

CR Hospital Reference Report

A sample report of Worksheet A - A trial balance of expenses.

Line	Line Description	Col	Column Description	Value	Type
BAPTIST HOSPITAL		MIAMI, FL 33176		10/01/2007	09/30/2008
A00	Wkst A - Reclassification and Adjustment of Trial Balance of Expenses				
00300	New Capital Related Cost - Building & Fixtures	0200	Other	10,498,143.	
00300	New Capital Related Cost - Building & Fixtures	0600	Adjustments	8,046,893.	
00400	New Capital Related Cost - Moveable Equipment	0200	Other	13,831,592.	
00400	New Capital Related Cost - Moveable Equipment	0600	Adjustments	17,579,155.	
00500	Employee Benefits	0100	Salaries	1,062,269.	
00500	Employee Benefits	0200	Other	39,169,007.	
00500	Employee Benefits	0600	Adjustments	14,369,961.	
00600	Administrative and General	0100	Salaries	8,109,757.	
00600	Administrative and General	0200	Other	262,487,533.	
00600	Administrative and General	0600	Adjustments	-161,983,695.	
00800	Plant Operation	0100	Salaries	4,843,599.	
00800	Plant Operation	0200	Other	11,609,614.	
00800	Plant Operation	0600	Adjustments	-118,951.	
01000	Housekeeping	0100	Salaries	5,739,530.	
01000	Housekeeping	0200	Other	1,681,144.	
01100	Dietary	0100	Salaries	3,238,870.	
01100	Dietary	0200	Other	3,594,113.	
01100	Dietary	0600	Adjustments	-294.	
01200	Cafeteria	0100	Salaries	1,820,290.	
01200	Cafeteria	0200	Other	3,453,942.	
01200	Cafeteria	0600	Adjustments	-5,178,544.	
01400	Nursing Administration	0100	Salaries	8,181,641.	
01400	Nursing Administration	0200	Other	4,350,040.	
01500	Central Service and Supply	0200	Other	5,357,530.	
01500	Central Service and Supply	0600	Adjustments	1,702,677.	
01600	Pharmacy	0100	Salaries	7,086,335.	
01600	Pharmacy	0200	Other	27,199,757.	
01600	Pharmacy	0600	Adjustments	-31,597.	
01700	Medical Records and Library	0600	Adjustments	6,614,964.	
01800	Social Services	0100	Salaries	4,837,945.	
01800	Social Services	0200	Other	708,822.	
01800	Social Services	0600	Adjustments	-125,007.	
01900	Other General Service	0100	Salaries	804,609.	CC 01950
01900	Other General Service	0200	Other	80,631.	CC 01950
02500	Adults and Pediatrics - General Routine Care	0100	Salaries	46,317,345.	
02500	Adults and Pediatrics - General Routine Care	0200	Other	8,886,502.	
02600	Intensive Care Unit	0100	Salaries	10,021,447.	
02600	Intensive Care Unit	0200	Other	4,490,786.	
02600	Intensive Care Unit	0600	Adjustments	1,947,535.	
03000	Other Special Care	0100	Salaries	3,048,521.	CC 02060
03000	Other Special Care	0200	Other	352,660.	CC 02060
03100	Subprovider	0100	Salaries	1,976,250.	
03100	Subprovider	0200	Other	232,482.	
03300	Nursery	0100	Salaries	3,834,520.	
03300	Nursery	0200	Other	1,136,765.	
03700	Operating Room	0100	Salaries	2,078,315.	CC 03330

