surgery centers. These facilities are located in 20 states and in England. HCA reported a Net Profit Margin of 5.37% in 2015, which was an increase from their Net Profit Margin of 5.08% in 2014.<sup>5</sup>

There are three Dignity Health hospitals in Clark County. All three of the facilities reported losses in 2015 for a combined Net Loss of \$72,477,099 in 2015. Dignity Health, formerly Catholic Healthcare West, a nonprofit public benefit corporation, exempt from federal and state income taxes, owns and operates healthcare facilities in California, Arizona and Nevada, and is the sole corporate member of other primarily non-profit corporations in the aforementioned states. These organizations provide a variety of healthcare-related activities, education and other benefits to the communities in which they operate. Dignity Health reported a Net Profit Margin of 4.74% in 2015, which was a decrease from the Net Profit Margin of 8.55% reported for 2014.<sup>6</sup>

On January 22, 2015, Prime Healthcare Services completed its acquisition of North Vista Hospital in North Las Vegas. Prime Healthcare also owns/operates St. Mary's Regional Medical Center in Reno. The two Prime Healthcare hospitals in Nevada both reported gains in 2015, combining for a Net Income of \$52,095,668. In addition to the two Nevada hospitals, Prime Healthcare owns/operates 28 acute care hospitals in eight other states throughout the country.

<sup>4</sup>UHS Annual Report 2015 (10-K)

<sup>5</sup>10-K Report - HCA Holdings, Inc. filed period 12/31/2015

<sup>6</sup>Dignity Health's consolidated financial statements years ended 6/30/15

While there are many potentially significant factors that contribute to hospital profitability, including geographical concentration of hospitals, service-based competition, the economic and regulatory environment, and hospital size, increasing labor costs have been identified by the American Hospital Association (AHA) as the most important single factor driving up the cost of hospital care.<sup>7</sup> The table below shows the Nevada median hourly wages for two specific hospital occupations:

<b>Nevada Median Wages</b>					
	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
<b>Registered Nurses</b>	\$ 37.29	\$ 37.33	\$ 37.62	\$ 38.11	\$ 39.16
<b>Medical and clinical laboratory technologists</b>	\$ 32.95	\$ 32.55	\$ 31.55	\$ 31.91	\$ 32.52

From 2011 to 2015, the median wage increased 5.01% for Registered Nurses and decreased 1.31% for Medical and Clinical Laboratory Technologists.<sup>8</sup>

**Billed Charges, Operating Revenue and Deductions**

Hospitals determine what they will charge for items and services provided to patients and these charges are the amount the hospital bills for an item or service (Billed Charges). Statewide, Billed Charges have increased by 47.64% over the last five years. This represents an increase of \$10.4 billion between 2011 and 2015. Increases in Billed Charges are seen in Clark County, Washoe County/Carson City and Rural hospitals, as outlined in the table below:

<b>5 Year Change</b>	<b>Nevada Acute Care Hospital Billed Charges (in millions)</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
	<b>Clark County Hospitals</b>	\$16,770.0	\$18,033.1	\$19,487.0	\$22,008.4	\$25,486.2
51.98%	% increase (decrease) from prior year	10.06%	7.53%	8.06%	12.94%	15.80%
	<b>Washoe County/Carson City Hospitals</b>	\$ 4,303.7	\$ 4,473.6	\$ 4,723.4	\$ 5,133.4	\$ 5,708.4
32.64%	% increase (decrease) from prior year	9.46%	3.95%	5.58%	8.68%	11.20%
	<b>Rural Hospitals</b>	\$ 693.8	\$ 727.8	\$ 809.3	\$ 894.6	\$ 941.7
35.74%	% increase (decrease) from prior year	8.22%	4.90%	11.19%	10.54%	5.27%
	<b>Statewide Hospitals</b>	\$21,767.4	\$23,234.5	\$25,019.6	\$28,036.4	\$32,136.4
47.64%	% increase (decrease) from prior year	9.88%	6.74%	7.68%	12.06%	14.62%

The Billed Charges, when compared to Operating Revenue (the amount patients or third party payers actually pay) and the Deductions (contractual allowances and bad debts), provide insight into the market competition among health care providers. Operating Revenue on a statewide basis has steadily decreased from 19.29% in 2011 to 16.71% in 2015. This decrease is visible across the state impacting hospitals in Clark County, Washoe County/Carson City and Rural hospitals, as outlined in the table below. Total Deductions on a statewide basis have gradually increased from 80.71% in

<sup>7</sup>American Hospital Association, *The Cost of Caring*, June 2012

<sup>8</sup>Bureau of Labor Statistics, Occupational Employment Statistics (OES) Survey.

## Summary - All Hospitals

2011 to 83.29% in 2015. The Total Deductions as a percent of Billed Charges for Clark County hospitals, Washoe County/Carson City hospitals and Rural hospitals are also outlined in the table below:

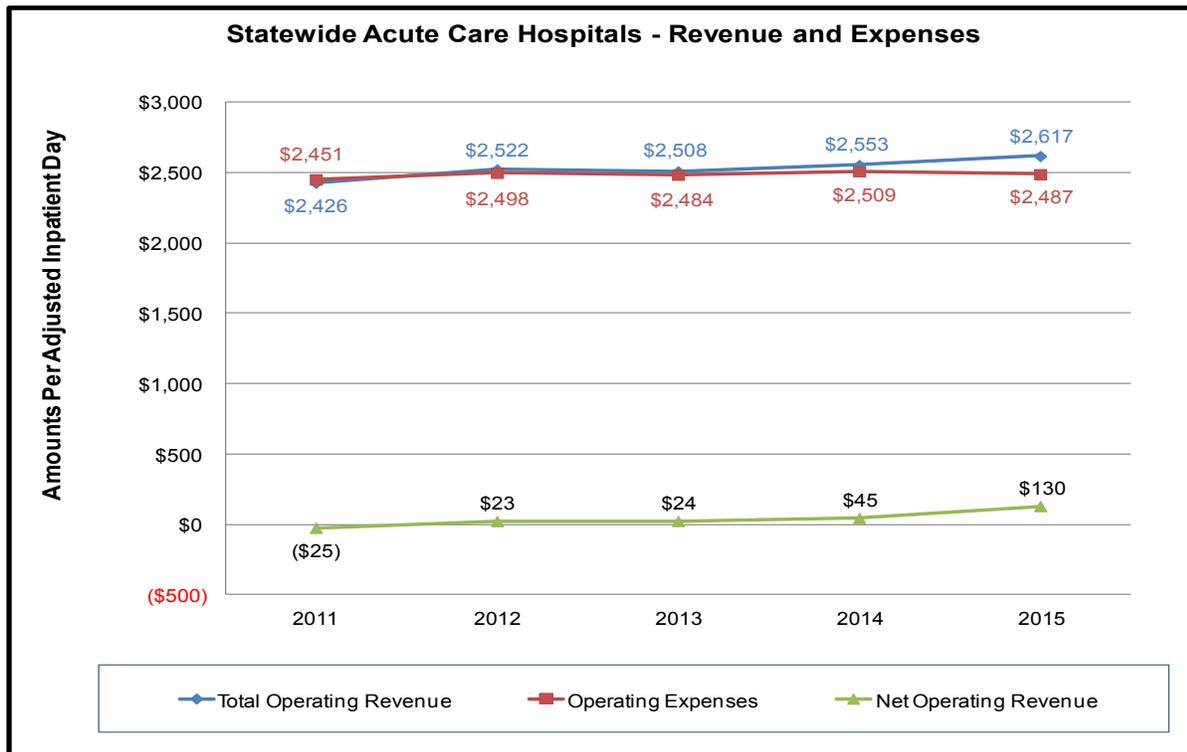
	Operating Revenue (as a Percent of Billed Charges)		Total Deductions (as a Percent of Billed Charges)	
	2011	2015	2011	2015
<b>Clark County</b>	17.02%	14.43%	82.98%	85.57%
<b>Washoe County/Carson City</b>	24.36%	23.61%	75.64%	76.39%
<b>Rural Hospitals</b>	42.74%	36.69%	57.26%	63.61%
<b>Statewide</b>	19.29%	16.71%	80.71%	83.29%

See Exhibits 7A - 7D for details.

In general, Rural hospitals are not in competition with other hospitals. As a result, Operating Revenues at Rural hospitals are a larger percentage of their Billed Charges, although the same decline seen statewide has been observed over the five-year period within the Rural Hospital group (see Exhibit 7D for details). Clark County hospitals are affected the most by preferred provider contractual arrangements with large employee groups. With this, their Total Deductions are the highest when compared to Washoe County/Carson City and the Rural hospitals.

### Revenue and Expenses

Using Per Adjusted Inpatient Day information, the following graph displays the relationship of Total Operating Revenue, Operating Expenses and Net Operating Revenue from hospital operations on a statewide basis over the five-year period. The financial indicators listed in Exhibit 7A are the basis for the graph below:



Operating Expense and Operating Revenue Compared with the Producer Price Index (PPI) and Consumer Price Index for All Urban Consumers (CPI-U)<sup>9</sup>

PPI and CPI-U each measure price change over time for a fixed set of goods and services, however, they differ in two critical areas: (1) the composition of the set of goods and services, and (2) the types of prices collected for the included goods and services. The target set of goods and services included in the PPI is the entire marketed output of U.S. producers, excluding imports. The target set of items included in the CPI-U is the set of goods and services purchased for consumption purposes by urban U.S. households. This set includes imports.

The price collected for an item included in the PPI is the revenue received by its producer. Sales and excise taxes are not included in the price because they do not represent revenue to the producer. The price collected for an item included in the CPI-U is the out-of-pocket expenditure by a consumer for the item. Sales and excise taxes are included in the price because they are necessary expenditures by the consumer for the item.

The differences between the PPI and CPI-U are consistent with the different uses of the two measures. A primary use of the PPI is to deflate revenue streams in order to measure real growth in output. A primary use of the CPI-U is to adjust income and expenditure streams for changes in the cost of living.

Due to changes to the industry groups by the Department of Labor, there are slight differences in the PPI data for years prior to 2010. The current industry group is named *General Medical and Surgical Hospitals*, while the prior industry group was more generally named *Hospitals*.

5 Year Change	Base # / Percentage	2011	2012	2013	2014	2015
	<b>NV Acute Hospitals Operating Expenses per Adjusted Inpatient Day</b>	\$2,451	\$2,498	\$2,484	\$2,509	\$2,487
1.47%	% increase (decrease) from prior year	(0.57%)	1.92%	(0.56%)	1.01%	(0.88%)
	<b>NV Acute Hospitals Total Operating Revenue per Adjusted Inpatient Day</b>	\$2,426	\$2,522	\$2,508	\$2,553	\$2,617
7.87%	% increase (decrease) from prior year	0.75%	3.96%	(0.56%)	1.79%	2.51%
	<b>CPI-U (all)</b>	224.9	229.6	233.0	236.7	237.0
5.37%	% increase (decrease) from prior year	3.16%	2.07%	1.46%	1.62%	0.12%
	<b>PPI General Medical and Surgical Hospital</b>	177.4	182.0	186.0	188.1	189.4
6.76%	% increase (decrease) from prior year	2.13%	2.59%	2.20%	1.13%	0.69%

While Operating Expenses Per Adjusted Inpatient Day decreased from 2014 by 0.88%, the Total Operating Revenue per Adjusted Inpatient Day has increased from 2014 by 2.51%. Additionally, the PPI and the CPI-U have increased from the previous year by 0.69% and 0.12%, respectively.

<sup>9</sup>The CPI-U and PPI are published by the Bureau of Labor Statistics, U. S. Department of Labor.

## Summary - All Hospitals

### UTILIZATION REPORTS

Ten-year Acute Care Hospital utilization information is summarized in *Exhibit 8*. The charts include Average Daily Census, Occupancy Percentages, Average Length of Stay, Admissions Per 1,000 Population, Inpatient Days Per 1,000 Population and Average Licensed Beds Per 1,000 Population. The ten year trends are as follows:

Utilization Summary			
	2006	2015	Percent Change
Estimated Nevada Population	2,623,050	2,890,845	10.21%
Average Daily Census	3,296.4	3,690.0	11.94%
Occupancy Percentages	67.16%	61.65%	(8.20%)
Average Length of Stay (Days)	4.7	5.1	8.51%
Admissions	254,773	262,862	3.17%
Admissions Per 1,000 Population	97.1	90.9	(6.39%)
Inpatient Days	1,203,202	1,346,849	11.94%
Inpatient Days Per 1,000 Population	458.7	465.9	1.57%
Average Licensed Beds	5,029	5,985	19.01%
Licensed Beds Per 1,000 Population	1.9	2.1	10.53%

The estimated Nevada population in 2015 increased 10.21% compared to 10 years ago in 2006. Admissions and Inpatient Days have also increased by 3.17% and 11.94%, respectively. Nevada continues to effectively compensate for these increases, as indicated by the increase from 5,029 Average Licensed Beds in 2006 to 5,985 in 2015.

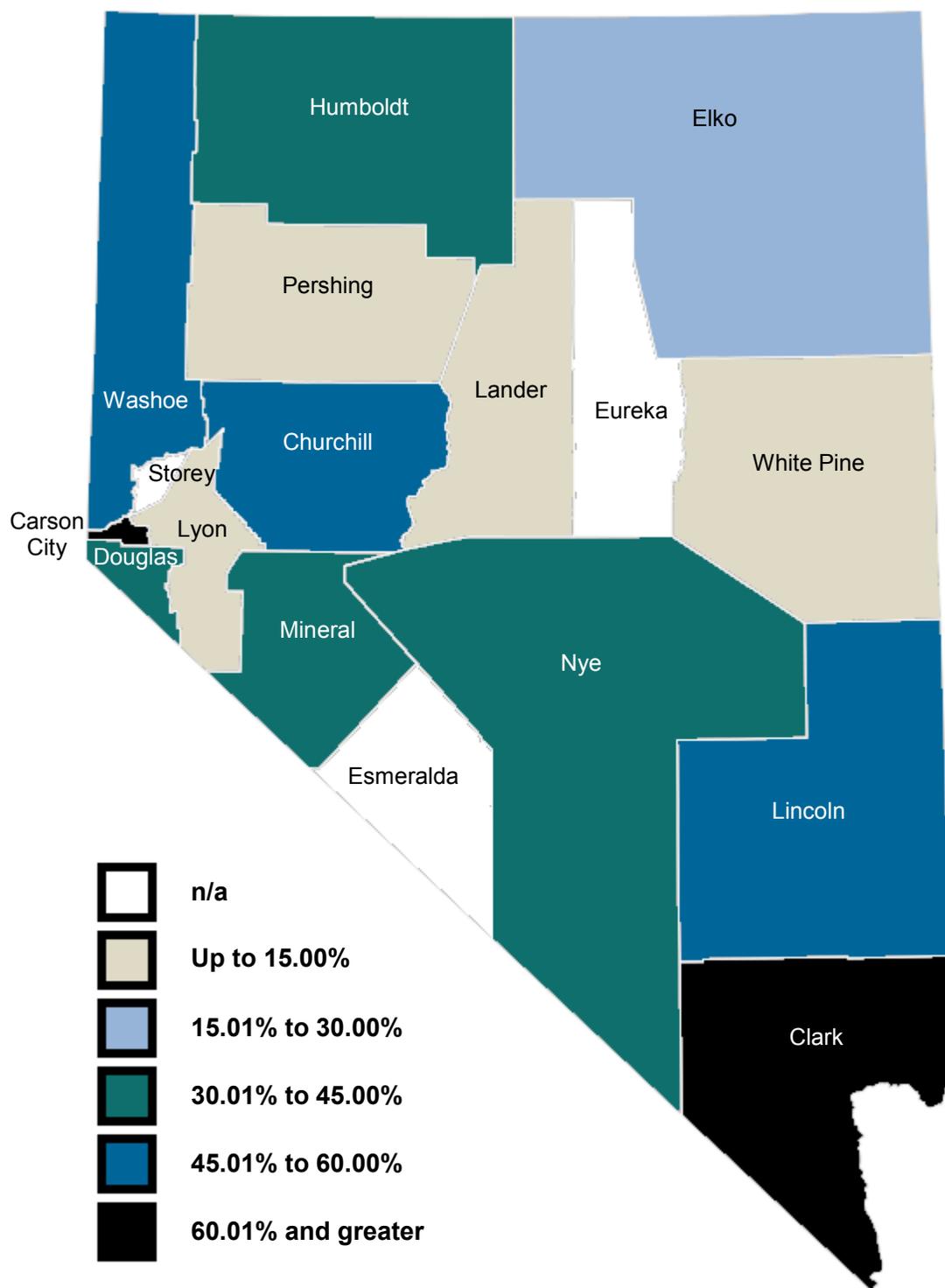
In Nevada, the 2015 Average Occupancy Percentage decreased from 67.16% in 2006 to 61.65% in 2015,<sup>10</sup> and the Averaged Licensed Beds increased 19.01% over the same period. Correspondingly, the 2015 Licensed Beds Per 1,000 Population increased slightly from 1.9 in 2006 to 2.1 in 2015. For comparison, the most recent available national average number of Hospital Beds Per 1,000 Population was 2.5 in 2014, and the most recent available national Average Occupancy Percentage was 62.03%.<sup>11</sup>

Rural hospitals in Nevada have lower Licensed Beds Per 1,000 Population. For 2015, rural hospitals have 1.2 Beds Per 1,000 Population as compared to the statewide 2.1 Beds Per 1,000 Population. This however is sufficient for the population in rural counties as demonstrated in their low combined Occupancy Percentage of 34.62% for 2015. Admissions and Inpatient Days Per 1,000 Population are also lower for the rural hospitals. Admissions for rural hospitals are at 34.9 per 1,000 population compared to statewide average of 90.9 per 1,000 population. Inpatient Days for rural hospitals are 151.9 per 1,000 population while statewide average is 465.9 per 1,000 population.

<sup>10</sup>National average occupancy data from StateHealthFacts.org – Kaiser Family Foundation (source from AHA Annual Survey); Nevada data from *Exhibit 7*

<sup>11</sup>StateHealthFacts.org – Kaiser Family Foundation (source from AHA Annual Survey)

### 2015 Acute Care Hospital Occupancy Percentage by County



## Summary - All Hospitals

### Psychiatric Hospitals

All eight psychiatric hospitals reported profits for 2015.<sup>12</sup> As a group, they reported a Net Income<sup>13</sup> of \$20,825,468 from Total Operating Revenue of \$140,813,193. The comparison of 2014 and 2015 Net Income (Loss) for each facility is reported below:

Psychiatric Hospital Net Income (Loss)		
	2014	2015
Desert Parkway Behavioral Healthcare Hospital <sup>14</sup>	(\$2,758,163)	\$69,880
Montevista Hospital	\$3,116,380	\$4,910,862
Red Rock Behavioral Health	\$1,414,306	\$503,790
Seven Hills Behavioral Institute	\$4,464,435	\$6,265,671
Spring Mountain Sahara	\$1,050,028	\$1,129,185
Spring Mountain Treatment Center	\$1,339,096	\$3,189,599
West Hills Hospital	\$2,459,726	\$3,682,063
Willow Springs Center	\$825,868	\$1,074,418
<b>TOTAL</b>	<b>\$11,911,676</b>	<b>\$20,825,468</b>

The Total Operating Revenue and Net Income from the last five years are as follows (in millions of dollars):

Psychiatric Hospital Net Margin					
	2011	2012	2013	2014	2015
<b>Total Operating Revenue</b>	93.3	95.2	96.2	116.2	140.8
<b>Net Income</b>	6.3	7.6	9.2	11.9	20.8
<b>Net Margin</b>	<b>6.7%</b>	<b>8.0%</b>	<b>9.6%</b>	<b>10.3%</b>	<b>14.8%</b>

See Exhibit 9E for details.

Red Rock Behavioral Health was merged with Montevista Hospital on July 22, 2016. In an announcement of the move, Strategic Behavioral Health, LLC, the parent company of both merging hospitals, indicates the move of Red Rock Behavioral Health Hospital to be a part of Montevista will better address mental health issues within the senior community by increasing the capacity within their Geriatric Unit.

A new behavioral health hospital, Reno Behavioral Healthcare Hospital, broke ground in the Meadowood area of Reno earlier this year. The 120-bed mental health hospital and addiction rehabilitation center is expected to open in late spring of 2017.

<sup>12</sup>The state-operated facilities did not report

<sup>13</sup>Total Revenue equals Total Operating Revenue plus Non-Operating Revenue – See Exhibit 8

<sup>14</sup>Desert Parkway Behavioral Healthcare Hospital opened in January of 2014

**Rehabilitation/Long-Term Care/Specialty Hospitals**

The Rehabilitation/Long-Term Care/Specialty Hospitals reported a Net Income of \$39,512,614 from Total Operating Revenue of \$320,777,169. Twelve of the fifteen Rehabilitation/Long-Term Care/Specialty Hospitals reported profits in 2015. The figures from the last five years are as follows (in millions of dollars):

Rehabilitation/Specialty Hospital Net Margin					
	2011	2012	2013	2014	2015
<b>Total Operating Revenue</b>	305.9	317.7	302.5	322.6	320.8
<b>Net Income</b>	57.1	50.2	34.2	39.7	39.5
<b>Net Margin</b>	18.7%	15.8%	11.3%	12.3%	12.3%

See Exhibit 9D for details.

**Critical Access Hospitals**

Critical Access Hospital (CAH) is a designation given to certain rural hospitals by the Centers for Medicare and Medicaid Services (CMS). To ensure that CAHs deliver services to improve access to rural areas that need it most, restrictions exist concerning what types of hospitals are eligible for the CAH designation. The primary eligibility requirements for CAHs are:

- A CAH must have 25 or fewer acute care inpatient beds
- Typically, it must be located more than 35 miles from another hospital
- It must maintain an annual average length of stay of 96 hours or less for acute care patients
- It must provide 24/7 emergency care services

Nevada has 13 hospitals designated as CAHs:

- Banner Churchill Community Hospital<sup>15</sup>
- Battle Mountain General Hospital
- Boulder City Hospital
- Carson Valley Medical Center
- Desert View Regional Medical Center
- Grover C Dils Medical Center
- Humboldt General Hospital
- Incline Village Community Hospital
- Mesa View Regional Hospital
- Mount Grant General Hospital
- Pershing General Hospital
- South Lyon Medical Center<sup>16</sup>
- William Bee Ririe Hospital

In Nevada, hospitals designated as CAHs by CMS are reimbursed by Nevada Medicaid through a retrospective cost reimbursement process for fee-for-service inpatient services. Fee-for-service outpatient services provided by CAHs are reimbursed based on the Medicaid Outpatient Hospital fee schedule.

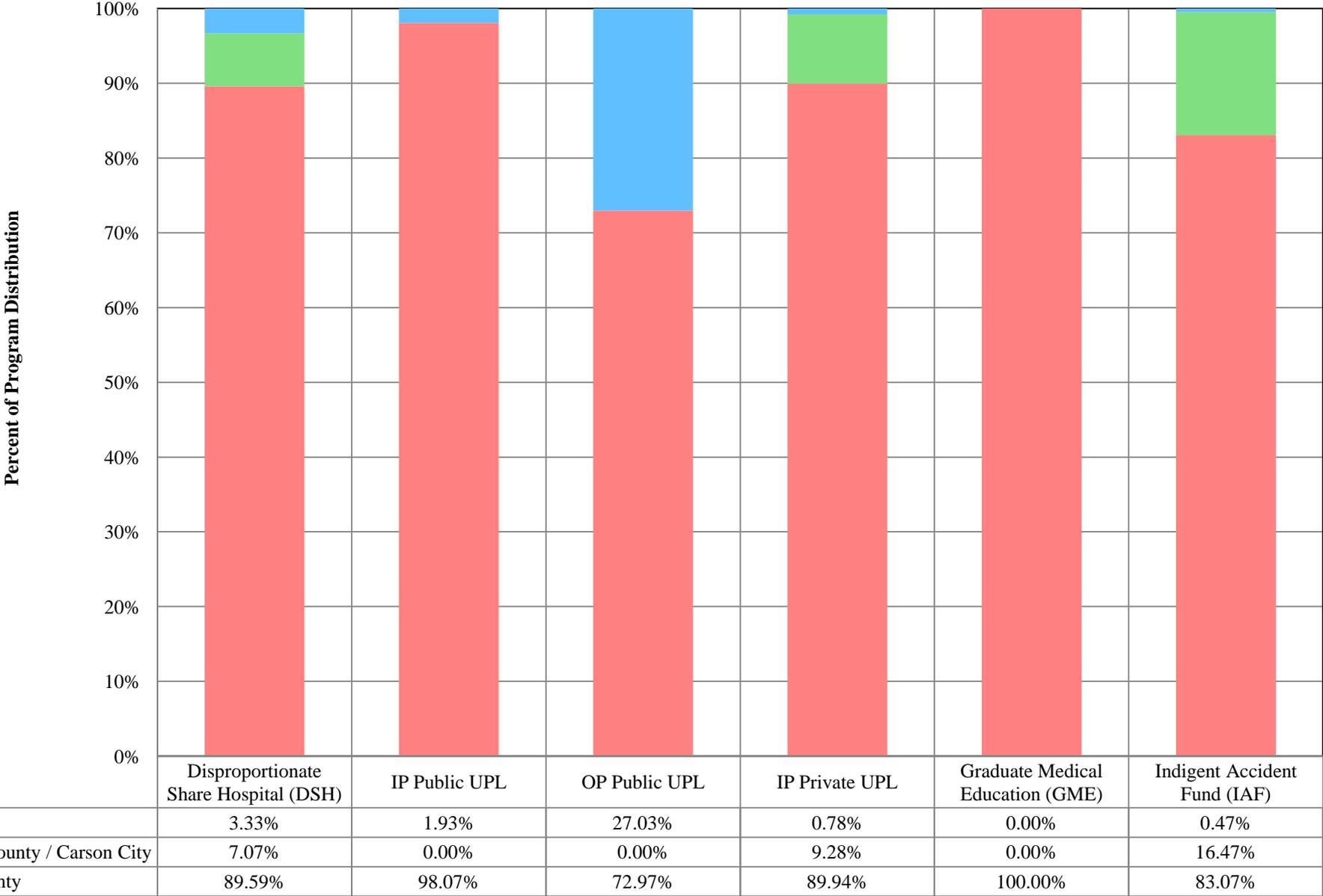
<sup>15</sup>Banner Churchill Community Hospital received CAH designation effective October 2015. The hospital lowered their number of beds from 40 to 25 in order to meet the CAH designation eligibility requirements.

<sup>16</sup>South Lyon Medical Center received CAH designation effective May 2016.



# Exhibits

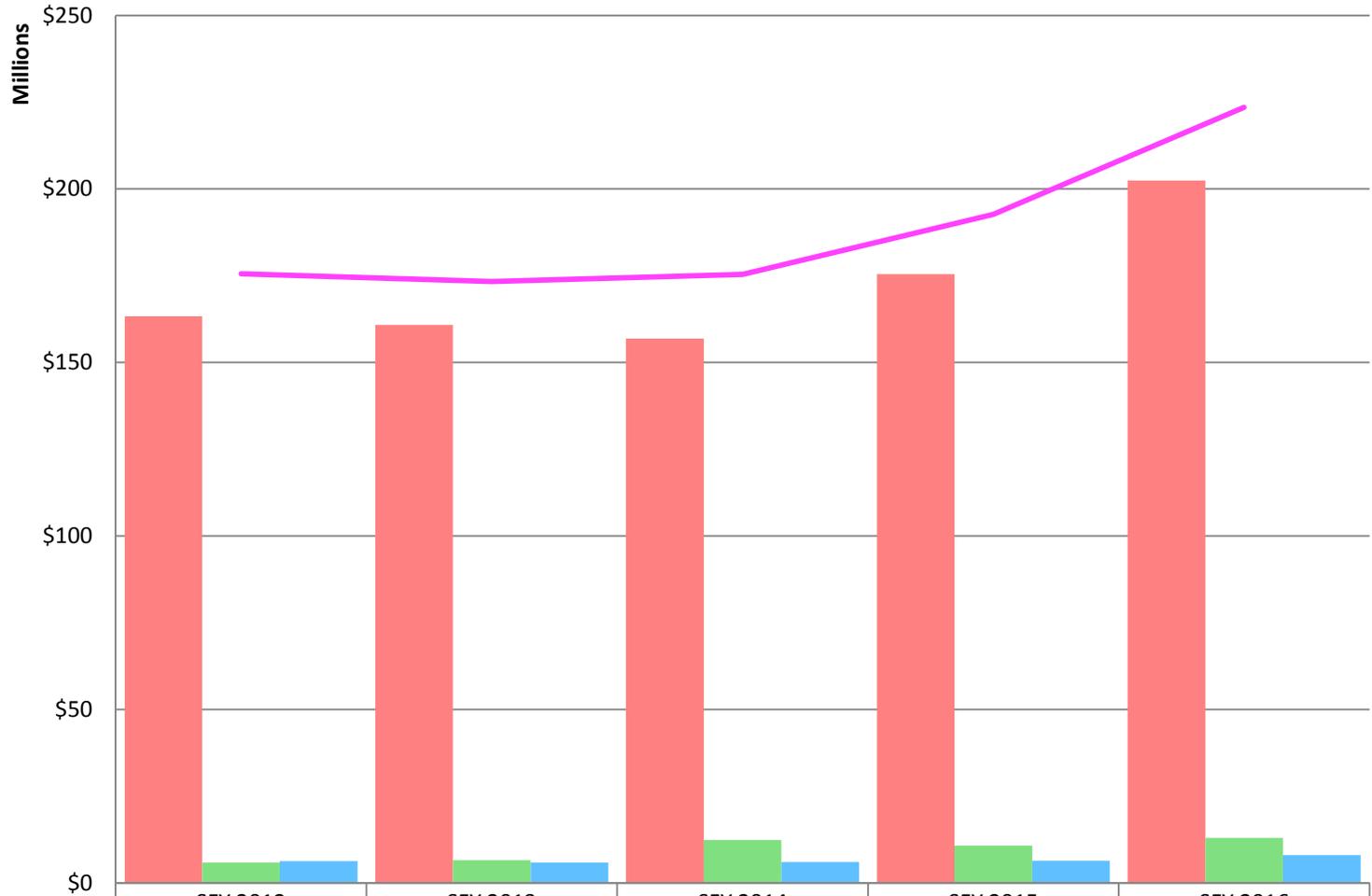
## Nevada Acute Care Hospital SFY 2016 Supplemental Payment Program Distribution



**SFY 2016 Nevada Medicaid Supplemental Payments by Hospital**

SFY 2016 Hospital Supplemental Payment Program	Disproportionate Share Hospital (DSH)	IP Public UPL	OP Public UPL	IP Private UPL	Graduate Medical Education (GME)	Indigent Accident Fund (IAF)	Total
<b>Nevada</b>	<b>\$77,525,269</b>	<b>\$67,184,443</b>	<b>\$14,419,638</b>	<b>\$7,044,232</b>	<b>\$15,488,484</b>	<b>\$41,876,300</b>	<b>\$223,538,366</b>
<b>Clark County</b>	<b>\$69,458,562</b>	<b>\$65,885,438</b>	<b>\$10,521,949</b>	<b>\$6,335,805</b>	<b>\$15,488,484</b>	<b>\$34,784,610</b>	<b>\$202,474,848</b>
Centennial Hills Hospital Medical Center	\$84,086	\$0	\$0	\$257,826	\$0	\$566,086	\$907,998
Desert Springs Hospital Medical Center	\$0	\$0	\$0	\$2,164,126	\$0	\$1,697,563	\$3,861,689
Mountainview Hospital	\$114,855	\$0	\$0	\$403,992	\$0	\$2,703,758	\$3,222,605
North Vista Hospital	\$88,223	\$0	\$0	\$190,615	\$0	\$2,092,431	\$2,371,269
Southern Hills Hospital & Medical Center	\$74,698	\$0	\$0	\$179,244	\$0	\$454,957	\$708,899
Spring Valley Hospital Medical Center	\$75,250	\$0	\$0	\$274,545	\$0	\$1,668,563	\$2,018,358
St Rose Dominican Hospital - De Lima	\$156,313	\$0	\$0	\$326,688	\$0	\$455,653	\$938,654
St Rose Dominican Hospital - San Martin	\$110,908	\$0	\$0	\$295,335	\$0	\$347,308	\$753,551
St Rose Dominican Hospital - Siena	\$122,808	\$0	\$0	\$511,020	\$0	\$946,571	\$1,580,399
Summerlin Hospital Medical Center	\$72,173	\$0	\$0	\$277,013	\$0	\$1,788,044	\$2,137,230
Sunrise Hospital & Medical Center	\$229,267	\$0	\$0	\$994,314	\$0	\$8,578,681	\$9,802,262
University Medical Center	\$68,198,979	\$65,885,438	\$10,521,949	\$0	\$15,488,484	\$10,349,015	\$170,443,865
Valley Hospital Medical Center	\$131,002	\$0	\$0	\$461,087	\$0	\$3,135,979	\$3,728,068
<b>Washoe County / Carson City</b>	<b>\$5,483,562</b>	<b>\$0</b>	<b>\$0</b>	<b>\$653,357</b>	<b>\$0</b>	<b>\$6,895,282</b>	<b>\$13,032,201</b>
Carson Tahoe Regional Medical Center	\$940,581	\$0	\$0	\$0	\$0	\$862,122	\$1,802,703
Northern Nevada Medical Center	\$0	\$0	\$0	\$323,454	\$0	\$141,058	\$464,512
Renown Regional Medical Center	\$4,542,981	\$0	\$0	\$224,503	\$0	\$5,153,936	\$9,921,420
Renown South Meadows Medical Center	\$0	\$0	\$0	\$105,400	\$0	\$77,025	\$182,425
St Marys Regional Medical Center	\$0	\$0	\$0	\$0	\$0	\$657,727	\$657,727
Sierra Surgery & Imaging LLC	\$0	\$0	\$0	\$0	\$0	\$3,414	\$3,414
<b>Rural</b>	<b>\$2,583,145</b>	<b>\$1,299,005</b>	<b>\$3,897,689</b>	<b>\$55,070</b>	<b>\$0</b>	<b>\$196,408</b>	<b>\$8,031,317</b>
Banner Churchill Community Hospital	\$716,570	\$0	\$0	\$0	\$0	\$88,063	\$804,633
Battle Mountain General Hospital	\$0	\$1,856	\$389,920	\$0	\$0	\$0	\$391,776
Boulder City Hospital	\$50,594	\$0	\$0	\$0	\$0	\$0	\$50,594
Carson Valley Medical Center	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Desert View Regional Medical Center	\$460,947	\$0	\$0	\$0	\$0	\$0	\$460,947
Grover C. Dils Medical Center	\$0	\$35,259	\$80,176	\$0	\$0	\$0	\$115,435
Humboldt General Hospital	\$411,861	\$642,079	\$1,431,521	\$0	\$0	\$0	\$2,485,461
Incline Village Community Hospital	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Mesa View Regional Hospital	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Mount Grant General Hospital	\$194,403	\$339,597	\$222,163	\$0	\$0	\$0	\$756,163
Northeastern Nevada Regional Hospital	\$316,195	\$0	\$0	\$55,070	\$0	\$108,113	\$479,378
Nye Regional Medical Center	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Pershing General Hospital	\$0	\$27,836	\$282,429	\$0	\$0	\$0	\$310,265
South Lyon Health Center	\$147,971	\$18,557	\$236,998	\$0	\$0	\$232	\$403,758
William Bee Ririe	\$284,604	\$233,821	\$1,254,482	\$0	\$0	\$0	\$1,772,907

## Nevada Acute Care Hospital Supplemental Payments



	SFY 2012	SFY 2013	SFY 2014	SFY 2015	SFY 2016
Clark County	\$163,320,857	\$160,819,530	\$156,884,318	\$175,483,984	\$202,474,848
Washoe County / Carson City	\$5,909,954	\$6,605,875	\$12,385,525	\$10,806,174	\$13,032,201
Rural	\$6,335,081	\$5,896,296	\$6,120,429	\$6,400,844	\$8,031,317
Nevada	\$175,565,892	\$173,321,701	\$175,390,272	\$192,691,002	\$223,538,366

## SFY 2016 Nevada Medicaid Supplemental Payments by Hospital

5-Year Comparison of Hospital Supplemental Payment Program	SFY 2012	SFY 2013	SFY 2014	SFY 2015	SFY 2016	5-Year Increase/Decrease
<b>Nevada</b>	<b>\$175,565,892</b>	<b>\$173,321,701</b>	<b>\$175,390,272</b>	<b>\$192,691,002</b>	<b>\$223,538,366</b>	<b>27%</b>
<b>Clark County</b>	<b>\$163,320,857</b>	<b>\$160,819,530</b>	<b>\$156,884,318</b>	<b>\$175,483,984</b>	<b>\$202,474,848</b>	<b>24%</b>
Centennial Hills Hospital Medical Center	\$90,703	\$110,503	\$824,060	\$533,678	\$907,998	901%
Desert Springs Hospital Medical Center	\$422,581	\$417,809	\$1,445,339	\$1,401,436	\$3,861,689	814%
Mountainview Hospital	\$101,973	\$183,569	\$2,333,260	\$1,534,576	\$3,222,605	3060%
North Vista Hospital	\$302,919	\$1,227,352	\$2,367,109	\$1,577,362	\$2,371,269	683%
Southern Hills Hospital & Medical Center	\$57,820	\$84,331	\$626,730	\$525,151	\$708,899	1126%
Spring Valley Hospital Medical Center	\$82,884	\$141,559	\$1,175,004	\$1,371,647	\$2,018,358	2335%
St Rose Dominican Hospital - De Lima	\$388,520	\$96,598	\$779,879	\$664,874	\$938,654	142%
St Rose Dominican Hospital - San Martin	\$91,669	\$93,123	\$553,578	\$494,683	\$753,551	722%
St Rose Dominican Hospital - Siena	\$78,213	\$180,448	\$1,083,006	\$1,328,113	\$1,580,399	1921%
Summerlin Hospital Medical Center	\$99,719	\$141,300	\$1,246,164	\$1,483,994	\$2,137,230	2043%
Sunrise Hospital & Medical Center	\$1,141,188	\$842,966	\$5,683,330	\$6,360,807	\$9,802,262	759%
University Medical Center	\$160,264,791	\$157,036,634	\$136,016,479	\$155,422,716	\$170,443,865	6%
Valley Hospital Medical Center	\$197,877	\$263,338	\$2,750,380	\$2,784,947	\$3,728,068	1784%
<b>Washoe County / Carson City</b>	<b>\$5,909,954</b>	<b>\$6,605,875</b>	<b>\$12,385,525</b>	<b>\$10,806,174</b>	<b>\$13,032,201</b>	<b>121%</b>
Carson Tahoe Regional Medical Center	\$447,346	\$1,088,537	\$1,760,523	\$1,733,957	\$1,802,703	303%
Northern Nevada Medical Center	\$79,973	\$90,872	\$293,887	\$216,686	\$464,512	481%
Renown Regional Medical Center	\$5,363,514	\$5,407,511	\$9,400,057	\$8,257,017	\$9,921,420	85%
Renown South Meadows Medical Center	\$19,121	\$18,955	\$132,539	\$65,075	\$182,425	854%
St Marys Regional Medical Center	\$0	\$0	\$782,969	\$530,279	\$657,727	N/A
Sierra Surgery & Imaging LLC	\$0	\$0	\$15,549	\$3,161	\$3,414	N/A
<b>Rural</b>	<b>\$6,335,081</b>	<b>\$5,896,296</b>	<b>\$6,120,429</b>	<b>\$6,400,844</b>	<b>\$8,031,317</b>	<b>27%</b>
Banner Churchill Community Hospital	\$2,022,840	\$1,285,627	\$939,638	\$785,004	\$804,633	-60%
Battle Mountain General Hospital	\$143,188	\$193,794	\$231,501	\$271,270	\$391,776	174%
Boulder City Hospital	\$10,000	\$10,000	\$45,202	\$38,547	\$50,594	406%
Carson Valley Medical Center	\$0	\$0	\$0	\$0	\$0	N/A
Desert View Regional Medical Center	\$165,740	\$115,378	\$572,762	\$494,296	\$460,947	178%
Grover C. Dils Medical Center	\$59,739	\$49,674	\$68,826	\$72,837	\$115,435	93%
Humboldt General Hospital	\$1,149,460	\$1,374,625	\$1,651,718	\$1,773,398	\$2,485,461	116%
Incline Village Community Hospital	\$0	\$0	\$0	\$0	\$0	N/A
Mesa View Regional Hospital	\$10,000	\$0	\$0	\$0	\$0	-100%
Mount Grant General Hospital	\$568,690	\$492,189	\$364,957	\$424,149	\$756,163	33%
Northeastern Nevada Regional Hospital	\$74,786	\$143,839	\$435,668	\$365,813	\$479,378	541%
Nye Regional Medical Center	\$0	\$0	\$7,571	\$1,756	\$0	N/A
Pershing General Hospital	\$228,639	\$257,858	\$232,699	\$197,190	\$310,265	36%
South Lyon Health Center	\$434,622	\$229,127	\$384,504	\$325,003	\$403,758	-7%
William Bee Ririe	\$1,467,377	\$1,744,185	\$1,185,382	\$1,651,580	\$1,772,907	21%

NEVADA HOSPITALS HOSPITAL INFORMATION	Data as of	Number of Beds	Type of Ownership	Does the Hospital Have or Offer				Is the Hospital a Sole Provider of Any Specific Clinical Services in the Area?
				Community Benefits Coordinator	Charitable Foundation	Conduct Teaching & Research	Trauma Center	
<b><u>CLARK COUNTY HOSPITALS</u></b>								
<b>HCA Holdings Inc. Hospitals</b>								
MountainView Hospital	12/31/15	340	For-Profit	No	No	Yes	Yes	No
Southern Hills Hospital & Medical Center	12/31/15	134	For-Profit	No	No	Yes	No	No
Sunrise Hospital & Medical Center	12/31/15	690	For-Profit	No	No	Yes	Level II	Yes
<b><u>Universal Health Systems Hospitals (UHS)</u></b>								
Centennial Hills Hospital Medical Center	12/31/15	190	For-Profit	No	No	No	No	No
Desert Springs Hospital Medical Center	12/31/15	276	For-Profit	No	No	No	No	No
Henderson Hospital <sup>(1)</sup>	12/31/15	142	For-Profit	N/A	N/A	N/A	N/A	N/A
Spring Valley Hospital Medical Center	12/31/15	237	For-Profit	No	No	No	No	No
Summerlin Hospital Medical Center	12/31/15	454	For-Profit	No	No	No	No	Yes
Valley Hospital Medical Center	12/31/15	301	For-Profit	No	No	Yes	No	No
<b><u>Dignity Health</u></b>								
Saint Rose Dominican Hospital								
- Rose de Lima Campus	6/30/15	110	Not-for-Profit	Yes	Yes	No	No	No
- San Martin Campus	6/30/15	147	Not-for-Profit	Yes	Yes	No	No	No
- Siena Campus	6/30/15	230	Not-for-Profit	Yes	Yes	No	Level III	No
<b><u>Prime Healthcare Inc <sup>(2)</sup></u></b>								
North Vista Hospital	12/31/15	177	For-Profit	Yes	No	No	No	No
<b><u>Fundamental</u></b>								
Mountain's Edge Hospital	Information Not Provided							
<b><u>Clark County Owned Hospital</u></b>								
University Medical Center of Southern Nevada	6/30/15	541	Not-for Profit	No	Yes	Yes	Level I	Yes
<b><u>WASHOE COUNTY/CARSON CITY HOSPITALS</u></b>								
<b><u>Carson Tahoe Regional Healthcare</u></b>								
Carson Tahoe Regional Medical Center	12/31/15	205	Not-for Profit	No	Yes	No	No	Yes
<b><u>UHS</u></b>								
Northern Nevada Medical Center	12/31/15	108	For-Profit	No	No	No	No	No
<b><u>Prime Healthcare Inc</u></b>								
St. Mary's Regional Medical Center	12/31/15	380	For-Profit	No	No	No	No	No
<b><u>Renown Health</u></b>								
Renown Regional Medical Center	6/30/15	808	Not-for-Profit	Committee	Yes	Yes	Level II	Yes

<sup>(1)</sup> Henderson Hospital is currently under construction with anticipated completion in 2016 Q4.

<sup>(2)</sup> Prime Healthcare Inc acquired North Vista Hospital on 1/22/2015 from IASIS Healthcare.