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A00	Wkst A - Reclassification and Adjustment of Trial Balance of Expenses				
03700	Operating Room	0200	Other	1,001,219.	CC 03330
03700	Operating Room	0100	Salaries	11,071,673.	
03700	Operating Room	0200	Other	37,226,637.	
03700	Operating Room	0600	Adjustments	-1,656.	
03800	Recovery Room	0100	Salaries	4,018,209.	
03800	Recovery Room	0200	Other	1,158,375.	
03900	Delivery Room and Labor Room	0100	Salaries	12,941,044.	
03900	Delivery Room and Labor Room	0200	Other	2,705,827.	
03900	Delivery Room and Labor Room	0600	Adjustments	-70,886.	
04000	Anesthesiology	0100	Salaries	367,790.	
04000	Anesthesiology	0200	Other	2,256,335.	
04100	Radiology - Diagnostc	0100	Salaries	10,082,791.	
04100	Radiology - Diagnostc	0200	Other	10,071,886.	
04100	Radiology - Diagnostc	0600	Adjustments	-287,843.	
04200	Radiology - Therapeutic	0100	Salaries	1,977,967.	
04200	Radiology - Therapeutic	0200	Other	3,083,836.	
04200	Radiology - Therapeutic	0600	Adjustments	-242.	
04400	Laboratory	0100	Salaries	8,517,790.	
04400	Laboratory	0200	Other	8,044,292.	
04400	Laboratory	0600	Adjustments	-1,212,039.	
04700	Blood Storing, Processing and Transporation	0100	Salaries	911,111.	
04700	Blood Storing, Processing and Transporation	0200	Other	5,372,135.	
04900	Respiratory Therapy	0100	Salaries	5,461,286.	
04900	Respiratory Therapy	0200	Other	1,414,616.	
05300	Electrocardiology	0100	Salaries	10,707,973.	CC 03120
05300	Electrocardiology	0200	Other	16,635,363.	CC 03120
05300	Electrocardiology	0600	Adjustments	-387,970.	CC 03120
05300	Electrocardiology	0100	Salaries	613,247.	CC 03160
05300	Electrocardiology	0200	Other	72,672.	CC 03160
05300	Electrocardiology	0100	Salaries	1,599,671.	
05300	Electrocardiology	0200	Other	10,718,027.	
05400	Electroencephalography	0100	Salaries	884,939.	
05400	Electroencephalography	0200	Other	187,366.	
05500	Medical Supplies charged to patients	0100	Salaries	199,264.	
05500	Medical Supplies charged to patients	0200	Other	479,032.	
05900	Other Ancillary Cost	0100	Salaries	3,890,703.	CC 03950
05900	Other Ancillary Cost	0200	Other	1,585,855.	CC 03950
05900	Other Ancillary Cost	0600	Adjustments	-32,923.	CC 03950
05900	Other Ancillary Cost	0100	Salaries	1,863,320.	CC 03951
05900	Other Ancillary Cost	0200	Other	376,700.	CC 03951
05900	Other Ancillary Cost	0600	Adjustments	-58,092.	CC 03951
05900	Other Ancillary Cost	0100	Salaries	1,221,208.	CC 03952
05900	Other Ancillary Cost	0200	Other	418,571.	CC 03952
06000	Clinic	0100	Salaries	1,055,554.	CC 06002
06000	Clinic	0200	Other	192,052.	CC 06002
06000	Clinic	0600	Adjustments	-48,040.	CC 06002
06100	Emergency Department	0100	Salaries	24,197,092.	

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Line	Line Description	Col	Column Description	Value	Type
A00	Wkst A - Reclassification and Adjustment of Trial Balance of Expenses				
06100	Emergency Department	0200	Other	9,568,256.	
07000	Intern-Resident Service (Not Approved Program)	0100	Salaries	1,834,009.	
07000	Intern-Resident Service (Not Approved Program)	0200	Other	134,993.	
07000	Intern-Resident Service (Not Approved Program)	0600	Adjustments	-104,384.	
08800	Interest Expense	0200	Other	270,102.	
08800	Interest Expense	0600	Adjustments	-270,102.	
09500	Sub Total (Lines 1-94)	0100	Salaries	216,417,884.	
09500	Sub Total (Lines 1-94)	0200	Other	512,095,210.	
09500	Sub Total (Lines 1-94)	0600	Adjustments	-119,651,080.	
09600	Gift, Flower, Coffee Shops and Canteen	0100	Salaries	243,532.	
09600	Gift, Flower, Coffee Shops and Canteen	0200	Other	859,317.	
10100	Worksheet A Total (Line 95-100)	0100	Salaries	216,661,416.	
10100	Worksheet A Total (Line 95-100)	0200	Other	512,954,527.	
10100	Worksheet A Total (Line 95-100)	0600	Adjustments	-119,651,080.	
A70	Wkst A-7 Analysis of Changes During Cost Reporting Period in Capital Asset Balances				
2	Part 2 Analysis of Changes in New Capital Asset Balances				
00100	Land	0100	Beginning Balance	20,952,567.	
00100	Land	0200	Purchases	11,581,083.	
00200	Land Improvements	0100	Beginning Balance	5,011,382.	
00200	Land Improvements	0200	Purchases	50,902.	
00200	Land Improvements	0500	Disposals/Retirements	352,074.	
00300	Buildings and Fixtures	0100	Beginning Balance	138,293,480.	
00300	Buildings and Fixtures	0200	Purchases	91,468.	
00300	Buildings and Fixtures	0500	Disposals/Retirements	1,222,017.	
00400	Building Improvements	0100	Beginning Balance	90,022,585.	
00400	Building Improvements	0200	Purchases	3,525,519.	
00400	Building Improvements	0500	Disposals/Retirements	3,517,606.	
00500	Fixed Equipment	0100	Beginning Balance	38,260,814.	
00500	Fixed Equipment	0200	Purchases	2,512,464.	
00500	Fixed Equipment	0500	Disposals/Retirements	3,897,727.	
00600	Movable Equipment	0100	Beginning Balance	132,788,662.	
00600	Movable Equipment	0200	Purchases	10,352,973.	
00600	Movable Equipment	0500	Disposals/Retirements	35,869,022.	
00700	Sub Total	0100	Beginning Balance	425,329,490.	
00700	Sub Total	0200	Purchases	28,114,409.	
00700	Sub Total	0500	Disposals/Retirements	44,858,446.	
00900	Worksheet A-7 Part 2 Total	0100	Beginning Balance	425,329,490.	
00900	Worksheet A-7 Part 2 Total	0200	Purchases	28,114,409.	
00900	Worksheet A-7 Part 2 Total	0500	Disposals/Retirements	44,858,446.	
3	Part 3 Reconciliation of Capital Cost Centers				
00300	New Capital Related Cost - Building & Fixtures	0100	Gross Assets	268,779,190.	
00300	New Capital Related Cost - Building & Fixtures	0300	Total Assets	268,779,190.	
00300	New Capital Related Cost - Building & Fixtures	0900	Depreciation	18,535,040.	
00300	New Capital Related Cost - Building & Fixtures	1500	Total Asset Cost	18,535,040.	
00400	New Capital Related Cost - Moveable Equipment	0100	Gross Assets	107,272,614.	
00400	New Capital Related Cost - Moveable Equipment	0300	Total Assets	107,272,614.	
00400	New Capital Related Cost - Moveable Equipment	0900	Depreciation	31,163,668.	