<b>NEVADA HOSPITALS CAPITAL IMPROVEMENTS</b>	<b>Data as of</b>	<b>Major Expansions</b>	<b>Major Equipment</b>	<b>Capital Additions Not Required to be Reported Separately</b>	<b>Total Capital Improvement</b>
<b><u>CLARK COUNTY HOSPITALS</u></b>					
<b>HCA Holdings Inc. Hospitals</b>					
MountainView Hospital	12/31/15	\$2,714,167	\$3,505,677	\$3,663,797	\$9,883,641
Southern Hills Hospital & Medical Center	12/31/15	\$1,270,000	\$2,742,411	\$3,543,393	\$7,555,804
Sunrise Hospital & Medical Center	12/31/15	\$0	\$5,252,941	\$8,045,292	\$13,298,233
<b>Universal Health Systems Hospitals (UHS)</b>					
Centennial Hills Hospital Medical Center	12/31/15	\$2,070,469	\$1,635,147	\$643,656	\$4,349,272
Desert Springs Hospital Medical Center	12/31/15	\$5,083,517	\$6,318,425	\$3,115,751	\$14,517,693
Henderson Hospital <sup>(1)</sup>	12/31/15	\$10,736,303	\$0	\$0	\$10,736,303
Spring Valley Hospital Medical Center	12/31/15	\$19,411,669	\$3,475,547	\$420,626	\$23,307,842
Summerlin Hospital Medical Center	12/31/15	\$493,783	\$7,941,352	\$1,018,624	\$9,453,759
Valley Hospital Medical Center	12/31/15	\$2,935,388	\$6,985,235	\$213,992	\$10,134,615
<b>Dignity Health</b>					
Saint Rose Dominican Hospital					
- Rose de Lima Campus	6/30/15	\$0	\$804,876	\$2,915,266	\$3,720,142
- San Martin Campus	6/30/15	\$0	\$0	\$3,077,639	\$3,077,639
- Siena Campus	6/30/15	\$25,998,557	\$0	\$46,348,955	\$72,347,512
<b>Prime Healthcare Inc <sup>(2)</sup></b>					
North Vista Hospital	12/31/15	\$0	\$0	\$6,366,784	\$6,366,784
<b>Fundamental</b>					
Mountain's Edge Hospital	Information Not Provided				
<b>Clark County Owned Hospital</b>					
University Medical Center of Southern Nevada	6/30/15	\$3,833,579	\$7,970,049	\$0	\$11,803,628
<b>TOTAL CLARK COUNTY HOSPITALS</b>		<b>\$74,547,432</b>	<b>\$46,631,660</b>	<b>\$79,373,775</b>	<b>\$200,552,867</b>
<b><u>WASHOE COUNTY/CARSON CITY HOSPITALS</u></b>					
<b>Carson Tahoe Regional Healthcare</b>					
Carson Tahoe Regional Medical Center	12/31/15	\$0	\$6,921,930	\$20,313,508	\$27,235,438
<b>UHS</b>					
Northern Nevada Medical Center	12/31/15	\$1,155,829	\$3,178,761	\$399,951	\$4,734,541
<b>Prime Healthcare Inc</b>					
St. Mary's Regional Medical Center	12/31/15	\$0	\$2,195,969	\$2,562,939	\$4,758,908
<b>Renown Health</b>					
Renown Regional Medical Center	6/30/15	\$0	\$6,656,990	\$10,919,367	\$17,576,357
<b>TOTAL WASHOE COUNTY / CARSON CITY HOSPITALS</b>		<b>\$1,155,829</b>	<b>\$18,953,650</b>	<b>\$34,195,765</b>	<b>\$54,305,244</b>
<b>GRAND TOTALS</b>		<b>\$75,703,261</b>	<b>\$65,585,310</b>	<b>\$113,569,540</b>	<b>\$254,858,111</b>
<sup>(1)</sup> Henderson Hospital is currently under construction with anticipated completion in 2016 Q4. <sup>(2)</sup> Prime Healthcare Inc acquired North Vista Hospital on 1/22/2015 from IASIS Healthcare.					

NEVADA HOSPITALS COMMUNITY BENEFITS	Data as of	Subsidized Health Services	Health Professions Education	Community Health Improvements Services	Other Categories	Total Community Benefits
<b><u>CLARK COUNTY HOSPITALS</u></b>						
<b>HCA Holdings Inc. Hospitals</b>						
MountainView Hospital	12/31/15	\$60,049,060	\$1,505,906	\$1,159,841	\$1,841,373	\$64,556,180
Southern Hills Hospital & Medical Center	12/31/15	\$22,658,919	\$320,768	\$511,766	\$801,274	\$24,292,727
Sunrise Hospital & Medical Center	12/31/15	\$106,965,539	\$2,073,978	\$1,905,472	\$2,693,471	\$113,638,460
<b>Universal Health Systems Hospitals (UHS)</b>						
Centennial Hills Hospital Medical Center	12/31/15	\$39,224,534	\$92,940	\$377,708	\$753,934	\$40,449,116
Desert Springs Hospital Medical Center	12/31/15	\$31,905,916	\$197,437	\$617,134	\$1,169,468	\$33,889,955
Henderson Hospital <sup>(1)</sup>	12/31/15	\$0	\$0	\$0	\$0	\$0
Spring Valley Hospital Medical Center	12/31/15	\$35,482,082	\$182,680	\$582,789	\$1,422,027	\$37,669,578
Summerlin Hospital Medical Center	12/31/15	\$51,222,600	\$169,682	\$784,309	\$1,463,488	\$53,640,079
Valley Hospital Medical Center	12/31/15	\$28,072,846	\$6,353,788	\$704,348	\$1,544,142	\$36,675,124
<b>Dignity Health</b>						
Saint Rose Dominican Hospital						
- Rose de Lima Campus	6/30/15	\$41,468,936	\$0	\$65,652	\$720,113	\$42,254,701
- San Martin Campus	6/30/15	\$44,012,002	\$0	\$82,060	\$1,103,998	\$45,198,060
- Siena Campus	6/30/15	\$69,813,473	\$1,674,596	\$1,586,450	\$2,006,063	\$75,080,582
<b>Prime Healthcare Inc <sup>(2)</sup></b>						
North Vista Hospital	12/31/15	\$10,340,209	\$0	\$0	\$232,645	\$10,572,854
<b>Fundamental</b>						
Mountain's Edge Hospital	Information Not Provided					
<b>Clark County Owned Hospital</b>						
University Medical Center of Southern Nevada	6/30/15	\$129,911,415	\$21,463,442	\$10,711,694	\$1,348,429	\$163,434,980
<b>TOTAL CLARK COUNTY HOSPITALS</b>		<b>\$671,127,531</b>	<b>\$34,035,217</b>	<b>\$19,089,223</b>	<b>\$17,100,425</b>	<b>\$741,352,396</b>
<b><u>WASHOE COUNTY/CARSON CITY HOSPITALS</u></b>						
<b>Carson Tahoe Regional Healthcare</b>						
Carson Tahoe Regional Medical Center	12/31/15	\$19,566,658	\$125,743	\$3,890,906	\$556,443	\$24,139,750
<b>UHS</b>						
Northern Nevada Medical Center	12/31/15	\$8,726,225	\$15,031	\$232,817	\$341,807	\$9,315,880
<b>Prime Healthcare Inc</b>						
St. Mary's Regional Medical Center	12/31/15	\$31,261,265	\$0	\$477,988	\$1,680,980	\$33,420,233
<b>Renown Health</b>						
Renown Regional Medical Center	6/30/15	\$51,415,507	\$3,719,447	\$2,743,831	\$2,736,368	\$60,615,153
<b>TOTAL WASHOE COUNTY / CARSON CITY HOSPITALS</b>		<b>\$110,969,655</b>	<b>\$3,860,221</b>	<b>\$7,345,542</b>	<b>\$5,315,598</b>	<b>\$127,491,016</b>
<b>GRAND TOTALS</b>		<b>\$782,097,186</b>	<b>\$37,895,438</b>	<b>\$26,434,765</b>	<b>\$22,416,023</b>	<b>\$868,843,412</b>

<sup>(1)</sup> Henderson Hospital is currently under construction with anticipated completion in 2016 Q4.

<sup>(2)</sup> Prime Healthcare Inc acquired North Vista Hospital on 1/22/2015 from IASIS Healthcare.

**NEVADA HOSPITALS  
HOME OFFICE ALLOCATION**

**CLARK COUNTY HOSPITALS**

**HCA Holdings Inc. Hospitals**

MountainView Hospital  
Southern Hills Hospital & Medical Center  
Sunrise Hospital & Medical Center

**Universal Health Systems Hospitals (UHS)**

Centennial Hills Hospital Medical Center  
Desert Springs Hospital Medical Center  
Henderson Hospital<sup>(1)</sup>  
Spring Valley Hospital Medical Center  
Summerlin Hospital Medical Center  
Valley Hospital Medical Center

**Dignity Health**

Saint Rose Dominican Hospital  
- Rose de Lima Campus  
- San Martin Campus  
- Siena Campus

**Prime Healthcare Inc<sup>(2)</sup>**

North Vista Hospital

**Fundamental**

Mountain's Edge Hospital

**Clark County Owned Hospital**

University Medical Center of Southern Nevada<sup>(3)</sup>

**WASHOE COUNTY/CARSON CITY HOSPITALS**

**Carson Tahoe Regional Healthcare**

Carson Tahoe Regional Medical Center

**UHS**

Northern Nevada Medical Center

**Prime Healthcare Inc**

St. Mary's Regional Medical Center

**Renown Health**

Renown Regional Medical Center

**BASIC FORMULA FOR ALLOCATION**

\* The fee charged is 6.5% of net revenues. HCA utilizes a central oversight company, also referred to as a management company. Services provided under this management agreement include: consulting services in areas such as long-range planning, budget control systems, financial reporting systems and practices, contractual agreements, accounts receivable management, government reimbursement (including cost report preparation and filing), capital planning, internal audit, managed care contracting, legal services, and human resources services (including employee benefit design and management). The corporate office prepares and files federal, state and local tax returns and reports as well as tax audits and appeals management.

\* The corporate overhead expenses are allocated on a monthly basis to the facility based upon their monthly operating costs as a percentage of the total monthly operating costs for the entire corporation.

\* The home office, Dignity Health, makes three types of charges to the hospitals: Corporate Office Assessment, IT Assessment, and a variety of other services that are provided centrally. The Corporate Office Assessment covers the cost of the system office which provides a variety of services that are necessary to run the system. It also provides various services that are facility-oriented. The IT Assessment covers the cost of the enterprise data center and the cost of supporting all computer systems applications and help desk. Costs for these two assessments are allocated among DH facilities based on the relative size of their operating expense bases. Various other services are provided for Dignity Health hospitals including human resources, purchasing, accounting, accounts payable, payroll, reimbursement, decision support and managed care contracting. The cost of these services is allocated based upon usage.

\* Corporate office computes management fees at 6.0% of net revenues.

Information Not Provided

\* The County's Indirect Cost Allocation Plan uses a double-apportionment method to allocate centralized county government service costs to the various county departments.

\* Actual home office expenses are allocated to subsidiaries based on the relationship of budgeted subsidiary revenue to the combined budgeted revenue for all subsidiaries.

\* See **UHS** section above.

\* See **Prime Healthcare Inc** section above.

\* Actual home office expenses are allocated to subsidiaries based on the relationship of budgeted subsidiary revenue to the combined budgeted revenue for all subsidiaries.

\* Based on information included in the Nevada Hospital Reporting from the Nevada Hospital Association.

(1) Henderson Hospital is currently under construction with anticipated completion in 2016 Q4.

(2) Prime Healthcare Inc acquired North Vista Hospital on 1/22/2015 from IASIS Healthcare.

(3) UMC has an Indirect Cost Allocation Plan but per the NRS was not subject to a Compliance Audit



## **Financial & Utilization Data Available In CHIA**

### ***Acute Hospitals Financial Reports:***

#### **Section A: Revenue And Expenses**

- A01: Revenue And Expenses Totals
- A02: Inpatient Operating Revenue
- A03: Outpatient Operating Revenue
- A04: LTC Operating Revenue
- A05: Clinic Operating Revenue
- A06: Sub-Acute Operating Revenue
- A07: Operating Expenses
- A08: Non-Operating Revenue And Expenses

#### **Section B: Assets And Liabilities**

- B01: Assets And Liabilities Totals
- B02: Current Assets
- B03: Property, Facilities, Equipment Assets
- B04: Intangible And Other Assets
- B05: Liabilities

### ***Acute Hospitals Utilization Reports:***

#### **Section A: Admissions, Days, Beds**

- A01: Admissions By Payer
- A02: Days By Payer
- A03: Admissions By Service
- A04: Inpatient Days By Service
- A05: Licensed Beds By Service

#### **Section B: Surgeries And Procedures**

- B01: Inpatient Surgeries
- B02: Inpatient Procedures
- B03: Inpatient Surgeries And Procedures - Patients And Hours
- B04: Outpatient Surgeries
- B05: Outpatient Procedures
- B06: Outpatient Surgeries And Procedures - Patients And Hours

#### **Section C: Imaging**

- C01: CT Tests And MRI Tests

#### **Section D: Other Services**

- D01: Other Services
  - ER Visits
  - Cardiac Catheterizations
  - Dialysis Patients
  - Dialysis Treatments
  - Lithotripsies

#### **Section E: FTEs**

- E01: FTEs

#### **Section F: Services Inventory**

- F01: Services Inventory
- F02: Other Services Inventory

**Financial & Utilization Data Available In CHIA**

*Non-Acute Hospitals Financial Reports:*

**Section A: Revenue And Expenses**

- A01: Revenue And Expenses Totals
- A02: Inpatient Operating Revenue
- A03: Outpatient Operating Revenue
- A04: LTC Operating Revenue
- A05: Clinic Operating Revenue
- A06: Sub-Acute Operating Revenue
- A07: Operating Expenses
- A08: Non-Operating Revenue And Expenses

**Section B: Assets And Liabilities**

- B01: Assets And Liabilities Totals
- B02: Current Assets
- B03: Property, Facilities, Equipment Assets
- B04: Intangible And Other Assets
- B05: Liabilities

*Non-Acute Hospitals Utilization Reports:*

**Section A: Admissions, Days, Beds**

- A01: Admissions By Payer
- A02: Days By Payer
- A03: Admissions By Service
- A04: Inpatient Days By Service
- A05: Licensed Beds By Service

**Section B: Surgeries And Procedures**

- B01: Inpatient Surgeries
- B02: Inpatient Procedures
- B03: Inpatient Surgeries And Procedures - Patients And Hours
- B04: Outpatient Surgeries
- B05: Outpatient Procedures
- B06: Outpatient Surgeries And Procedures - Patients And Hours

**Section C: Imaging**

- C01: CT Tests And MRI Tests

**Section D: Other Services**

- D01: Other Services
  - ER Visits
  - Cardiac Catheterizations
  - Dialysis Patients
  - Dialysis Treatments
  - Lithotripsies

**Section E: FTEs**

- E01: FTEs

**Section F: Services Inventory**

- F01: Services Inventory
- F02: Other Services Inventory

## **Financial & Utilization Data Available In CHIA**

### ***Other Facilities Utilization Reports:***

#### **Ambulatory Surgery Facilities**

##### **Section A: Surgeries And Procedures**

A01: AmbSurg Outpatient Surgeries

A02: AmbSurg Outpatient Procedures

A03: AmbSurg Outpatient Surgeries And Procedures - Patients And Hours

#### **Imaging Facilities**

##### **Section B: CT And MRI**

B01: Imaging CT Scans And MRI Scans

#### **Skilled Nursing Facilities (SNF) / Intermediate Care Facilities (ICF)**

##### **Section C: Days, Discharges, Beds**

C01: SNF Inpatient Days

C02: SNF Discharges

C03: SNF Beds

#### **Hospice Facilities**

##### **Section D: Hospice Overview**

D01: Hospice Overview

##### **Section E: Patient Census**

E01: Patients By Gender And Race

E02: Patients By County

E03: Patients By Referral Source

E04: Patients By Primary Diagnosis

##### **Section F: Days Of Care By Payer**

F01: Total Days Of Care By Payer (Does not include Nursing Home Room and Board Days)

F02: Routine Home Care Days By Payer (Private Residence)

F03: Routine Home Care Days By Payer (Nursing Home)

F04: Acute Inpatient Days By Payer

F05: Inpatient Respite Days By Payer

F06: Continuous Care Days By Payer

F07: Nursing Home Room And Board Days By Payer

##### **Section G: Discharges**

G01: Discharges

## Five Year Comparative Financial Summary

Calendar Year	Statewide Acute Care Hospital Totals									
	2011		2012		2013		2014		2015	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
<b>Billed Charges</b>	<b>\$21,767,431,386</b>	<b>100.00%</b>	<b>\$23,234,498,521</b>	<b>100.00%</b>	<b>\$25,019,625,009</b>	<b>100.00%</b>	<b>\$28,036,420,600</b>	<b>100.00%</b>	<b>\$32,136,409,415</b>	<b>100.00%</b>
Inpatient	\$14,700,763,848		\$15,430,597,449		\$16,448,016,059		\$18,270,100,123		\$20,639,514,567	
Outpatient	\$7,066,667,538		\$7,803,901,072		\$8,571,608,950		\$9,766,320,477		\$11,496,894,848	
<b>Deductions</b>	<b>\$17,567,575,900</b>	<b>80.71%</b>	<b>\$18,818,633,252</b>	<b>80.99%</b>	<b>\$20,509,304,844</b>	<b>81.97%</b>	<b>\$23,222,971,630</b>	<b>82.83%</b>	<b>\$26,765,092,936</b>	<b>83.29%</b>
Inpatient	\$12,211,472,251		\$12,684,757,574		\$13,595,531,544		\$14,785,980,301		\$17,260,166,604	
Outpatient	\$5,356,103,649		\$6,133,875,678		\$6,913,773,300		\$8,436,991,329		\$9,504,926,332	
<b>Operating Revenue</b>	<b>\$4,199,855,486</b>	<b>19.29%</b>	<b>\$4,415,865,269</b>	<b>19.01%</b>	<b>\$4,510,320,165</b>	<b>18.03%</b>	<b>\$4,813,448,970</b>	<b>17.17%</b>	<b>\$5,371,316,479</b>	<b>16.71%</b>
Inpatient	\$2,489,291,597		\$2,745,839,875		\$2,852,484,515		\$3,484,119,822		\$3,379,347,963	
Outpatient	\$1,710,563,889		\$1,670,025,394		\$1,657,835,650		\$1,329,329,148		\$1,991,968,516	
<b>Other Operating Revenue</b>	<b>\$161,291,890</b>	<b>3.70%</b>	<b>\$169,532,925</b>	<b>3.70%</b>	<b>\$165,412,561</b>	<b>3.54%</b>	<b>\$145,672,249</b>	<b>2.94%</b>	<b>\$141,798,460</b>	<b>2.57%</b>
<b>Total Operating Revenue</b>	<b>\$4,361,147,376</b>	<b>100.00%</b>	<b>\$4,585,398,194</b>	<b>100.00%</b>	<b>\$4,675,732,726</b>	<b>100.00%</b>	<b>\$4,959,121,219</b>	<b>100.00%</b>	<b>\$5,513,114,939</b>	<b>100.00%</b>
Operating Expenses	\$4,406,349,275	101.04%	\$4,543,204,068	99.08%	\$4,630,136,078	99.02%	\$4,872,603,307	98.26%	\$5,239,492,190	95.04%
<b>Net Operating Income</b>	<b>(\$45,201,899)</b>	<b>(1.04%)</b>	<b>\$42,194,126</b>	<b>0.92%</b>	<b>\$45,596,648</b>	<b>0.98%</b>	<b>\$86,517,912</b>	<b>1.74%</b>	<b>\$273,622,749</b>	<b>4.96%</b>
Non-Operating Revenue	\$122,613,787	2.81%	\$76,481,723	1.67%	\$129,228,988	2.76%	\$128,700,819	2.60%	\$80,979,446	1.47%
Non-Operating Expenses	\$80,708,598	1.85%	\$75,076,056	1.64%	\$61,108,955	1.31%	\$92,885,084	1.87%	\$64,393,019	1.17%
<b>Net Income / (Loss)</b>	<b>(\$3,296,710)</b>	<b>(0.07%)</b>	<b>\$43,599,793</b>	<b>0.94%</b>	<b>\$113,716,681</b>	<b>2.37%</b>	<b>\$122,333,647</b>	<b>2.40%</b>	<b>\$290,209,176</b>	<b>5.19%</b>
Inpatient Days	1,205,376		1,198,965		1,217,551		1,259,143		1,346,853	
Admissions	252,255		247,851		249,961		251,333		262,862	
Avg Length Of Stay	4.8		4.8		4.9		5.0		5.1	
Avg Daily Census	3,302.4		3,275.9		3,335.8		3,449.7		3,690.0	
Occupancy Percentage	57.64%		58.00%		57.93%		60.07%		61.65%	
Adjusted Inpatient Days	1,798,026		1,818,505		1,864,302		1,942,260		2,106,348	
Adjusted Admissions	376,282		375,923		382,738		387,688		411,091	
<b>Per Adjusted Admission</b>										
Billed Charges + Other Opr Rev	\$58,277		\$62,258		\$65,802		\$72,693		\$78,518	
Operating Revenue	\$11,590		\$12,198		\$12,217		\$12,792		\$13,411	
Operating Expenses	\$11,710		\$12,085		\$12,097		\$12,568		\$12,745	
Net Operating Income	(\$120)		\$112		\$119		\$223		\$666	
<b>Per Adjusted Inpatient Day</b>										
Billed Charges + Other Opr Rev	\$12,196		\$12,870		\$13,509		\$14,510		\$15,324	
Operating Revenue	\$2,426		\$2,522		\$2,508		\$2,553		\$2,617	
Operating Expenses	\$2,451		\$2,498		\$2,484		\$2,509		\$2,487	
Net Operating Income	(\$25)		\$23		\$24		\$45		\$130	
	* Percentages Reflect The Vertical Analyses (Common Size Statements) Discussed In The Narrative									

Data From CHIA Nevada Healthcare Quarterly Reports

## Five Year Comparative Financial Summary

Calendar Year	Clark County Acute Care Hospital Totals									
	2011		2012		2013		2014		2015	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
<b>Billed Charges</b>	<b>\$16,769,952,126</b>	<b>100.00%</b>	<b>\$18,033,059,321</b>	<b>100.00%</b>	<b>\$19,486,985,658</b>	<b>100.00%</b>	<b>\$22,008,439,343</b>	<b>100.00%</b>	<b>\$25,486,229,825</b>	<b>100.00%</b>
Inpatient	\$12,038,507,080		\$12,672,315,415		\$13,565,617,929		\$15,189,789,361		\$17,296,928,401	
Outpatient	\$4,731,445,046		\$5,360,743,906		\$5,921,367,729		\$6,818,649,982		\$8,189,301,424	
<b>Deductions</b>	<b>\$13,914,894,840</b>	<b>82.98%</b>	<b>\$14,972,128,154</b>	<b>83.03%</b>	<b>\$16,403,037,191</b>	<b>84.17%</b>	<b>\$18,719,067,907</b>	<b>85.05%</b>	<b>\$21,807,912,406</b>	<b>85.57%</b>
Inpatient	\$10,162,263,886		\$10,641,863,961		\$11,522,848,172		\$13,004,549,010		\$14,741,745,324	
Outpatient	\$3,752,630,954		\$4,330,264,193		\$4,880,189,019		\$5,714,518,897		\$7,066,167,082	
<b>Operating Revenue</b>	<b>\$2,855,057,286</b>	<b>17.02%</b>	<b>\$3,060,931,167</b>	<b>16.97%</b>	<b>\$3,083,948,467</b>	<b>15.83%</b>	<b>\$3,289,371,436</b>	<b>14.95%</b>	<b>\$3,678,317,419</b>	<b>14.43%</b>
Inpatient	\$1,876,243,194		\$2,030,451,454		\$2,042,769,757		\$2,185,240,351		\$2,555,183,077	
Outpatient	\$978,814,092		\$1,030,479,713		\$1,041,178,710		\$1,104,131,085		\$1,123,134,342	
<b>Other Operating Revenue</b>	<b>\$79,476,987</b>	<b>2.71%</b>	<b>\$80,576,818</b>	<b>2.56%</b>	<b>\$81,397,707</b>	<b>2.57%</b>	<b>\$60,537,977</b>	<b>1.81%</b>	<b>\$56,872,100</b>	<b>1.52%</b>
<b>Total Operating Revenue</b>	<b>\$2,934,534,273</b>	<b>100.00%</b>	<b>\$3,141,507,985</b>	<b>100.00%</b>	<b>\$3,165,346,174</b>	<b>100.00%</b>	<b>\$3,349,909,413</b>	<b>100.00%</b>	<b>\$3,735,189,519</b>	<b>100.00%</b>
Operating Expenses	\$2,999,382,024	102.21%	\$3,066,455,744	97.61%	\$3,241,039,296	102.39%	\$3,396,628,762	101.39%	\$3,673,773,278	98.36%
<b>Net Operating Income</b>	<b>(\$64,847,751)</b>	<b>(2.21%)</b>	<b>\$75,052,241</b>	<b>2.39%</b>	<b>(\$75,693,122)</b>	<b>(2.39%)</b>	<b>(\$46,719,349)</b>	<b>(1.39%)</b>	<b>\$61,416,241</b>	<b>1.64%</b>
Non-Operating Revenue	\$85,704,292	2.92%	\$25,966,512	0.83%	\$73,305,883	2.32%	\$85,663,495	2.56%	\$44,565,871	1.19%
Non-Operating Expenses	\$30,348,890	1.03%	\$22,358,373	0.71%	\$45,074,258	1.42%	\$67,240,515	2.01%	\$43,750,360	1.17%
<b>Net Income / (Loss)</b>	<b>(\$9,492,349)</b>	<b>(0.31%)</b>	<b>\$78,660,380</b>	<b>2.48%</b>	<b>(\$47,461,497)</b>	<b>(1.47%)</b>	<b>(\$28,296,369)</b>	<b>(0.82%)</b>	<b>\$62,231,752</b>	<b>1.65%</b>
Inpatient Days	897,719		889,123		919,455		949,928		1,021,434	
Admissions	183,637		178,252		179,737		180,501		191,961	
Avg Length Of Stay	4.9		5.0		5.1		5.3		5.3	
Avg Daily Census	2,459.5		2,429.3		2,519.1		2,602.5		2,798.4	
Occupancy Percentage	64.05%		64.70%		65.28%		68.08%		68.88%	
Adjusted Inpatient Days	1,256,472		1,270,900		1,326,312		1,380,134		1,508,395	
Adjusted Admissions	257,023		254,791		259,270		262,247		283,477	
<b>Per Adjusted Admission</b>										
Billed Charges + Other Opr Rev	\$65,556		\$71,092		\$75,475		\$84,153		\$90,106	
Operating Revenue	\$11,417		\$12,330		\$12,209		\$12,774		\$13,176	
Operating Expenses	\$11,670		\$12,035		\$12,501		\$12,952		\$12,960	
Net Operating Income	(\$252)		\$295		(\$292)		(\$178)		\$217	
<b>Per Adjusted Inpatient Day</b>										
Billed Charges + Other Opr Rev	\$13,410		\$14,253		\$14,754		\$15,990		\$16,934	
Operating Revenue	\$2,336		\$2,472		\$2,387		\$2,427		\$2,476	
Operating Expenses	\$2,387		\$2,413		\$2,444		\$2,461		\$2,436	
Net Operating Income	(\$52)		\$59		(\$57)		(\$34)		\$41	
* Percentages Reflect The Vertical Analyses (Common Size Statements) Discussed In The Narrative										

Data From CHIA Nevada Healthcare Quarterly Reports

## Five Year Comparative Financial Summary

Calendar Year	Washoe County / Carson City Acute Care Hospital Totals									
	2011		2012		2013		2014		2015	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
<b>Billed Charges</b>	<b>\$4,303,703,545</b>	<b>100.00%</b>	<b>\$4,473,640,222</b>	<b>100.00%</b>	<b>\$4,723,376,741</b>	<b>100.00%</b>	<b>\$5,133,402,167</b>	<b>100.00%</b>	<b>\$5,708,449,988</b>	<b>100.00%</b>
Inpatient	\$2,441,567,217		\$2,546,824,287		\$2,659,531,698		\$2,830,192,024		\$3,108,624,940	
Outpatient	\$1,862,136,328		\$1,926,815,935		\$2,063,845,043		\$2,303,210,143		\$2,599,825,048	
<b>Deductions</b>	<b>\$3,255,458,986</b>	<b>75.64%</b>	<b>\$3,430,698,642</b>	<b>76.69%</b>	<b>\$3,622,311,972</b>	<b>76.69%</b>	<b>\$3,935,149,253</b>	<b>76.66%</b>	<b>\$4,360,927,353</b>	<b>76.39%</b>
Inpatient	\$1,929,881,600		\$1,929,728,286		\$1,946,985,290		\$1,635,440,883		\$2,377,795,382	
Outpatient	\$1,325,577,386		\$1,500,970,356		\$1,675,326,682		\$2,299,708,370		\$1,983,131,971	
<b>Operating Revenue</b>	<b>\$1,048,244,559</b>	<b>24.36%</b>	<b>\$1,042,941,580</b>	<b>23.31%</b>	<b>\$1,101,064,769</b>	<b>23.31%</b>	<b>\$1,198,252,914</b>	<b>23.34%</b>	<b>\$1,347,522,635</b>	<b>23.61%</b>
Inpatient	\$511,685,617		\$617,096,001		\$712,546,408		\$1,194,751,141		\$730,829,558	
Outpatient	\$536,558,942		\$425,845,579		\$388,518,361		\$3,501,773		\$616,693,077	
<b>Other Operating Revenue</b>	<b>\$39,430,950</b>	<b>3.63%</b>	<b>\$35,474,577</b>	<b>3.29%</b>	<b>\$35,622,268</b>	<b>3.13%</b>	<b>\$30,485,758</b>	<b>2.48%</b>	<b>\$29,830,163</b>	<b>2.17%</b>
<b>Total Operating Revenue</b>	<b>\$1,087,675,509</b>	<b>100.00%</b>	<b>\$1,078,416,157</b>	<b>100.00%</b>	<b>\$1,136,687,037</b>	<b>100.00%</b>	<b>\$1,228,738,672</b>	<b>100.00%</b>	<b>\$1,377,352,798</b>	<b>100.00%</b>
Operating Expenses	\$1,102,768,024	101.39%	\$1,160,835,680	107.64%	\$1,071,265,519	94.24%	\$1,121,908,244	91.31%	\$1,202,385,176	87.30%
<b>Net Operating Income</b>	<b>(\$15,092,515)</b>	<b>(1.39%)</b>	<b>(\$82,419,523)</b>	<b>(7.64%)</b>	<b>\$65,421,518</b>	<b>5.76%</b>	<b>\$106,830,428</b>	<b>8.69%</b>	<b>\$174,967,622</b>	<b>12.70%</b>
Non-Operating Revenue	\$9,655,199	0.89%	\$22,925,622	2.13%	\$24,907,723	2.19%	\$19,209,358	1.56%	\$12,083,009	0.88%
Non-Operating Expenses	\$50,018,341	4.60%	\$52,326,001	4.85%	\$15,088,048	1.33%	\$24,475,482	1.99%	\$18,774,521	1.36%
<b>Net Income / (Loss)</b>	<b>(\$55,455,657)</b>	<b>(5.05%)</b>	<b>(\$111,819,902)</b>	<b>(10.15%)</b>	<b>\$75,241,193</b>	<b>6.48%</b>	<b>\$101,564,304</b>	<b>8.14%</b>	<b>\$168,276,110</b>	<b>12.11%</b>
Inpatient Days	271,659		272,363		266,431		272,827		283,714	
Admissions	57,096		58,833		60,079		60,071		61,322	
Avg Length Of Stay	4.8		4.6		4.4		4.5		4.6	
Avg Daily Census	744.3		744.2		729.9		747.5		777.3	
Occupancy Percentage	47.38%		47.37%		46.29%		47.40%		48.83%	
Adjusted Inpatient Days	483,235		482,215		476,755		497,792		523,714	
Adjusted Admissions	101,564		104,163		107,506		109,604		113,196	
<b>Per Adjusted Admission</b>										
Billed Charges + Other Opr Rev	\$42,762		\$43,289		\$44,267		\$47,114		\$50,693	
Operating Revenue	\$10,709		\$10,353		\$10,573		\$11,211		\$12,168	
Operating Expenses	\$10,858		\$11,144		\$9,965		\$10,236		\$10,622	
Net Operating Income	(\$149)		(\$791)		\$609		\$975		\$1,546	
<b>Per Adjusted Inpatient Day</b>										
Billed Charges + Other Opr Rev	\$8,988		\$9,351		\$9,982		\$10,374		\$10,957	
Operating Revenue	\$2,251		\$2,236		\$2,384		\$2,468		\$2,630	
Operating Expenses	\$2,282		\$2,407		\$2,247		\$2,254		\$2,296	
Net Operating Income	(\$31)		(\$171)		\$137		\$215		\$334	
	* Percentages Reflect The Vertical Analyses (Common Size Statements) Discussed In The Narrative									

Data From CHIA Nevada Healthcare Quarterly Reports

## Five Year Comparative Financial Summary

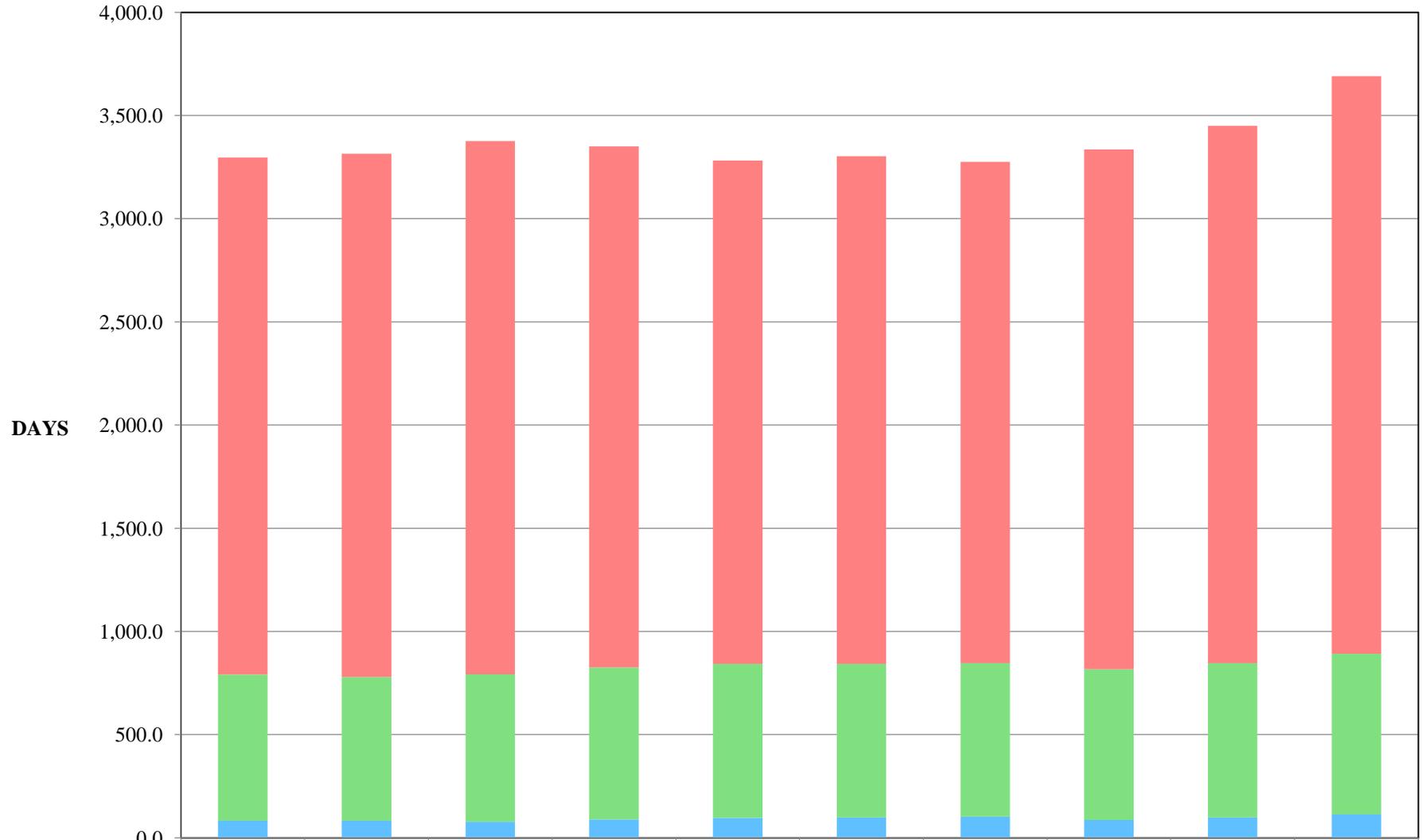
Calendar Year	Rural Acute Care Hospital Totals									
	2011		2012		2013		2014		2015	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
<b>Billed Charges</b>	<b>\$693,775,715</b>	<b>100.00%</b>	<b>\$727,798,978</b>	<b>100.00%</b>	<b>\$809,262,610</b>	<b>100.00%</b>	<b>\$894,579,090</b>	<b>100.00%</b>	<b>\$941,729,602</b>	<b>100.00%</b>
Inpatient	\$220,689,551		\$211,457,747		\$222,866,432		\$250,118,738		\$233,961,226	
Outpatient	\$473,086,164		\$516,341,231		\$586,396,178		\$644,460,352		\$707,768,376	
<b>Deductions</b>	<b>\$397,222,074</b>	<b>57.26%</b>	<b>\$415,806,456</b>	<b>57.13%</b>	<b>\$483,955,681</b>	<b>59.80%</b>	<b>\$568,754,470</b>	<b>63.58%</b>	<b>\$596,253,177</b>	<b>63.31%</b>
Inpatient	\$119,326,765		\$113,165,327		\$125,698,082		\$145,990,408		\$140,625,898	
Outpatient	\$277,895,309		\$302,641,129		\$358,257,599		\$422,764,062		\$455,627,279	
<b>Operating Revenue</b>	<b>\$296,553,641</b>	<b>42.74%</b>	<b>\$311,992,522</b>	<b>42.87%</b>	<b>\$325,306,929</b>	<b>40.20%</b>	<b>\$325,824,620</b>	<b>36.42%</b>	<b>\$345,476,425</b>	<b>36.69%</b>
Inpatient	\$101,362,786		\$98,292,420		\$97,168,350		\$104,128,330		\$93,335,328	
Outpatient	\$195,190,855		\$213,700,102		\$228,138,579		\$221,696,290		\$252,141,097	
<b>Other Operating Revenue</b>	<b>\$42,383,953</b>	<b>12.50%</b>	<b>\$53,481,530</b>	<b>14.63%</b>	<b>\$48,392,586</b>	<b>12.95%</b>	<b>\$54,648,514</b>	<b>14.36%</b>	<b>\$55,096,197</b>	<b>13.75%</b>
<b>Total Operating Revenue</b>	<b>\$338,937,594</b>	<b>100.00%</b>	<b>\$365,474,052</b>	<b>100.00%</b>	<b>\$373,699,515</b>	<b>100.00%</b>	<b>\$380,473,134</b>	<b>100.00%</b>	<b>\$400,572,622</b>	<b>100.00%</b>
Operating Expenses	\$304,199,227	89.75%	\$315,912,644	86.44%	\$317,831,263	85.05%	\$354,066,301	93.06%	\$363,333,736	90.70%
<b>Net Operating Income</b>	<b>\$34,738,367</b>	<b>10.25%</b>	<b>\$49,561,408</b>	<b>13.56%</b>	<b>\$55,868,252</b>	<b>14.95%</b>	<b>\$26,406,833</b>	<b>6.94%</b>	<b>\$37,238,886</b>	<b>9.30%</b>
Non-Operating Revenue	\$27,254,296	8.04%	\$27,589,589	7.55%	\$31,015,382	8.30%	\$23,827,966	6.26%	\$24,330,566	6.07%
Non-Operating Expenses	\$341,367	0.10%	\$391,682	0.11%	\$946,649	0.25%	\$1,169,087	0.31%	\$1,868,138	0.47%
<b>Net Income / (Loss)</b>	<b>\$61,651,296</b>	<b>16.84%</b>	<b>\$76,759,315</b>	<b>19.53%</b>	<b>\$85,936,985</b>	<b>21.23%</b>	<b>\$49,065,712</b>	<b>12.14%</b>	<b>\$59,701,314</b>	<b>14.05%</b>

Inpatient Days	35,998	37,479	31,665	36,388	41,705
Admissions	11,522	10,766	10,145	10,761	9,579
Avg Length Of Stay	3.1	3.5	3.1	3.4	4.4
Avg Daily Census	98.6	102.4	86.8	99.7	114.3
Occupancy Percentage	31.01%	31.80%	26.94%	29.07%	34.62%
Adjusted Inpatient Days	120,079	138,475	121,856	138,096	177,690
Adjusted Admissions	38,434	39,778	39,041	40,839	40,813
<b>Per Adjusted Admission</b>					
Billed Charges + Other Opr Rev	\$19,154	\$19,641	\$21,968	\$23,243	\$24,424
Operating Revenue	\$8,819	\$9,188	\$9,572	\$9,316	\$9,815
Operating Expenses	\$7,915	\$7,942	\$8,141	\$8,670	\$8,902
Net Operating Income	\$904	\$1,246	\$1,431	\$647	\$912
<b>Per Adjusted Inpatient Day</b>					
Billed Charges + Other Opr Rev	\$6,131	\$5,642	\$7,038	\$6,874	\$5,610
Operating Revenue	\$2,823	\$2,639	\$3,067	\$2,755	\$2,254
Operating Expenses	\$2,533	\$2,281	\$2,608	\$2,564	\$2,045
Net Operating Income	\$289	\$358	\$458	\$191	\$210

\* Percentages Reflect The Vertical Analyses (Common Size Statements) Discussed In The Narrative

Data From CHIA Nevada Healthcare Quarterly Reports

## Nevada Acute Care Hospitals Average Daily Census



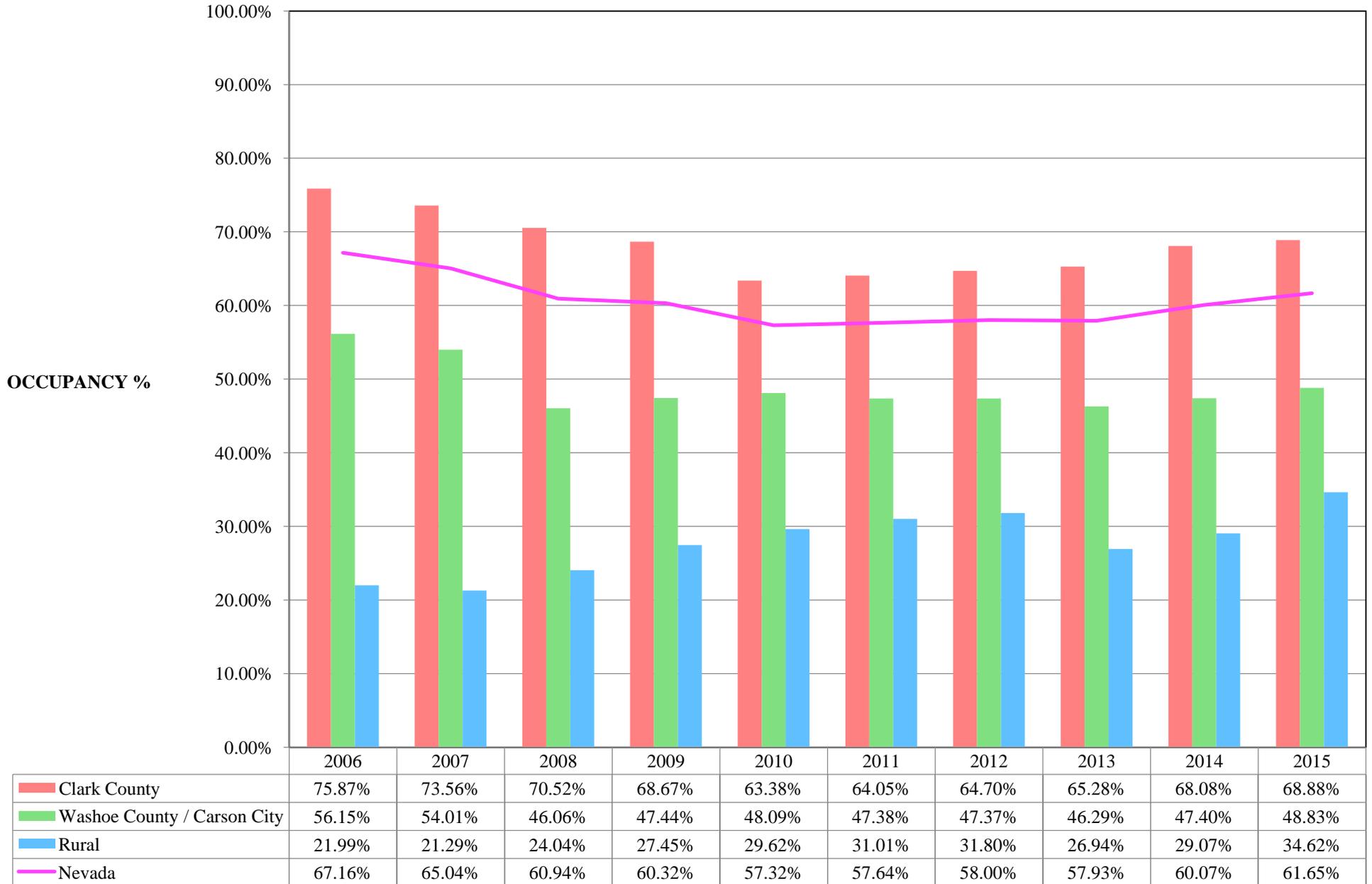
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Clark County	2,506.0	2,535.7	2,584.0	2,525.0	2,438.8	2,459.5	2,429.3	2,519.1	2,602.5	2,798.5
Washoe County / Carson City	707.8	695.7	714.3	735.8	745.9	744.3	744.2	729.9	747.5	777.3
Rural	83.0	83.7	78.4	89.5	96.6	98.6	102.4	86.8	99.7	114.3
Nevada	3,296.4	3,315.0	3,376.7	3,350.3	3,281.3	3,302.4	3,275.9	3,335.8	3,449.7	3,690.0

## Nevada Acute Care Hospitals - Average Daily Census

Calendar Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>Nevada</b>	<b>3,296.4</b>	<b>3,315.0</b>	<b>3,376.7</b>	<b>3,350.3</b>	<b>3,281.3</b>	<b>3,302.4</b>	<b>3,275.9</b>	<b>3,335.8</b>	<b>3,449.7</b>	<b>3,690.0</b>
<b>Clark County</b>	<b>2,506.0</b>	<b>2,535.7</b>	<b>2,584.0</b>	<b>2,525.0</b>	<b>2,438.8</b>	<b>2,459.5</b>	<b>2,429.3</b>	<b>2,519.1</b>	<b>2,602.5</b>	<b>2,798.5</b>
Centennial Hills Hospital Medical Center			65.4	91.8	97.7	97.0	87.4	93.8	106.7	129.9
Desert Springs Hospital Medical Center	182.2	186.0	181.8	170.0	141.6	130.7	153.9	185.7	191.4	189.6
Mountain's Edge Hospital										4.7
MountainView Hospital	203.6	181.5	186.8	191.7	193.5	198.9	217.9	245.6	271.2	289.9
North Vista Hospital	117.0	129.2	121.7	114.8	103.9	122.1	125.4	128.0	110.8	127.8
Southern Hills Hospital and Medical Center	70.3	69.5	69.5	76.7	64.2	68.1	81.8	80.9	94.3	104.0
Spring Valley Hospital Medical Center	134.7	152.8	165.0	169.5	169.3	171.3	168.5	175.0	199.7	196.4
St. Rose Dominican - Rose de Lima Campus	97.7	97.3	101.8	94.4	89.3	90.8	88.4	84.9	81.8	80.4
St. Rose Dominican - San Martin Campus	4.1	56.2	89.4	94.2	93.1	94.9	92.8	81.9	82.9	92.7
St. Rose Dominican - Siena Campus	190.4	190.7	197.0	195.1	199.4	198.3	184.7	186.0	185.5	205.9
Summerlin Hospital Medical Center	249.1	259.5	247.2	245.7	251.0	263.6	236.4	241.4	258.8	277.9
Sunrise Hospital and Medical Center	530.5	484.3	467.3	444.8	423.4	431.5	417.6	436.0	492.1	542.9
University Medical Center of Southern Nevada	459.3	451.7	419.3	383.8	372.3	369.8	358.0	366.8	332.4	338.7
Valley Hospital Medical Center	267.1	277.0	271.9	252.6	240.3	222.3	216.4	213.3	194.9	217.6
<b>Washoe County / Carson City</b>	<b>707.8</b>	<b>695.7</b>	<b>714.3</b>	<b>735.8</b>	<b>745.9</b>	<b>744.3</b>	<b>744.2</b>	<b>729.9</b>	<b>747.5</b>	<b>777.3</b>
Carson Tahoe Regional Medical Center	113.4	105.4	106.5	110.6	117.3	123.2	118.7	123.8	133.7	139.9
Northern Nevada Medical Center	45.3	51.1	46.1	46.4	52.6	51.9	50.4	50.5	51.0	53.3
Renown Regional Medical Center	349.4	345.3	374.6	387.0	388.6	396.4	398.1	377.6	379.7	408.1
Renown South Meadows Medical Center	28.9	32.2	34.7	27.6	27.7	24.4	26.3	24.2	24.0	24.4
Saint Mary's Regional Medical Center	165.1	156.2	146.0	158.2	153.5	142.6	145.2	148.6	153.5	150.5
Sierra Surgery Hospital	5.5	5.3	6.4	6.0	6.1	5.8	5.4	5.2	5.5	1.2
<b>Rural</b>	<b>83.0</b>	<b>83.7</b>	<b>78.4</b>	<b>89.5</b>	<b>96.6</b>	<b>98.6</b>	<b>102.4</b>	<b>86.8</b>	<b>99.7</b>	<b>114.3</b>
Banner Churchill Community Hospital	15.9	17.6	17.7	19.0	18.3	19.1	20.2	16.6	16.7	13.4
Battle Mountain General Hospital	0.4	0.5	0.8	0.3	0.3	0.3	0.4	0.2	0.2	0.3
Boulder City Hospital	9.7	9.1	8.0	4.7	5.1	5.1	13.5	6.5	14.1	37.5
Carson Valley Medical Center	7.1	7.3	7.9	7.7	7.7	7.5	6.4	7.1	6.9	8.2
Desert View Regional Medical Center			8.6	13.0	15.6	14.3	13.1	10.8	13.7	12.5
Grover C Dils Medical Center	1.4	1.3	1.1	1.1	1.3	1.2	1.6	1.7	1.8	1.8
Humboldt General Hospital	4.0	6.8	6.9	6.0	5.7	8.9	6.9	6.3	7.0	7.9
Incline Village Community Hospital	0.2	0.2	0.2	0.1	0.0	0.1	0.0	0.0	0.1	0.0
Mesa View Regional Hospital	6.7	6.0	7.8	9.1	9.6	8.2	6.5	5.1	5.6	6.0
Mount Grant General Hospital	2.6	2.8	3.9	4.6	5.6	5.9	5.0	5.0	4.6	3.8
Northeastern Nevada Regional Hospital	21.9	18.5	4.7	13.0	17.4	18.3	19.7	22.0	23.8	17.1
Nye Regional Medical Center	1.6	1.2	0.2	1.0	1.2	1.3	1.6	0.4	0.1	0.0
Pershing General Hospital	2.7	3.4	3.1	2.0	1.2	0.9	0.6	1.0	0.9	1.2
South Lyon Medical Center	2.9	2.0	1.9	1.8	1.9	1.3	1.5	1.2	1.0	0.8
William Bee Ririe Hospital	5.9	7.0	5.4	5.8	5.8	6.1	5.2	2.8	3.3	3.6

Data From CHIA Nevada Healthcare Quarterly Reports

## Nevada Acute Care Hospitals Occupancy Percentage

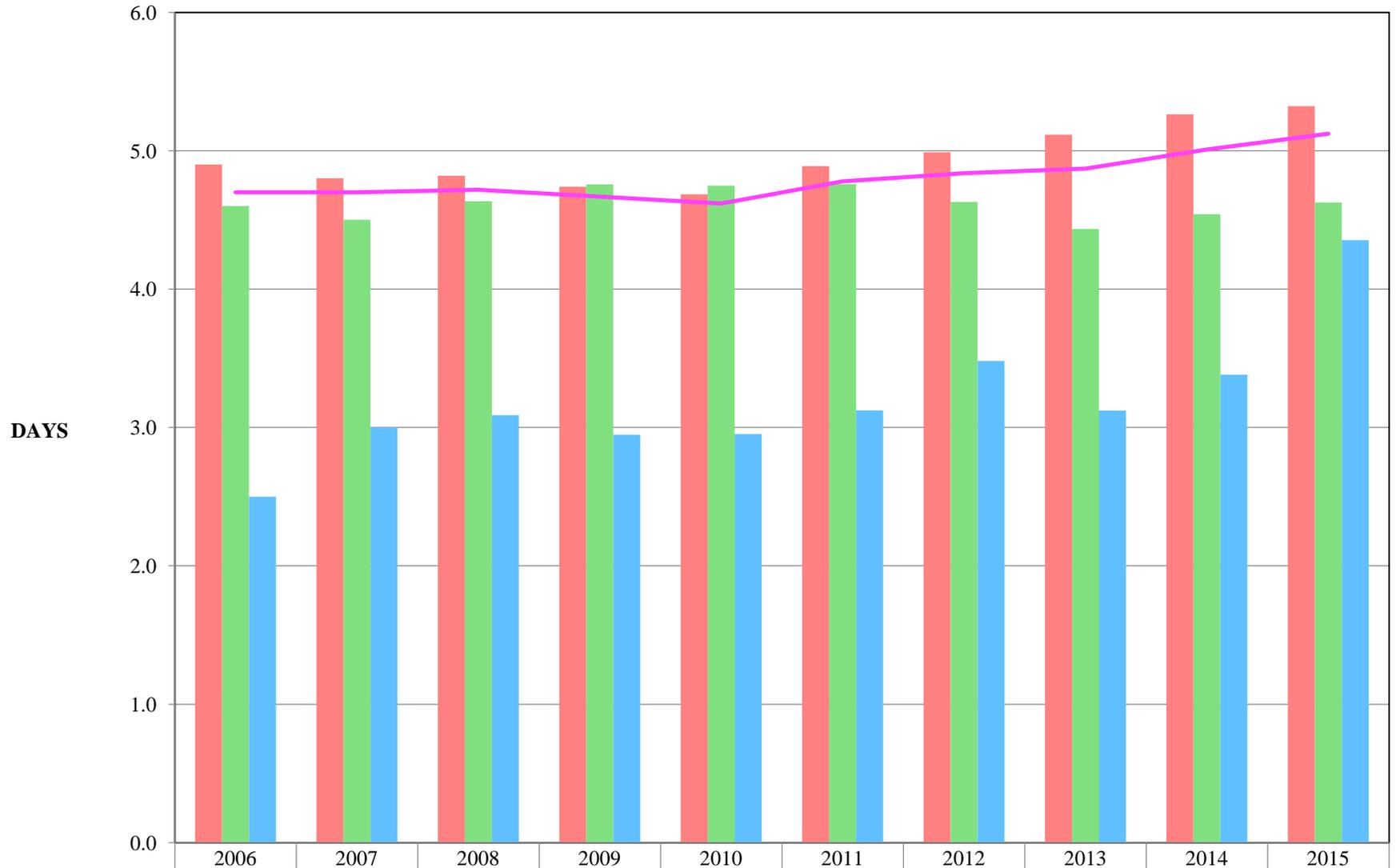


## Nevada Acute Care Hospitals - Occupancy Percentage

Calendar Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>Nevada</b>	<b>67.16%</b>	<b>65.04%</b>	<b>60.94%</b>	<b>60.32%</b>	<b>57.32%</b>	<b>57.64%</b>	<b>58.00%</b>	<b>57.93%</b>	<b>60.07%</b>	<b>61.65%</b>
<b>Clark County</b>	<b>75.87%</b>	<b>73.56%</b>	<b>70.52%</b>	<b>68.67%</b>	<b>63.38%</b>	<b>64.05%</b>	<b>64.70%</b>	<b>65.28%</b>	<b>68.08%</b>	<b>68.88%</b>
Centennial Hills Hospital Medical Center			38.25%	53.67%	57.11%	56.75%	51.13%	52.97%	60.30%	68.37%
Desert Springs Hospital Medical Center	63.71%	65.03%	63.55%	59.44%	49.51%	44.60%	52.53%	63.38%	65.32%	64.70%
Mountain's Edge Hospital										3.58%
MountainView Hospital	86.63%	77.23%	79.50%	81.56%	82.34%	84.65%	86.12%	72.22%	79.77%	85.28%
North Vista Hospital	62.15%	69.84%	65.77%	64.51%	59.36%	68.98%	70.87%	72.33%	65.16%	75.19%
Southern Hills Hospital and Medical Center	50.55%	50.02%	50.00%	55.15%	46.17%	49.02%	61.04%	60.34%	70.39%	77.64%
Spring Valley Hospital Medical Center	64.15%	72.74%	78.55%	73.36%	73.30%	74.17%	71.10%	73.82%	84.28%	82.85%
St. Rose Dominican - Rose de Lima Campus	70.77%	68.77%	70.20%	65.10%	61.57%	70.42%	74.32%	71.36%	75.04%	73.11%
St. Rose Dominican - San Martin Campus	24.70%	41.11%	60.84%	64.10%	63.30%	64.58%	63.12%	55.70%	56.38%	63.05%
St. Rose Dominican - Siena Campus	88.95%	89.10%	89.98%	89.11%	91.07%	90.57%	84.33%	80.86%	80.67%	63.17%
Summerlin Hospital Medical Center	117.65%	111.21%	87.96%	87.42%	55.16%	58.05%	52.07%	53.17%	57.01%	61.20%
Sunrise Hospital and Medical Center	75.89%	69.09%	66.66%	63.55%	60.48%	61.64%	60.53%	63.18%	71.31%	78.68%
University Medical Center of Southern Nevada	82.91%	81.54%	77.50%	70.93%	68.82%	68.36%	66.18%	67.80%	61.44%	62.61%
Valley Hospital Medical Center	66.11%	68.57%	67.29%	62.52%	59.47%	55.03%	67.61%	66.64%	64.75%	72.30%
<b>Washoe County / Carson City</b>	<b>56.15%</b>	<b>54.01%</b>	<b>46.06%</b>	<b>47.44%</b>	<b>48.09%</b>	<b>47.38%</b>	<b>47.37%</b>	<b>46.29%</b>	<b>47.40%</b>	<b>48.83%</b>
Carson Tahoe Regional Medical Center	65.93%	61.30%	61.94%	64.30%	68.22%	66.97%	64.52%	65.15%	70.36%	68.25%
Northern Nevada Medical Center	45.30%	51.08%	46.07%	46.43%	52.64%	48.05%	46.64%	46.76%	47.26%	49.36%
Renown Regional Medical Center	65.12%	64.17%	46.36%	47.90%	48.10%	49.05%	49.27%	46.73%	46.99%	50.50%
Renown South Meadows Medical Center	54.57%	42.42%	45.67%	36.31%	36.43%	32.05%	34.58%	31.85%	31.63%	32.05%
Saint Mary's Regional Medical Center	43.45%	43.24%	38.42%	41.64%	40.40%	37.53%	38.21%	39.11%	40.39%	39.59%
Sierra Surgery Hospital	36.33%	35.38%	42.97%	39.96%	40.66%	38.85%	36.30%	34.90%	36.71%	7.98%
<b>Rural</b>	<b>21.99%</b>	<b>21.29%</b>	<b>24.04%</b>	<b>27.45%</b>	<b>29.62%</b>	<b>31.01%</b>	<b>31.80%</b>	<b>26.94%</b>	<b>29.07%</b>	<b>34.62%</b>
Banner Churchill Community Hospital	24.02%	43.99%	44.31%	47.38%	45.69%	47.76%	50.54%	41.53%	41.82%	53.71%
Battle Mountain General Hospital	1.95%	1.96%	11.28%	4.50%	4.11%	4.19%	5.19%	2.97%	2.23%	3.91%
Boulder City Hospital	48.62%	45.40%	40.11%	23.64%	25.66%	25.74%	56.20%	27.10%	32.02%	85.32%
Carson Valley Medical Center	94.13%	31.83%	34.55%	33.69%	33.31%	32.73%	27.79%	30.73%	29.91%	35.64%
Desert View Regional Medical Center			35.99%	54.25%	64.89%	57.25%	52.54%	43.11%	54.64%	50.09%
Grover C Dils Medical Center	8.98%	6.70%	27.32%	28.56%	32.81%	30.82%	40.85%	42.88%	43.97%	45.34%
Humboldt General Hospital	24.03%	30.71%	31.41%	27.45%	26.11%	40.61%	31.53%	28.56%	30.47%	34.25%
Incline Village Community Hospital	5.89%	4.40%	4.10%	1.51%	0.34%	1.64%	1.02%	0.48%	1.58%	0.75%
Mesa View Regional Hospital	26.82%	23.99%	31.36%	36.55%	38.30%	32.98%	26.20%	20.59%	22.55%	23.81%
Mount Grant General Hospital	23.94%	25.35%	35.82%	41.54%	50.64%	53.30%	45.60%	45.60%	41.39%	34.92%
Northeastern Nevada Regional Hospital	27.64%	24.66%	6.24%	17.40%	23.16%	24.37%	26.33%	29.27%	31.79%	22.86%
Nye Regional Medical Center	14.29%	11.81%	2.35%	9.95%	12.38%	13.48%	15.79%	4.30%	1.23%	0.41%
Pershing General Hospital	12.44%	33.52%	13.93%	9.24%	5.35%	7.12%	4.64%	7.76%	7.27%	9.00%
South Lyon Medical Center	8.87%	3.09%	13.66%	13.19%	13.44%	9.06%	10.77%	8.88%	6.95%	5.68%
William Bee Ririe Hospital	23.68%	28.07%	21.61%	23.40%	23.02%	24.32%	20.77%	11.06%	13.10%	14.51%

Data From CHIA Nevada Healthcare Quarterly Reports

## Nevada Acute Care Hospitals Average Length Of Stay



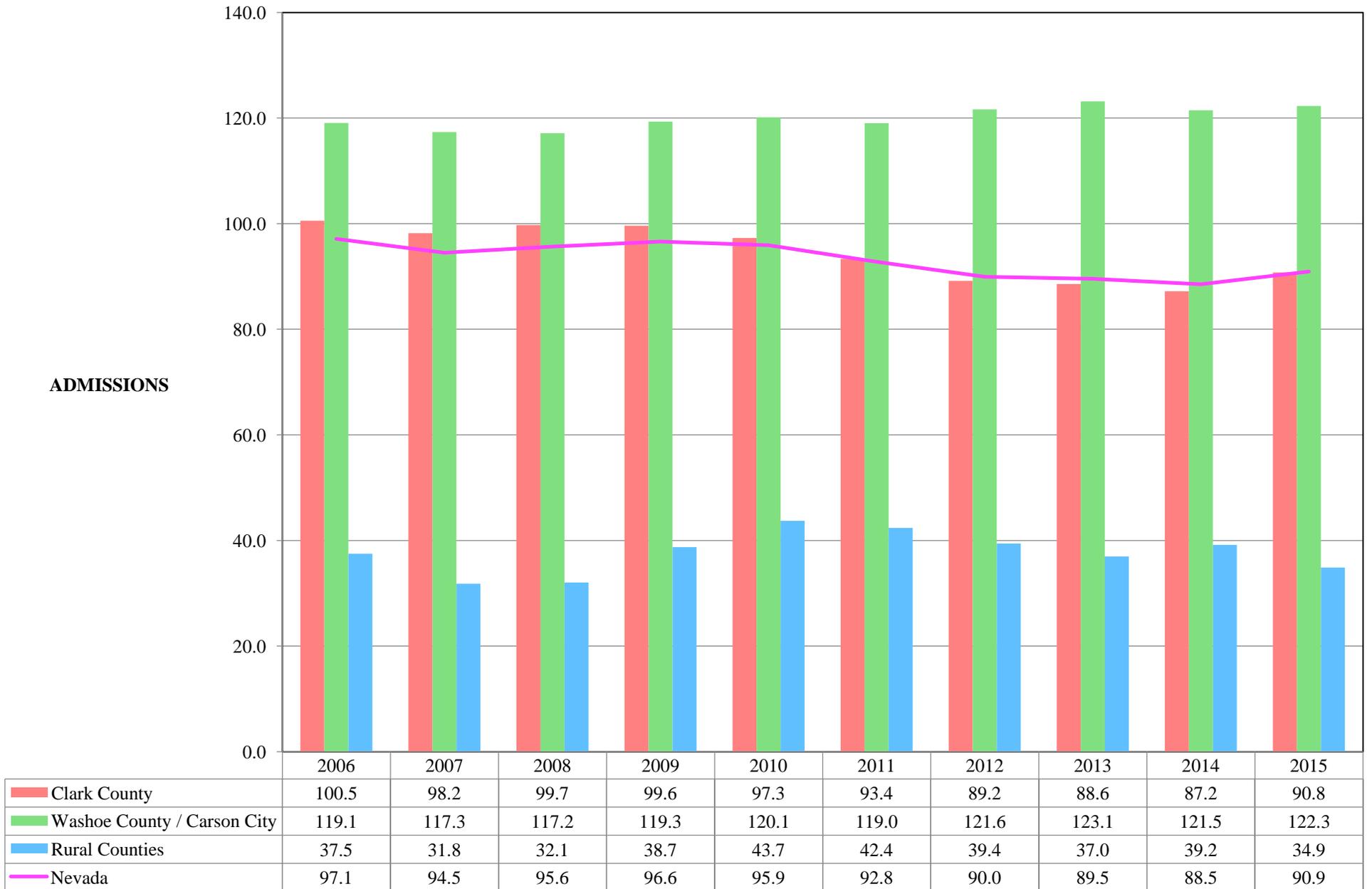
Clark County	4.9	4.8	4.8	4.7	4.7	4.9	5.0	5.1	5.3	5.3
Washoe County / Carson City	4.6	4.5	4.6	4.8	4.7	4.8	4.6	4.4	4.5	4.6
Rural	2.5	3.0	3.1	2.9	3.0	3.1	3.5	3.1	3.4	4.4
Nevada	4.7	4.7	4.7	4.7	4.6	4.8	4.8	4.9	5.0	5.1

## Nevada Acute Care Hospitals - Average Length Of Stay

Calendar Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>Nevada</b>	<b>4.7</b>	<b>4.7</b>	<b>4.7</b>	<b>4.7</b>	<b>4.6</b>	<b>4.8</b>	<b>4.8</b>	<b>4.9</b>	<b>5.0</b>	<b>5.1</b>
<b>Clark County</b>	<b>4.9</b>	<b>4.8</b>	<b>4.8</b>	<b>4.7</b>	<b>4.7</b>	<b>4.9</b>	<b>5.0</b>	<b>5.1</b>	<b>5.3</b>	<b>5.3</b>
Centennial Hills Hospital Medical Center			3.7	3.7	3.8	3.9	3.7	3.4	3.6	3.8
Desert Springs Hospital Medical Center	5.0	5.2	5.2	5.0	4.8	4.9	5.5	6.1	6.0	5.7
Mountain's Edge Hospital										9.9
MountainView Hospital	4.2	4.3	4.5	4.6	4.4	4.5	4.7	5.2	5.2	5.0
North Vista Hospital	5.0	5.6	5.4	5.6	6.9	8.2	8.6	8.0	7.0	5.3
Southern Hills Hospital and Medical Center	4.4	4.4	4.1	4.3	4.0	3.9	4.2	4.2	4.4	4.4
Spring Valley Hospital Medical Center	4.2	4.4	4.3	4.1	4.2	4.4	4.5	4.5	4.8	4.8
St. Rose Dominican - Rose de Lima Campus	4.3	4.0	4.3	4.1	4.3	4.9	5.1	5.1	5.5	5.9
St. Rose Dominican - San Martin Campus	3.5	3.6	4.1	4.1	3.9	4.0	4.3	4.3	4.5	5.0
St. Rose Dominican - Siena Campus	4.0	3.9	4.2	4.1	4.0	4.2	4.1	4.2	4.5	4.9
Summerlin Hospital Medical Center	4.8	4.7	4.6	4.7	4.6	4.9	5.0	4.9	5.2	5.0
Sunrise Hospital and Medical Center	5.5	5.6	5.5	5.5	5.5	5.5	5.3	5.7	5.9	6.1
University Medical Center of Southern Nevada	5.6	5.4	5.5	5.3	5.3	5.4	5.3	5.5	5.6	6.4
Valley Hospital Medical Center	4.9	4.8	4.9	4.7	4.6	5.0	5.3	5.3	5.8	5.6
<b>Washoe County / Carson City</b>	<b>4.6</b>	<b>4.5</b>	<b>4.6</b>	<b>4.8</b>	<b>4.7</b>	<b>4.8</b>	<b>4.6</b>	<b>4.4</b>	<b>4.5</b>	<b>4.6</b>
Carson Tahoe Regional Medical Center	4.0	3.8	4.0	4.0	4.3	4.4	4.3	4.4	4.5	4.3
Northern Nevada Medical Center	5.1	4.8	4.6	5.0	4.6	4.7	4.9	5.1	5.2	5.1
Renown Regional Medical Center	5.0	5.0	5.2	5.3	5.3	5.3	5.2	5.1	5.2	5.5
Renown South Meadows Medical Center	4.2	4.0	3.9	3.3	3.2	3.2	3.2	3.0	3.1	3.0
Saint Mary's Regional Medical Center	4.2	4.4	4.2	4.6	4.6	4.4	4.1	3.6	3.7	3.6
Sierra Surgery Hospital	2.3	2.5	2.6	2.6	2.8	2.8	2.7	2.5	2.5	2.5
<b>Rural</b>	<b>2.5</b>	<b>3.0</b>	<b>3.1</b>	<b>2.9</b>	<b>3.0</b>	<b>3.1</b>	<b>3.5</b>	<b>3.1</b>	<b>3.4</b>	<b>4.4</b>
Banner Churchill Community Hospital	1.7	2.8	3.1	3.3	3.0	3.3	3.3	3.3	3.5	3.1
Battle Mountain General Hospital	2.7	2.5	4.0	2.3	3.4	3.3	2.5	2.4	2.0	2.5
Boulder City Hospital	3.8	3.9	3.7	3.5	5.1	4.3	12.4	6.2	7.2	17.3
Carson Valley Medical Center	3.6	3.8	3.7	3.6	3.3	3.4	3.2	3.2	3.1	3.1
Desert View Regional Medical Center			2.5	2.6	2.7	3.0	3.7	2.8	2.9	3.2
Grover C Dils Medical Center	3.2	3.4	3.1	3.3	3.9	3.8	3.4	4.3	5.0	5.2
Humboldt General Hospital	2.5	2.9	3.3	2.8	2.8	3.0	2.7	2.6	3.1	3.5
Incline Village Community Hospital	2.5	2.8	3.2	1.7	1.0	2.7	1.7	1.2	1.9	2.2
Mesa View Regional Hospital	2.4	2.7	2.7	2.5	2.7	2.7	2.7	2.6	2.7	3.0
Mount Grant General Hospital	3.6	3.7	4.0	3.4	3.4	4.0	3.9	4.0	4.0	3.8
Northeastern Nevada Regional Hospital	3.1	2.9	3.0	2.7	2.7	2.7	2.9	2.9	3.0	2.9
Nye Regional Medical Center	2.2	2.0	2.0	2.7	2.0	2.2	3.8	2.2	0.8	1.0
Pershing General Hospital	3.8	4.0	5.3	4.4	4.9	3.8	4.2	5.8	6.8	7.4
South Lyon Medical Center	2.7	2.8	2.8	3.0	3.0	3.0	3.6	3.6	3.2	3.5
William Bee Ririe Hospital	2.8	3.0	2.3	2.8	3.1	3.5	2.9	2.5	2.7	3.0

Data From CHIA Nevada Healthcare Quarterly Reports

## Nevada Acute Care Hospitals Admissions Per 1,000 Population



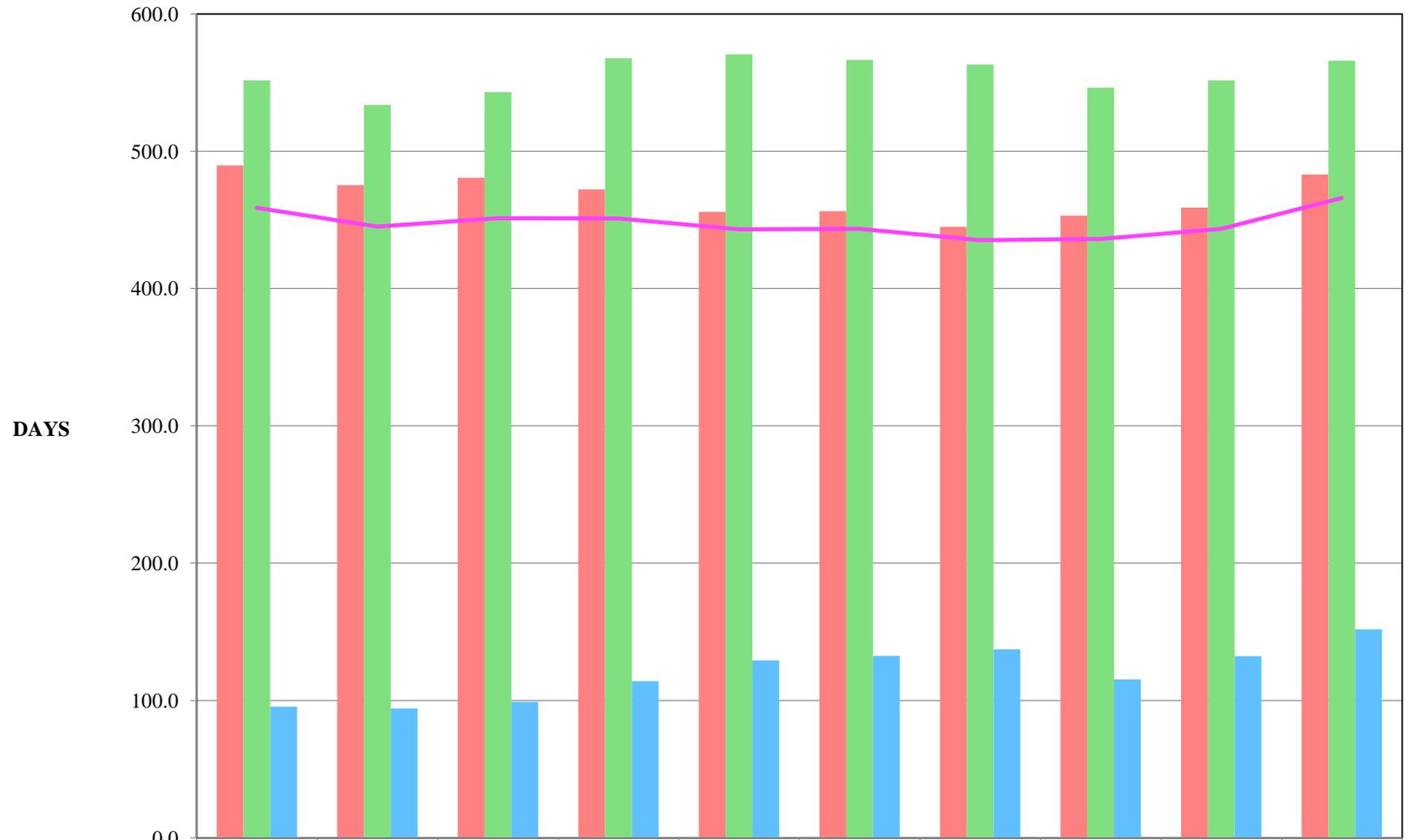
## Nevada Acute Care Hospitals - Admissions Per 1,000 Population

Calendar Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>Nevada</b>										
Admissions <sup>1</sup>	254,773	256,852	261,930	261,951	259,302	252,255	247,851	249,961	251,333	262,862
Population Estimate <sup>2</sup>	2,623,050	2,718,337	2,738,733	2,711,206	2,703,493	2,718,586	2,755,245	2,791,494	2,839,099	2,890,845
Admissions Per 1,000	97.1	94.5	95.6	96.6	95.9	92.8	90.0	89.5	88.5	90.9
<b>Clark County</b>										
Admissions <sup>1</sup>	188,503	191,860	196,245	194,414	190,024	183,637	178,252	179,737	180,501	191,961
Population Estimate <sup>2</sup>	1,874,837	1,954,319	1,967,716	1,952,040	1,953,263	1,967,159	1,998,646	2,029,316	2,069,681	2,114,801
Admissions Per 1,000	100.5	98.2	99.7	99.6	97.3	93.4	89.2	88.6	87.2	90.8
<b>Washoe County / Carson City</b>										
Admissions <sup>1</sup>	55,781	55,822	56,402	56,458	57,343	57,096	58,833	60,079	60,071	61,322
Population Estimate <sup>2</sup>	468,448	475,784	481,433	473,138	477,295	479,649	483,664	487,885	494,600	501,424
Admissions Per 1,000	119.1	117.3	117.2	119.3	120.1	119.0	121.6	123.1	121.5	122.3
<b>Rural Counties</b>										
Admissions <sup>1</sup>	10,489	9,170	9,283	11,079	11,935	11,522	10,766	10,145	10,761	9,579
Population Estimate <sup>2</sup>	279,765	288,234	289,584	286,028	272,935	271,778	272,935	274,293	274,818	274,620
Admissions Per 1,000	37.5	31.8	32.1	38.7	43.7	42.4	39.4	37.0	39.2	34.9

<sup>1</sup> Admissions From CHIA Nevada Healthcare Quarterly Reports

<sup>2</sup> Population From U.S. Census Bureau, Population Division

## Nevada Acute Care Hospitals Inpatient Days Per 1,000 Population



	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Clark County	489.7	475.3	480.6	472.1	455.7	456.4	444.9	453.1	459.0	483.0
Washoe County / Carson City	551.5	533.7	543.1	567.7	570.4	566.4	563.1	546.1	551.6	565.8
Rural Counties	95.4	94.2	99.0	114.2	129.1	132.5	137.3	115.4	132.4	151.9
Nevada	458.7	445.1	451.3	451.0	443.0	443.4	435.2	436.2	443.5	465.9

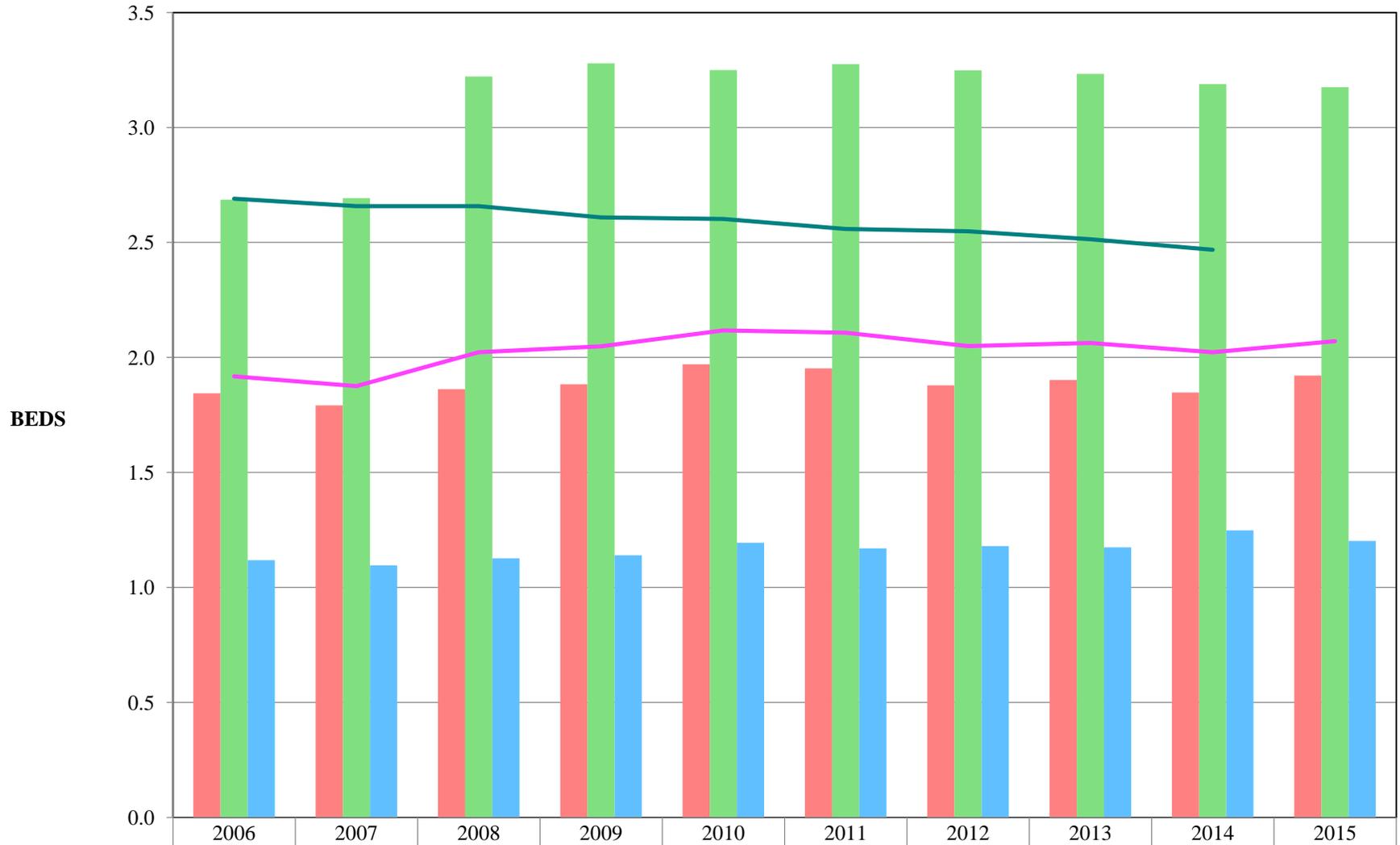
## Nevada Acute Care Hospitals - Inpatient Days Per 1,000 Population

Calendar Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>Nevada</b>										
Inpatient Days <sup>1</sup>	1,203,202	1,209,955	1,235,870	1,222,848	1,197,670	1,205,376	1,198,965	1,217,551	1,259,143	1,346,849
Population Estimate <sup>2</sup>	2,623,050	2,718,337	2,738,733	2,711,206	2,703,493	2,718,586	2,755,245	2,791,494	2,839,099	2,890,845
Inpatient Days Per 1,000	458.7	445.1	451.3	451.0	443.0	443.4	435.2	436.2	443.5	465.9
<b>Clark County</b>										
Inpatient Days <sup>1</sup>	918,162	928,875	945,746	921,605	890,174	897,719	889,123	919,455	949,928	1,021,430
Population Estimate <sup>2</sup>	1,874,837	1,954,319	1,967,716	1,952,040	1,953,263	1,967,159	1,998,646	2,029,316	2,069,681	2,114,801
Inpatient Days Per 1,000	489.7	475.3	480.6	472.1	455.7	456.4	444.9	453.1	459.0	483.0
<b>Washoe County / Carson City</b>										
Inpatient Days <sup>1</sup>	258,340	253,934	261,446	268,583	272,247	271,659	272,363	266,431	272,827	283,714
Population Estimate <sup>2</sup>	468,448	475,784	481,433	473,138	477,295	479,649	483,664	487,885	494,600	501,424
Inpatient Days Per 1,000	551.5	533.7	543.1	567.7	570.4	566.4	563.1	546.1	551.6	565.8
<b>Rural Counties</b>										
Inpatient Days <sup>1</sup>	26,700	27,146	28,678	32,660	35,249	35,998	37,479	31,665	36,388	41,705
Population Estimate <sup>2</sup>	279,765	288,234	289,584	286,028	272,935	271,778	272,935	274,293	274,818	274,620
Inpatient Days Per 1,000	95.4	94.2	99.0	114.2	129.1	132.5	137.3	115.4	132.4	151.9

<sup>1</sup> Inpatient Days From CHIA Nevada Healthcare Quarterly Reports

<sup>2</sup> Population From U.S. Census Bureau, Population Division

## Nevada Acute Care Hospitals Licensed Beds Per 1,000 Population



	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Clark County	1.8	1.8	1.9	1.9	2.0	2.0	1.9	1.9	1.8	1.9
Washoe County / Carson City	2.7	2.7	3.2	3.3	3.2	3.3	3.2	3.2	3.2	3.2
Rural Counties	1.1	1.1	1.1	1.1	1.2	1.2	1.2	1.2	1.2	1.2
Nevada	1.9	1.9	2.0	2.0	2.1	2.1	2.0	2.1	2.0	2.1
United States	2.7	2.7	2.7	2.6	2.6	2.6	2.5	2.5	2.5	

## Nevada Acute Care Hospitals - Licensed Beds Per 1,000 Population

Calendar Year	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
<b>United States</b>										
Beds <sup>1</sup>	802,658	800,892	808,069	805,593	804,943	797,403	800,566	795,603	786,874	*
Population Estimate <sup>2</sup>	298,363,000	301,290,000	304,060,000	308,745,538	309,347,057	311,721,632	314,112,078	316,497,531	318,857,056	321,418,820
Beds Per 1,000	2.7	2.7	2.7	2.6	2.6	2.6	2.5	2.5	2.5	
<b>Nevada</b>										
Licensed Beds <sup>3</sup>	5,029	5,098	5,541	5,554	5,725	5,729	5,648	5,758	5,743	5,985
Population Estimate <sup>2</sup>	2,623,050	2,718,337	2,738,733	2,711,206	2,703,493	2,718,586	2,755,245	2,791,494	2,839,099	2,890,845
Licensed Beds Per 1,000	1.9	1.9	2.0	2.0	2.1	2.1	2.0	2.1	2.0	2.1
<b>Clark County</b>										
Licensed Beds <sup>3</sup>	3,458	3,501	3,664	3,677	3,848	3,840	3,755	3,859	3,823	4,063
Population Estimate <sup>2</sup>	1,874,837	1,954,319	1,967,716	1,952,040	1,953,263	1,967,159	1,998,646	2,029,316	2,069,681	2,114,801
Licensed Beds Per 1,000	1.8	1.8	1.9	1.9	2.0	2.0	1.9	1.9	1.8	1.9
<b>Washoe County / Carson City</b>										
Licensed Beds <sup>3</sup>	1,258	1,281	1,551	1,551	1,551	1,571	1,571	1,577	1,577	1,592
Population Estimate <sup>2</sup>	468,448	475,784	481,433	473,138	477,295	479,649	483,664	487,885	494,600	501,424
Licensed Beds Per 1,000	2.7	2.7	3.2	3.3	3.2	3.3	3.2	3.2	3.2	3.2
<b>Rural Counties</b>										
Licensed Beds <sup>3</sup>	313	316	326	326	326	318	322	322	343	330
Population Estimate <sup>2</sup>	279,765	288,234	289,584	286,028	272,935	271,778	272,935	274,293	274,818	274,620
Licensed Beds Per 1,000	1.1	1.1	1.1	1.1	1.2	1.2	1.2	1.2	1.2	1.2

\* United States Beds Not Available At Time Of Publication

<sup>1</sup> United States Beds From American Hospital Association 2014 Annual Survey

<sup>2</sup> Population From U.S. Census Bureau, Population Division

<sup>3</sup> Licensed Beds From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015

Clark County Hospitals	Centennial Hills Hospital Medical Center	Desert Springs Hospital Medical Center	Mountain's Edge Hospital	MountainView Hospital	North Vista Hospital	Southern Hills Hospital and Medical Center	Spring Valley Hospital Medical Center	St. Rose Dominican - Rose de Lima Campus
<b>Billed Charges</b>	<b>\$1,487,004,246</b>	<b>\$1,709,962,996</b>	<b>\$11,209,946</b>	<b>\$2,795,404,723</b>	<b>\$549,394,830</b>	<b>\$1,001,776,172</b>	<b>\$2,031,160,383</b>	<b>\$851,306,293</b>
Inpatient	\$994,990,791	\$1,169,554,732	\$11,209,946	\$1,952,512,830	\$387,750,195	\$646,564,287	\$1,476,955,760	\$426,672,721
Outpatient	\$492,013,455	\$540,408,264	\$0	\$842,891,893	\$161,644,635	\$355,211,885	\$554,204,623	\$424,633,572
<b>Deductions</b>	<b>\$1,301,902,095</b>	<b>\$1,498,935,514</b>	<b>\$9,942,924</b>	<b>\$2,441,794,160</b>	<b>\$437,760,496</b>	<b>\$846,553,059</b>	<b>\$1,772,761,119</b>	<b>\$731,980,005</b>
Inpatient	\$876,254,441	\$1,026,772,351	\$9,942,924	\$1,689,781,903	\$329,886,643	\$543,514,994	\$1,297,311,583	\$360,151,791
Outpatient	\$425,647,654	\$472,163,163	\$0	\$752,012,257	\$107,873,853	\$303,038,065	\$475,449,536	\$371,828,214
<b>Operating Revenue</b>	<b>\$185,102,151</b>	<b>\$211,027,482</b>	<b>\$1,267,022</b>	<b>\$353,610,563</b>	<b>\$111,634,334</b>	<b>\$155,223,113</b>	<b>\$258,399,264</b>	<b>\$119,326,288</b>
Inpatient	\$118,736,350	\$142,782,381	\$1,267,022	\$262,730,927	\$57,863,552	\$103,049,293	\$179,644,177	\$66,520,930
Outpatient	\$66,365,801	\$68,245,101	\$0	\$90,879,636	\$53,770,782	\$52,173,820	\$78,755,087	\$52,805,358
<b>Other Operating Revenue</b>	<b>\$527,158</b>	<b>\$1,905,429</b>	<b>\$0</b>	<b>\$5,707,163</b>	<b>\$2,793,931</b>	<b>\$1,390,730</b>	<b>\$680,571</b>	<b>\$2,127,742</b>
<b>Total Operating Revenue</b>	<b>\$185,629,309</b>	<b>\$212,932,911</b>	<b>\$1,267,022</b>	<b>\$359,317,726</b>	<b>\$114,428,265</b>	<b>\$156,613,843</b>	<b>\$259,079,835</b>	<b>\$121,454,030</b>
Operating Expenses	\$176,289,633	\$212,117,908	\$5,786,655	\$344,616,985	\$96,253,916	\$143,959,005	\$241,041,485	\$151,132,912
<b>Net Operating Income</b>	<b>\$9,339,676</b>	<b>\$815,003</b>	<b>(\$4,519,633)</b>	<b>\$14,700,741</b>	<b>\$18,174,349</b>	<b>\$12,654,838</b>	<b>\$18,038,350</b>	<b>(\$29,678,882)</b>
Non-Operating Revenue	\$6,451	\$2,935	\$0	\$0	\$0	\$0	\$0	\$1,863,944
Non-Operating Expenses	\$8,803,732	\$7,928,408	\$0	\$0	\$175,473	\$0	\$6,658,150	\$0
<b>Net Income / (Loss)</b>	<b>\$542,395</b>	<b>(\$7,110,470)</b>	<b>(\$4,519,633)</b>	<b>\$14,700,741</b>	<b>\$17,998,876</b>	<b>\$12,654,838</b>	<b>\$11,380,200</b>	<b>(\$27,814,938)</b>
<b>Net Margin</b>	<b>0.29%</b>	<b>(3.34%)</b>	<b>(356.71%)</b>	<b>4.09%</b>	<b>15.73%</b>	<b>8.08%</b>	<b>4.39%</b>	<b>(22.56%)</b>
Inpatient Days	47,418	69,197	1,701	105,827	46,654	37,973	71,672	29,353
Admissions	12,436	12,230	172	21,160	8,725	8,720	15,037	5,003
Avg Length Of Stay	3.8	5.7	9.9	5.0	5.3	4.4	4.8	5.9
Avg Daily Census	129.9	189.6	4.7	289.9	127.8	104.0	196.4	80.4
Occupancy Percentage	68.37%	64.70%	3.58%	85.28%	75.19%	77.64%	82.85%	73.11%
Adjusted Inpatient Days	70,891	101,283	1,701	151,821	66,439	58,916	98,599	58,712
Adjusted Admissions	18,592	17,901	172	30,357	12,425	13,529	20,686	10,007
<b>Per Adjusted Admission</b>								
Billed Charges + Other Opr Rev	\$80,009	\$95,630	\$65,174	\$92,274	\$44,441	\$74,147	\$98,221	\$85,283
Operating Revenue	\$9,984	\$11,895	\$7,366	\$11,837	\$9,209	\$11,576	\$12,524	\$12,137
Operating Expenses	\$9,482	\$11,850	\$33,643	\$11,352	\$7,747	\$10,640	\$11,652	\$15,103
Net Operating Income	\$502	\$46	(\$26,277)	\$484	\$1,463	\$935	\$872	(\$2,966)
<b>Per Adjusted Inpatient Day</b>								
Billed Charges + Other Opr Rev	\$20,983	\$16,902	\$6,590	\$18,450	\$8,311	\$17,027	\$20,607	\$14,536
Operating Revenue	\$2,619	\$2,102	\$745	\$2,367	\$1,722	\$2,658	\$2,628	\$2,069
Operating Expenses	\$2,487	\$2,094	\$3,402	\$2,270	\$1,449	\$2,443	\$2,445	\$2,574
Net Operating Income	\$132	\$8	(\$2,657)	\$97	\$274	\$215	\$183	(\$505)

Data From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015 (continued)

Clark County Hospitals	St. Rose Dominican - San Martin Campus	St. Rose Dominican - Siena Campus	Summerlin Hospital Medical Center	Sunrise Hospital and Medical Center	University Medical Center of Southern Nevada	Valley Hospital Medical Center	Clark County Total
<b>Billed Charges</b>	<b>\$988,809,992</b>	<b>\$2,131,651,670</b>	<b>\$2,611,716,195</b>	<b>\$5,157,125,231</b>	<b>\$2,270,613,763</b>	<b>\$1,889,093,385</b>	<b>\$25,486,229,825</b>
Inpatient	\$570,555,105	\$1,270,064,870	\$1,827,865,326	\$3,606,511,693	\$1,548,416,839	\$1,407,303,306	\$17,296,928,401
Outpatient	\$418,254,887	\$861,586,800	\$783,850,869	\$1,550,613,538	\$722,196,924	\$481,790,079	\$8,189,301,424
<b>Deductions</b>	<b>\$828,045,732</b>	<b>\$1,765,691,864</b>	<b>\$2,266,273,124</b>	<b>\$4,541,823,250</b>	<b>\$1,711,022,979</b>	<b>\$1,653,426,085</b>	<b>\$21,807,912,406</b>
Inpatient	\$466,890,969	\$1,025,712,146	\$1,585,453,958	\$3,162,766,594	\$1,144,154,894	\$1,223,150,133	\$14,741,745,324
Outpatient	\$361,154,763	\$739,979,718	\$680,819,166	\$1,379,056,656	\$566,868,085	\$430,275,952	\$7,066,167,082
<b>Operating Revenue</b>	<b>\$160,764,260</b>	<b>\$365,959,806</b>	<b>\$345,443,071</b>	<b>\$615,301,981</b>	<b>\$559,590,784</b>	<b>\$235,667,300</b>	<b>\$3,678,317,419</b>
Inpatient	\$103,664,136	\$244,352,724	\$242,411,368	\$443,745,099	\$404,261,945	\$184,153,173	\$2,555,183,077
Outpatient	\$57,100,124	\$121,607,082	\$103,031,703	\$171,556,882	\$155,328,839	\$51,514,127	\$1,123,134,342
<b>Other Operating Revenue</b>	<b>\$1,877,680</b>	<b>\$4,829,440</b>	<b>\$1,718,789</b>	<b>\$3,660,794</b>	<b>\$28,922,816</b>	<b>\$729,857</b>	<b>\$56,872,100</b>
<b>Total Operating Revenue</b>	<b>\$162,641,940</b>	<b>\$370,789,246</b>	<b>\$347,161,860</b>	<b>\$618,962,775</b>	<b>\$588,513,600</b>	<b>\$236,397,157</b>	<b>\$3,735,189,519</b>
Operating Expenses	\$190,297,605	\$383,785,873	\$325,547,464	\$585,177,572	\$576,150,579	\$241,615,686	\$3,673,773,278
<b>Net Operating Income</b>	<b>(\$27,655,665)</b>	<b>(\$12,996,627)</b>	<b>\$21,614,396</b>	<b>\$33,785,203</b>	<b>\$12,363,021</b>	<b>(\$5,218,529)</b>	<b>\$61,416,241</b>
Non-Operating Revenue	(\$195,352)	(\$3,814,517)	\$0	\$0	\$46,702,410	\$0	\$44,565,871
Non-Operating Expenses	\$0	\$0	\$10,900,984	\$0	\$1,440,530	\$7,843,083	\$43,750,360
<b>Net Income / (Loss)</b>	<b>(\$27,851,017)</b>	<b>(\$16,811,144)</b>	<b>\$10,713,412</b>	<b>\$33,785,203</b>	<b>\$57,624,901</b>	<b>(\$13,061,612)</b>	<b>\$62,231,752</b>
<b>Net Margin</b>	<b>(17.14%)</b>	<b>(4.58%)</b>	<b>3.09%</b>	<b>5.46%</b>	<b>9.07%</b>	<b>(5.53%)</b>	<b>1.65%</b>
Inpatient Days Admissions	33,829	75,160	101,416	198,167	123,632	79,435	1,021,434
Avg Length Of Stay	5.0	4.9	5.0	6.1	6.4	5.6	5.3
Avg Daily Census	92.7	205.9	277.9	542.9	338.7	217.6	2,798.4
Occupancy Percentage	63.05%	63.16%	61.20%	78.68%	62.61%	72.30%	68.88%
Adjusted Inpatient Days	58,739	126,433	145,002	283,570	183,605	106,671	1,508,395
Adjusted Admissions	11,773	25,796	28,899	46,495	28,885	19,081	283,477
<b>Per Adjusted Admission</b>							
Billed Charges + Other Opr Rev	\$84,153	\$82,821	\$90,435	\$110,997	\$79,610	\$99,043	\$90,106
Operating Revenue	\$13,815	\$14,374	\$12,013	\$13,312	\$20,374	\$12,389	\$13,176
Operating Expenses	\$16,165	\$14,878	\$11,265	\$12,586	\$19,946	\$12,663	\$12,960
Net Operating Income	(\$2,349)	(\$504)	\$748	\$727	\$428	(\$273)	\$217
<b>Per Adjusted Inpatient Day</b>							
Billed Charges + Other Opr Rev	\$16,866	\$16,898	\$18,023	\$18,199	\$12,524	\$17,716	\$16,934
Operating Revenue	\$2,769	\$2,933	\$2,394	\$2,183	\$3,205	\$2,216	\$2,476
Operating Expenses	\$3,240	\$3,035	\$2,245	\$2,064	\$3,138	\$2,265	\$2,436
Net Operating Income	(\$471)	(\$103)	\$149	\$119	\$67	(\$49)	\$41

Data From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015

Washoe County / Carson City Hospitals	Carson Tahoe Regional Medical Center	Northern Nevada Medical Center	Renown Regional Medical Center	Renown South Meadows Medical Center	Saint Mary's Regional Medical Center	Sierra Surgery Hospital	Washoe County / Carson City Total
<b>Billed Charges</b>	<b>\$888,957,444</b>	<b>\$541,296,003</b>	<b>\$2,595,056,053</b>	<b>\$342,068,287</b>	<b>\$1,315,235,807</b>	<b>\$25,836,394</b>	<b>\$5,708,449,988</b>
Inpatient	\$459,147,478	\$289,196,090	\$1,491,868,218	\$98,175,627	\$760,742,141	\$9,495,386	\$3,108,624,940
Outpatient	\$429,809,966	\$252,099,913	\$1,103,187,835	\$243,892,660	\$554,493,666	\$16,341,008	\$2,599,825,048
<b>Deductions</b>	<b>\$643,105,371</b>	<b>\$461,034,511</b>	<b>\$1,975,638,430</b>	<b>\$261,002,937</b>	<b>\$1,001,575,250</b>	<b>\$18,570,854</b>	<b>\$4,360,927,353</b>
Inpatient	\$326,783,245	\$258,661,273	\$1,102,168,029	\$72,332,439	\$610,876,419	\$6,973,977	\$2,377,795,382
Outpatient	\$316,322,126	\$202,373,238	\$873,470,401	\$188,670,498	\$390,698,831	\$11,596,877	\$1,983,131,971
<b>Operating Revenue</b>	<b>\$245,852,073</b>	<b>\$80,261,492</b>	<b>\$619,417,623</b>	<b>\$81,065,350</b>	<b>\$313,660,557</b>	<b>\$7,265,540</b>	<b>\$1,347,522,635</b>
Inpatient	\$132,364,233	\$30,534,817	\$389,700,189	\$25,843,188	\$149,865,722	\$2,521,409	\$730,829,558
Outpatient	\$113,487,840	\$49,726,675	\$229,717,434	\$55,222,162	\$163,794,835	\$4,744,131	\$616,693,077
<b>Other Operating Revenue</b>	<b>\$3,028,635</b>	<b>\$977,373</b>	<b>\$15,584,373</b>	<b>\$2,685,142</b>	<b>\$7,531,529</b>	<b>\$23,111</b>	<b>\$29,830,163</b>
<b>Total Operating Revenue</b>	<b>\$248,880,708</b>	<b>\$81,238,865</b>	<b>\$635,001,996</b>	<b>\$83,750,492</b>	<b>\$321,192,086</b>	<b>\$7,288,651</b>	<b>\$1,377,352,798</b>
Operating Expenses	\$229,388,857	\$74,634,128	\$544,497,272	\$64,845,643	\$280,312,122	\$8,707,154	\$1,202,385,176
<b>Net Operating Income</b>	<b>\$19,491,851</b>	<b>\$6,604,737</b>	<b>\$90,504,724</b>	<b>\$18,904,849</b>	<b>\$40,879,964</b>	<b>(\$1,418,503)</b>	<b>\$174,967,622</b>
Non-Operating Revenue	\$1,948,891	\$3,672	\$2,140,991	\$963,118	\$7,026,337	\$0	\$12,083,009
Non-Operating Expenses	\$0	\$1,937,905	\$3,027,107	\$0	\$13,809,509	\$0	\$18,774,521
<b>Net Income / (Loss)</b>	<b>\$21,440,742</b>	<b>\$4,670,504</b>	<b>\$89,618,608</b>	<b>\$19,867,967</b>	<b>\$34,096,792</b>	<b>(\$1,418,503)</b>	<b>\$168,276,110</b>
<b>Net Margin</b>	<b>8.55%</b>	<b>5.75%</b>	<b>14.07%</b>	<b>23.45%</b>	<b>10.39%</b>	<b>(19.46%)</b>	<b>12.11%</b>
Inpatient Days	51,069	19,456	148,944	8,890	54,918	437	283,714
Admissions	11,905	3,812	27,054	2,968	15,408	175	61,322
Avg Length Of Stay	4.3	5.1	5.5	3.0	3.6	2.5	4.6
Avg Daily Census	139.9	53.3	408.1	24.4	150.5	1.2	777.3
Occupancy Percentage	68.25%	49.36%	50.50%	32.05%	39.59%	7.98%	48.83%
Adjusted Inpatient Days	99,212	36,482	260,639	31,218	95,491	1,190	523,714
Adjusted Admissions	23,128	7,148	47,342	10,422	26,791	477	113,196
<b>Per Adjusted Admission</b>							
Billed Charges + Other Opr Rev	\$38,568	\$75,865	\$55,144	\$33,078	\$49,373	\$54,259	\$50,693
Operating Revenue	\$10,761	\$11,365	\$13,413	\$8,036	\$11,989	\$15,293	\$12,168
Operating Expenses	\$9,918	\$10,441	\$11,501	\$6,222	\$10,463	\$18,270	\$10,622
Net Operating Income	\$843	\$924	\$1,912	\$1,814	\$1,526	(\$2,976)	\$1,546
<b>Per Adjusted Inpatient Day</b>							
Billed Charges + Other Opr Rev	\$8,991	\$14,864	\$10,016	\$11,043	\$13,852	\$21,729	\$10,957
Operating Revenue	\$2,509	\$2,227	\$2,436	\$2,683	\$3,364	\$6,124	\$2,630
Operating Expenses	\$2,312	\$2,046	\$2,089	\$2,077	\$2,935	\$7,316	\$2,296
Net Operating Income	\$196	\$181	\$347	\$606	\$428	(\$1,192)	\$334

Data From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015

Rural Hospitals	Banner Churchill Community Hospital	Battle Mountain General Hospital	Boulder City Hospital	Carson Valley Medical Center	Desert View Regional Medical Center	Grover C Dils Medical Center	Humboldt General Hospital	Incline Village Community Hospital
<b>Billed Charges</b>	<b>\$116,533,179</b>	<b>\$9,716,130</b>	<b>\$53,262,805</b>	<b>\$143,620,679</b>	<b>\$169,700,087</b>	<b>\$3,673,615</b>	<b>\$69,143,845</b>	<b>\$15,328,560</b>
Inpatient	\$34,067,129	\$488,825	\$20,098,721	\$26,240,250	\$31,880,176	\$1,219,653	\$19,740,232	\$93,189
Outpatient	\$82,466,050	\$9,227,305	\$33,164,084	\$117,380,429	\$137,819,911	\$2,453,962	\$49,403,613	\$15,235,371
<b>Deductions</b>	<b>\$76,273,512</b>	<b>\$3,750,179</b>	<b>\$23,548,321</b>	<b>\$100,579,979</b>	<b>\$134,668,017</b>	<b>\$1,507,180</b>	<b>\$33,940,211</b>	<b>\$5,558,707</b>
Inpatient	\$18,343,414	(\$77,426)	\$8,493,021	\$19,015,420	\$25,332,033	\$482,053	\$14,851,734	(\$141,466)
Outpatient	\$57,930,098	\$3,827,605	\$15,055,300	\$81,564,559	\$109,335,984	\$1,025,127	\$19,088,477	\$5,700,173
<b>Operating Revenue</b>	<b>\$40,259,667</b>	<b>\$5,965,951</b>	<b>\$29,714,484</b>	<b>\$43,040,700</b>	<b>\$35,032,070</b>	<b>\$2,166,435</b>	<b>\$35,203,634</b>	<b>\$9,769,853</b>
Inpatient	\$15,723,715	\$566,251	\$11,605,700	\$7,224,830	\$6,548,143	\$737,600	\$4,888,498	\$234,655
Outpatient	\$24,535,952	\$5,399,700	\$18,108,784	\$35,815,870	\$28,483,927	\$1,428,835	\$30,315,136	\$9,535,198
<b>Other Operating Revenue</b>	<b>\$5,731,019</b>	<b>\$2,731,383</b>	<b>\$3,954,108</b>	<b>\$5,381,234</b>	<b>\$0</b>	<b>\$2,235,278</b>	<b>\$5,291,417</b>	<b>\$1,328,758</b>
<b>Total Operating Revenue</b>	<b>\$45,990,686</b>	<b>\$8,697,334</b>	<b>\$33,668,592</b>	<b>\$48,421,934</b>	<b>\$35,032,070</b>	<b>\$4,401,713</b>	<b>\$40,495,051</b>	<b>\$11,098,611</b>
Operating Expenses	\$46,507,251	\$14,823,871	\$17,518,671	\$44,506,107	\$28,497,546	\$5,204,280	\$42,576,622	\$9,717,374
<b>Net Operating Income</b>	<b>(\$516,565)</b>	<b>(\$6,126,537)</b>	<b>\$16,149,921</b>	<b>\$3,915,827</b>	<b>\$6,534,524</b>	<b>(\$802,567)</b>	<b>(\$2,081,571)</b>	<b>\$1,381,237</b>
Non-Operating Revenue	\$1,000	\$7,664,355	\$144,317	\$66,572	\$0	\$1,016,068	\$8,714,224	\$45,243
Non-Operating Expenses	\$3,684	\$232,838	\$0	\$0	\$0	\$5,146	\$0	\$0
<b>Net Income / (Loss)</b>	<b>(\$519,249)</b>	<b>\$1,304,980</b>	<b>\$16,294,238</b>	<b>\$3,982,399</b>	<b>\$6,534,524</b>	<b>\$208,355</b>	<b>\$6,632,653</b>	<b>\$1,426,480</b>
<b>Net Margin</b>	<b>(1.13%)</b>	<b>7.98%</b>	<b>48.19%</b>	<b>8.21%</b>	<b>18.65%</b>	<b>3.85%</b>	<b>13.48%</b>	<b>12.80%</b>
Inpatient Days	4,901	100	13,702	2,992	4,571	662	2,875	11
Admissions	1,577	40	794	953	1,408	128	831	5
Avg Length Of Stay	3.1	2.5	17.3	3.1	3.2	5.2	3.5	2.2
Avg Daily Census	13.4	0.3	37.5	8.2	12.5	1.8	7.9	0.0
Occupancy Percentage	53.71%	3.91%	85.32%	35.64%	50.09%	45.34%	34.25%	0.75%
Adjusted Inpatient Days	17,589	2,546	39,007	16,990	24,332	3,207	10,841	1,966
Adjusted Admissions	5,660	1,019	2,260	5,411	7,495	620	3,133	894
<b>Per Adjusted Admission</b>								
Billed Charges + Other Opr Rev	\$21,602	\$12,221	\$25,313	\$27,534	\$22,642	\$9,529	\$23,755	\$18,638
Operating Revenue	\$8,126	\$8,539	\$14,895	\$8,948	\$4,674	\$7,098	\$12,923	\$12,418
Operating Expenses	\$8,217	\$14,554	\$7,750	\$8,224	\$3,802	\$8,392	\$13,588	\$10,873
Net Operating Income	(\$91)	(\$6,015)	\$7,145	\$724	\$872	(\$1,294)	(\$664)	\$1,545
<b>Per Adjusted Inpatient Day</b>								
Billed Charges + Other Opr Rev	\$6,951	\$4,888	\$1,467	\$8,770	\$6,974	\$1,842	\$6,866	\$8,472
Operating Revenue	\$2,615	\$3,416	\$863	\$2,850	\$1,440	\$1,372	\$3,735	\$5,645
Operating Expenses	\$2,644	\$5,821	\$449	\$2,620	\$1,171	\$1,623	\$3,927	\$4,942
Net Operating Income	(\$29)	(\$2,406)	\$414	\$230	\$269	(\$250)	(\$192)	\$702

Data From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015 (continued)

Rural Hospitals	Mesa View Regional Hospital	Mount Grant General Hospital	Northeastern Nevada Regional Hospital	Nye Regional Medical Center	Pershing General Hospital	South Lyon Medical Center	William Bee Ririe Hospital	Rural Total
<b>Billed Charges</b>	<b>\$76,744,888</b>	<b>\$15,481,268</b>	<b>\$199,047,488</b>	<b>\$4,378,215</b>	<b>\$8,380,077</b>	<b>\$13,545,881</b>	<b>\$43,172,885</b>	<b>\$941,729,602</b>
Inpatient	\$17,117,539	\$5,732,120	\$67,923,697	\$156,613	\$227,914	\$570,943	\$8,404,225	\$233,961,226
Outpatient	\$59,627,349	\$9,749,148	\$131,123,791	\$4,221,602	\$8,152,163	\$12,974,938	\$34,768,660	\$707,768,376
<b>Deductions</b>	<b>\$52,015,928</b>	<b>\$8,161,588</b>	<b>\$116,300,785</b>	<b>\$3,614,481</b>	<b>\$4,396,433</b>	<b>\$10,181,680</b>	<b>\$21,756,176</b>	<b>\$596,253,177</b>
Inpatient	\$9,316,931	\$2,825,845	\$36,827,923	\$1,166,731	(\$108,871)	\$232,655	\$4,065,901	\$140,625,898
Outpatient	\$42,698,997	\$5,335,743	\$79,472,862	\$2,447,750	\$4,505,304	\$9,949,025	\$17,690,275	\$455,627,279
<b>Operating Revenue</b>	<b>\$24,728,960</b>	<b>\$7,319,680</b>	<b>\$82,746,703</b>	<b>\$763,734</b>	<b>\$3,983,644</b>	<b>\$3,364,201</b>	<b>\$21,416,709</b>	<b>\$345,476,425</b>
Inpatient	\$7,800,608	\$2,906,275	\$31,095,774	(\$1,010,118)	\$336,785	\$338,288	\$4,338,324	\$93,335,328
Outpatient	\$16,928,352	\$4,413,405	\$51,650,929	\$1,773,852	\$3,646,859	\$3,025,913	\$17,078,385	\$252,141,097
<b>Other Operating Revenue</b>	<b>\$3,657,907</b>	<b>\$3,338,847</b>	<b>\$1,718,042</b>	<b>\$384,588</b>	<b>\$6,502,733</b>	<b>\$6,256,303</b>	<b>\$6,584,580</b>	<b>\$55,096,197</b>
<b>Total Operating Revenue</b>	<b>\$28,386,867</b>	<b>\$10,658,527</b>	<b>\$84,464,745</b>	<b>\$1,148,322</b>	<b>\$10,486,377</b>	<b>\$9,620,504</b>	<b>\$28,001,289</b>	<b>\$400,572,622</b>
Operating Expenses	\$27,361,648	\$11,045,025	\$62,914,214	\$4,033,482	\$9,988,876	\$11,616,815	\$27,021,954	\$363,333,736
<b>Net Operating Income</b>	<b>\$1,025,219</b>	<b>(\$386,498)</b>	<b>\$21,550,531</b>	<b>(\$2,885,160)</b>	<b>\$497,501</b>	<b>(\$1,996,311)</b>	<b>\$979,335</b>	<b>\$37,238,886</b>
Non-Operating Revenue	\$331,796	\$450,756	\$705,862	\$0	\$1,510,289	\$888,911	\$2,791,173	\$24,330,566
Non-Operating Expenses	\$327,897	\$5	\$0	\$0	\$0	\$0	\$1,298,568	\$1,868,138
<b>Net Income / (Loss)</b>	<b>\$1,029,118</b>	<b>\$64,253</b>	<b>\$22,256,393</b>	<b>(\$2,885,160)</b>	<b>\$2,007,790</b>	<b>(\$1,107,400)</b>	<b>\$2,471,940</b>	<b>\$59,701,314</b>
<b>Net Margin</b>	<b>3.58%</b>	<b>0.58%</b>	<b>26.13%</b>	<b>(251.25%)</b>	<b>16.74%</b>	<b>(10.54%)</b>	<b>8.03%</b>	<b>14.05%</b>
Inpatient Days	2,173	1,402	6,257	18	427	290	1,324	41,705
Admissions	724	370	2,152	18	58	84	437	9,579
Avg Length Of Stay	3.0	3.8	2.9	1.0	7.4	3.5	3.0	4.4
Avg Daily Census	6.0	3.8	17.1	0.0	1.2	0.8	3.6	114.3
Occupancy Percentage	23.81%	34.92%	22.86%	0.41%	9.00%	5.68%	14.51%	34.62%
Adjusted Inpatient Days	10,207	4,603	18,494	547	27,883	10,058	7,839	177,690
Adjusted Admissions	3,401	1,215	6,361	547	3,787	2,913	2,587	40,813
<b>Per Adjusted Admission</b>								
Billed Charges + Other Opr Rev	\$23,643	\$15,492	\$31,563	\$8,701	\$3,930	\$6,797	\$19,232	\$24,424
Operating Revenue	\$8,347	\$8,774	\$13,279	\$2,098	\$2,769	\$3,302	\$10,823	\$9,815
Operating Expenses	\$8,046	\$9,092	\$9,891	\$7,368	\$2,637	\$3,987	\$10,444	\$8,902
Net Operating Income	\$301	(\$318)	\$3,388	(\$5,271)	\$131	(\$685)	\$379	\$912
<b>Per Adjusted Inpatient Day</b>								
Billed Charges + Other Opr Rev	\$7,877	\$4,089	\$10,856	\$8,701	\$534	\$1,969	\$6,348	\$5,610
Operating Revenue	\$2,781	\$2,315	\$4,567	\$2,098	\$376	\$956	\$3,572	\$2,254
Operating Expenses	\$2,681	\$2,399	\$3,402	\$7,368	\$358	\$1,155	\$3,447	\$2,045
Net Operating Income	\$100	(\$84)	\$1,165	(\$5,271)	\$18	(\$198)	\$125	\$210

Data From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015

Rehab / Long Term Care / Specialty Hospitals	Carson Tahoe Continuing Care Hospital	Complex Care Hospital at Tenaya	Harmon Medical and Rehabilitation Hospital	Healthsouth Desert Canyon Rehabilitation Hospital	Healthsouth Rehabilitation Hospital of Henderson	Healthsouth Rehabilitation Hospital of Las Vegas	Horizon Specialty Hospital - Las Vegas	Horizon Specialty Hospital of Henderson
<b>Billed Charges</b>	<b>\$54,400,005</b>	<b>\$126,091,224</b>	<b>\$56,641,278</b>	<b>\$35,560,299</b>	<b>\$62,282,935</b>	<b>\$56,215,623</b>	<b>\$13,523,074</b>	<b>\$28,645,397</b>
Inpatient	\$50,231,157	\$126,091,224	\$56,641,278	\$34,504,757	\$60,011,444	\$56,215,623	\$13,523,074	\$28,645,397
Outpatient	\$4,168,848	\$0	\$0	\$1,055,542	\$2,271,491	\$0	\$0	\$0
<b>Deductions</b>	<b>\$40,355,747</b>	<b>\$87,988,983</b>	<b>\$31,224,448</b>	<b>\$15,276,268</b>	<b>\$26,128,351</b>	<b>\$27,033,411</b>	<b>\$6,566,156</b>	<b>\$12,315,696</b>
Inpatient	\$37,297,059	\$87,988,983	\$31,224,448	\$14,561,772	\$24,759,565	\$27,033,411	\$6,566,156	\$12,315,696
Outpatient	\$3,058,688	\$0	\$0	\$714,496	\$1,368,786	\$0	\$0	\$0
<b>Operating Revenue</b>	<b>\$14,044,258</b>	<b>\$38,102,241</b>	<b>\$25,416,830</b>	<b>\$20,284,031</b>	<b>\$36,154,584</b>	<b>\$29,182,212</b>	<b>\$6,956,918</b>	<b>\$16,329,701</b>
Inpatient	\$12,934,098	\$38,102,241	\$25,416,830	\$19,942,985	\$35,251,879	\$29,182,212	\$6,956,918	\$16,329,701
Outpatient	\$1,110,160	\$0	\$0	\$341,046	\$902,705	\$0	\$0	\$0
<b>Other Operating Revenue</b>	<b>\$266</b>	<b>\$29,243</b>	<b>\$0</b>	<b>\$0</b>	<b>\$61,784</b>	<b>\$68,026</b>	<b>\$489</b>	<b>\$12,137</b>
<b>Total Operating Revenue</b>	<b>\$14,044,524</b>	<b>\$38,131,484</b>	<b>\$25,416,830</b>	<b>\$20,284,031</b>	<b>\$36,216,368</b>	<b>\$29,250,238</b>	<b>\$6,957,407</b>	<b>\$16,341,838</b>
Operating Expenses	\$13,380,967	\$32,010,310	\$24,413,120	\$18,803,957	\$26,377,837	\$21,798,956	\$8,177,472	\$15,038,751
<b>Net Operating Income</b>	<b>\$663,557</b>	<b>\$6,121,174</b>	<b>\$1,003,710</b>	<b>\$1,480,074</b>	<b>\$9,838,531</b>	<b>\$7,451,282</b>	<b>(\$1,220,065)</b>	<b>\$1,303,087</b>
Non-Operating Revenue	(\$16,949)	\$4,041	\$0	\$3,875	\$1,007,169	\$0	\$0	\$0
Non-Operating Expenses	\$0	\$0	\$0	\$0	\$397,985	\$0	\$0	\$0
<b>Net Income / (Loss)</b>	<b>\$646,608</b>	<b>\$6,125,215</b>	<b>\$1,003,710</b>	<b>\$1,483,949</b>	<b>\$10,447,715</b>	<b>\$7,451,282</b>	<b>(\$1,220,065)</b>	<b>\$1,303,087</b>
<b>Net Margin</b>	<b>4.61%</b>	<b>16.06%</b>	<b>3.95%</b>	<b>7.31%</b>	<b>28.07%</b>	<b>25.47%</b>	<b>(17.54%)</b>	<b>7.97%</b>
Inpatient Days	8,001	22,395	35,648	14,212	25,532	21,356	5,703	11,838
Admissions	344	817	2,085	1,186	1,817	1,673	134	513
Avg Length Of Stay	23.3	27.4	17.1	12.0	14.1	12.8	42.6	23.1
Avg Daily Census	21.9	61.4	97.7	38.9	70.0	58.5	15.6	32.4
Occupancy Percentage	75.59%	87.65%	82.77%	77.87%	77.72%	74.06%	25.61%	83.16%
Adjusted Inpatient Days	8,665	22,400	35,648	14,647	26,525	21,382	5,703	11,843
Adjusted Admissions	373	817	2,085	1,222	1,888	1,675	134	513
<b>Per Adjusted Admission</b>								
Billed Charges + Other Opr Rev	\$146,021	\$154,334	\$27,166	\$29,093	\$33,028	\$33,602	\$100,918	\$55,839
Operating Revenue	\$37,698	\$46,662	\$12,190	\$16,595	\$19,186	\$17,463	\$51,919	\$31,842
Operating Expenses	\$35,917	\$39,171	\$11,709	\$15,384	\$13,974	\$13,014	\$61,024	\$29,303
Net Operating Income	\$1,781	\$7,491	\$481	\$1,211	\$5,212	\$4,448	(\$9,105)	\$2,539
<b>Per Adjusted Inpatient Day</b>								
Billed Charges + Other Opr Rev	\$6,278	\$5,630	\$1,589	\$2,428	\$2,350	\$2,632	\$2,371	\$2,420
Operating Revenue	\$1,621	\$1,702	\$713	\$1,385	\$1,365	\$1,368	\$1,220	\$1,380
Operating Expenses	\$1,544	\$1,429	\$685	\$1,284	\$994	\$1,020	\$1,434	\$1,270
Net Operating Income	\$77	\$273	\$28	\$101	\$371	\$348	(\$214)	\$110

Data From CHIA Nevada Healthcare Quarterly Reports

Hospital Comparative Financial Summary for CY2015 (continued)

Kindred Hospital - Las Vegas (Flamingo Campus)	Rehab / Long Term Care / Specialty Hospitals	Kindred Hospital - Las Vegas (Sahara Campus)	Kindred Hospital - Las Vegas at St Rose De Lima Campus	Las Vegas-AMG Specialty Hospital, LLC	Progressive Hospital	Renown Rehabilitation Hospital	Tahoe Pacific Hospitals - Meadows	Tahoe Pacific Hospitals - North	Rehab / Long Term Care / Specialty Total
<b>\$90,957,317</b>	<b>Billed Charges</b>	<b>\$70,246,053</b>	<b>\$52,531,647</b>	<b>\$11,219,712</b>	<b>\$3,988,209</b>	<b>\$83,270,231</b>	<b>\$85,574,768</b>	<b>\$65,634,833</b>	<b>\$896,782,605</b>
\$90,957,317	Inpatient	\$67,152,810	\$51,655,540	\$11,219,712	\$3,988,209	\$54,689,858	\$85,574,768	\$65,634,833	\$856,737,001
\$0	Outpatient	\$3,093,243	\$876,107	\$0	\$0	\$28,580,373	\$0	\$0	\$40,045,604
<b>\$65,611,398</b>	<b>Deductions</b>	<b>\$49,293,459</b>	<b>\$37,869,909</b>	<b>\$7,771,393</b>	<b>\$2,474,911</b>	<b>\$60,502,910</b>	<b>\$68,986,320</b>	<b>\$51,806,667</b>	<b>\$591,206,027</b>
\$65,611,398	Inpatient	\$46,887,044	\$37,113,778	\$7,771,393	\$2,474,911	\$38,752,962	\$68,986,320	\$51,806,667	\$561,151,563
\$0	Outpatient	\$2,406,415	\$756,131	\$0	\$0	\$21,749,948	\$0	\$0	\$30,054,464
<b>\$25,345,919</b>	<b>Operating Revenue</b>	<b>\$20,952,594</b>	<b>\$14,661,738</b>	<b>\$3,448,319</b>	<b>\$1,513,298</b>	<b>\$22,767,321</b>	<b>\$16,588,448</b>	<b>\$13,828,166</b>	<b>\$305,576,578</b>
\$25,345,919	Inpatient	\$20,265,766	\$14,541,762	\$3,448,319	\$1,513,298	\$15,936,896	\$16,588,448	\$13,828,166	\$295,585,438
\$0	Outpatient	\$686,828	\$119,976	\$0	\$0	\$6,830,425	\$0	\$0	\$9,991,140
<b>\$14,950,313</b>	<b>Other Operating Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$3,304</b>	<b>\$744</b>	<b>\$73,729</b>	<b>\$197</b>	<b>\$359</b>	<b>\$15,200,591</b>
<b>\$40,296,232</b>	<b>Total Operating Revenue</b>	<b>\$20,952,594</b>	<b>\$14,661,738</b>	<b>\$3,451,623</b>	<b>\$1,514,042</b>	<b>\$22,841,050</b>	<b>\$16,588,645</b>	<b>\$13,828,525</b>	<b>\$320,777,169</b>
\$39,376,575	Operating Expenses	\$19,262,005	\$14,458,671	\$4,137,247	\$1,474,851	\$20,201,947	\$18,322,445	\$4,828,136	\$282,063,247
<b>\$919,657</b>	<b>Net Operating Income</b>	<b>\$1,690,589</b>	<b>\$203,067</b>	<b>(\$685,624)</b>	<b>\$39,191</b>	<b>\$2,639,103</b>	<b>(\$1,733,800)</b>	<b>\$9,000,389</b>	<b>\$38,713,922</b>
\$61,597	Non-Operating Revenue	\$55,902	\$11,444	\$0	\$0	\$84,029	\$927	\$2,345	\$1,214,380
\$0	Non-Operating Expenses	\$0	\$0	\$0	\$0	\$17,703	\$0	\$0	\$415,688
<b>\$981,254</b>	<b>Net Income / (Loss)</b>	<b>\$1,746,491</b>	<b>\$214,511</b>	<b>(\$685,624)</b>	<b>\$39,191</b>	<b>\$2,705,429</b>	<b>(\$1,732,873)</b>	<b>\$9,002,734</b>	<b>\$39,512,614</b>
<b>2.43%</b>	<b>Net Margin</b>	<b>8.31%</b>	<b>1.46%</b>	<b>(19.86%)</b>	<b>2.59%</b>	<b>11.80%</b>	<b>(10.45%)</b>	<b>65.09%</b>	<b>12.27%</b>
40,096	Inpatient Days	11,544	8,716	1,475	1,153	12,967	8,553	6,137	235,326
1,606	Admissions	357	270	57	33	804	257	217	12,170
25.0	Avg Length Of Stay	32.3	32.3	25.9	34.9	16.1	33.3	28.3	19.3
109.9	Avg Daily Census	31.6	23.9	4.0	3.2	35.5	23.4	16.8	644.7
63.13%	Occupancy Percentage	60.82%	85.28%	16.84%	13.16%	57.30%	60.08%	80.07%	67.16%
46,686	Adjusted Inpatient Days	12,076	8,864	1,475	1,153	19,761	8,553	6,137	250,501
1,870	Adjusted Admissions	373	275	57	33	1,225	257	217	12,955
	<b>Per Adjusted Admission</b>								
\$56,636	Billed Charges + Other Opr Rev	\$188,103	\$191,317	\$196,837	\$120,855	\$68,022	\$332,976	\$302,465	\$70,397
\$21,549	Operating Revenue	\$56,106	\$53,397	\$60,537	\$45,872	\$18,642	\$64,547	\$63,726	\$24,761
\$21,057	Operating Expenses	\$51,579	\$52,658	\$72,562	\$44,684	\$16,488	\$71,293	\$22,249	\$21,773
\$492	Net Operating Income	\$4,527	\$740	(\$12,025)	\$1,187	\$2,154	(\$6,746)	\$41,476	\$2,988
	<b>Per Adjusted Inpatient Day</b>								
\$2,268	Billed Charges + Other Opr Rev	\$5,817	\$5,927	\$7,607	\$3,459	\$4,218	\$10,005	\$10,695	\$3,641
\$863	Operating Revenue	\$1,735	\$1,654	\$2,339	\$1,313	\$1,156	\$1,940	\$2,253	\$1,281
\$843	Operating Expenses	\$1,595	\$1,631	\$2,804	\$1,279	\$1,022	\$2,142	\$787	\$1,126
\$20	Net Operating Income	\$140	\$23	(\$465)	\$34	\$134	(\$203)	\$1,467	\$155

Data From CHIA Nevada Healthcare Quarterly Reports

## Hospital Comparative Financial Summary for CY2015

Psychiatric Hospitals	Desert Parkway Behavioral Healthcare Hospital	Montevista Hospital	Red Rock Behavioral Health Hospital	Seven Hills Behavioral Institute	Spring Mountain Sahara	Spring Mountain Treatment Center	West Hills Hospital	Willow Springs Center	Psychiatric Total
<b>Billed Charges</b>	<b>\$41,617,943</b>	<b>\$64,377,678</b>	<b>\$9,511,508</b>	<b>\$47,571,605</b>	<b>\$14,415,926</b>	<b>\$52,689,334</b>	<b>\$31,367,655</b>	<b>\$37,870,132</b>	<b>\$299,421,781</b>
Inpatient	\$39,971,925	\$56,931,928	\$9,511,508	\$44,619,825	\$13,751,500	\$51,709,269	\$29,832,740	\$36,574,000	\$282,902,695
Outpatient	\$1,646,018	\$7,445,750	\$0	\$2,951,780	\$664,426	\$980,065	\$1,534,915	\$1,296,132	\$16,519,086
<b>Deductions</b>	<b>\$23,313,797</b>	<b>\$36,784,120</b>	<b>\$4,430,976</b>	<b>\$24,698,037</b>	<b>\$7,330,731</b>	<b>\$31,748,232</b>	<b>\$16,566,638</b>	<b>\$16,034,110</b>	<b>\$160,906,641</b>
Inpatient	\$22,064,222	\$32,271,997	\$4,430,976	\$22,766,492	\$7,042,945	\$31,223,294	\$16,002,799	\$15,406,518	\$151,209,243
Outpatient	\$1,249,575	\$4,512,123	\$0	\$1,931,545	\$287,786	\$524,938	\$563,839	\$627,592	\$9,697,398
<b>Operating Revenue</b>	<b>\$18,304,146</b>	<b>\$27,593,558</b>	<b>\$5,080,532</b>	<b>\$22,873,568</b>	<b>\$7,085,195</b>	<b>\$20,941,102</b>	<b>\$14,801,017</b>	<b>\$21,836,022</b>	<b>\$138,515,140</b>
Inpatient	\$17,907,703	\$24,659,931	\$5,080,532	\$21,853,333	\$6,708,555	\$20,485,975	\$13,829,941	\$21,167,482	\$131,693,452
Outpatient	\$396,443	\$2,933,627	\$0	\$1,020,235	\$376,640	\$455,127	\$971,076	\$668,540	\$6,821,688
<b>Other Operating Revenue</b>	<b>\$17,910</b>	<b>\$0</b>	<b>\$0</b>	<b>\$8,588</b>	<b>\$6,274</b>	<b>\$39,724</b>	<b>\$2,007,493</b>	<b>\$218,064</b>	<b>\$2,298,053</b>
<b>Total Operating Revenue</b>	<b>\$18,322,056</b>	<b>\$27,593,558</b>	<b>\$5,080,532</b>	<b>\$22,882,156</b>	<b>\$7,091,469</b>	<b>\$20,980,826</b>	<b>\$16,808,510</b>	<b>\$22,054,086</b>	<b>\$140,813,193</b>
Operating Expenses	\$18,252,176	\$22,863,965	\$4,577,140	\$16,616,485	\$5,962,284	\$17,791,227	\$12,800,139	\$16,356,542	\$115,219,958
<b>Net Operating Income</b>	<b>\$69,880</b>	<b>\$4,729,593</b>	<b>\$503,392</b>	<b>\$6,265,671</b>	<b>\$1,129,185</b>	<b>\$3,189,599</b>	<b>\$4,008,371</b>	<b>\$5,697,544</b>	<b>\$25,593,235</b>
Non-Operating Revenue	\$0	\$181,269	\$398	\$0	\$0	\$0	\$0	\$0	\$181,667
Non-Operating Expenses	\$0	\$0	\$0	\$0	\$0	\$0	\$326,308	\$4,623,126	\$4,949,434
<b>Net Income / (Loss)</b>	<b>\$69,880</b>	<b>\$4,910,862</b>	<b>\$503,790</b>	<b>\$6,265,671</b>	<b>\$1,129,185</b>	<b>\$3,189,599</b>	<b>\$3,682,063</b>	<b>\$1,074,418</b>	<b>\$20,825,468</b>
<b>Net Margin</b>	<b>0.38%</b>	<b>17.68%</b>	<b>9.92%</b>	<b>27.38%</b>	<b>15.92%</b>	<b>15.20%</b>	<b>21.91%</b>	<b>4.87%</b>	<b>14.77%</b>
<b>Inpatient Days</b>	24,905	41,485	6,341	31,718	8,270	29,387	4,680	36,577	183,363
<b>Admissions</b>	2,691	3,971	509	4,951	755	4,220	2,425	429	19,951
<b>Avg Length Of Stay</b>	9.3	10.4	12.5	6.4	11.0	7.0	1.9	85.3	9.2
<b>Avg Daily Census</b>	68.2	113.7	17.4	86.9	22.7	80.5	12.8	100.2	502.4
<b>Occupancy Percentage</b>	82.21%	70.16%	82.73%	92.45%	75.53%	73.19%	13.50%	86.39%	70.66%
<b>Adjusted Inpatient Days</b>	25,942	46,911	6,341	33,822	8,673	29,967	5,236	38,091	195,559
<b>Adjusted Admissions</b>	2,803	4,490	509	5,279	792	4,303	2,713	447	21,278
<b>Per Adjusted Admission</b>									
Billed Charges + Other Opr Rev	\$14,854	\$14,337	\$18,687	\$9,012	\$18,214	\$12,253	\$12,302	\$85,254	\$14,180
Operating Revenue	\$6,537	\$6,145	\$9,981	\$4,334	\$8,956	\$4,876	\$6,196	\$49,364	\$6,618
Operating Expenses	\$6,512	\$5,092	\$8,992	\$3,147	\$7,530	\$4,134	\$4,718	\$36,611	\$5,415
Net Operating Income	\$25	\$1,053	\$989	\$1,187	\$1,426	\$741	\$1,477	\$12,753	\$1,203
<b>Per Adjusted Inpatient Day</b>									
Billed Charges + Other Opr Rev	\$1,605	\$1,372	\$1,500	\$1,407	\$1,663	\$1,760	\$6,375	\$1,000	\$1,543
Operating Revenue	\$706	\$588	\$801	\$677	\$818	\$700	\$3,210	\$579	\$720
Operating Expenses	\$704	\$487	\$722	\$491	\$687	\$594	\$2,445	\$429	\$589
Net Operating Income	\$3	\$101	\$79	\$185	\$130	\$106	\$766	\$150	\$131

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