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Line	Line Description	Col	Column Description	Value	Type
A70	Wkst A-7 Analysis of Changes During Cost Reporting Period in Capital Asset Balances				
3	Part 3 Reconciliation of Capital Cost Centers				
00400	New Capital Related Cost - Moveable Equipment	1500	Total Asset Cost	31,163,668.	
00500	Worksheet A-7 Part 3 Total (Sum Line 1-4)	0100	Gross Assets	376,051,804.	
00500	Worksheet A-7 Part 3 Total (Sum Line 1-4)	0300	Total Assets	376,051,804.	
00500	Worksheet A-7 Part 3 Total (Sum Line 1-4)	0900	Depreciation	49,698,708.	
00500	Worksheet A-7 Part 3 Total (Sum Line 1-4)	1500	Total Asset Cost	49,698,708.	
4	Part 4 Reconciliation of Amounts From Worksheet A, Column 2, Lines 1 to 4				
00300	New Capital Related Cost - Building & Fixtures	0900	Depreciation	10,498,143.	
00300	New Capital Related Cost - Building & Fixtures	1500	Total Asset Cost	10,498,143.	
00400	New Capital Related Cost - Moveable Equipment	0900	Depreciation	13,831,592.	
00400	New Capital Related Cost - Moveable Equipment	1500	Total Asset Cost	13,831,592.	
00500	Worksheet A-7 Part 4 Total (Sum Line 1-4)	0900	Depreciation	24,329,735.	
00500	Worksheet A-7 Part 4 Total (Sum Line 1-4)	1500	Total Asset Cost	24,329,735.	
A80	Wkst A-8 Adjustment to Expenses				
01200	Provider Based Physician Adjustment (Wkst A-8-2)	0200	Amount	-1,451,335.	
01400	Related Organization Transactions (Wkst A-8-1)	0200	Amount	-10,233,783.	
01600	Cafeteria - Employees and Guests	0200	Amount	-5,178,544.	
01800	Sale of medical and surgical supplies to other than patients	0200	Amount	-31,980.	
01900	Sale of Drugs to other than patients	0200	Amount	-31,597.	
03700	Other Adjustments - description not available	0200	Amount	-40,000.	
03702	Other Adjustments - description not available	0200	Amount	-48,714.	
03705	Other Adjustments - description not available	0200	Amount	-3,725.	
03801	Other Adjustments - description not available	0200	Amount	-782,313.	
03803	Other Adjustments - description not available	0200	Amount	-139,567.	
03805	Other Adjustments - description not available	0200	Amount	-98,831,938.	
03806	Other Adjustments - description not available	0200	Amount	288,885.	
03807	Other Adjustments - description not available	0200	Amount	-65,839.	
03809	Other Adjustments - description not available	0200	Amount	-167,700.	
03810	Other Adjustments - description not available	0200	Amount	-89,631.	
03811	Other Adjustments - description not available	0200	Amount	-23,332.	
03812	Other Adjustments - description not available	0200	Amount	-53,834.	
03813	Other Adjustments - description not available	0200	Amount	-19,494.	
03814	Other Adjustments - description not available	0200	Amount	-94.	
03815	Other Adjustments - description not available	0200	Amount	-120,617.	
03816	Other Adjustments - description not available	0200	Amount	-1,656.	
03817	Other Adjustments - description not available	0200	Amount	-8,505.	
03820	Other Adjustments - description not available	0200	Amount	-339,340.	
03824	Other Adjustments - description not available	0200	Amount	-49,699.	
03825	Other Adjustments - description not available	0200	Amount	-225,041.	
03832	Other Adjustments - description not available	0200	Amount	-104,384.	
03833	Other Adjustments - description not available	0200	Amount	-18,003.	
03835	Other Adjustments - description not available	0200	Amount	-69,252.	
03838	Other Adjustments - description not available	0200	Amount	-200.	
03840	Other Adjustments - description not available	0200	Amount	-3,975.	
03852	Other Adjustments - description not available	0200	Amount	-5,165.	
03853	Other Adjustments - description not available	0200	Amount	-23,927.	

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Line	Line Description	Col	Column Description	Value	Type
A80	Wkst A-8 Adjustment to Expenses				
03854	Other Adjustments - description not available	0200	Amount	-41,794.	
03855	Other Adjustments - description not available	0200	Amount	-5,828.	
03856	Other Adjustments - description not available	0200	Amount	-242.	
03858	Other Adjustments - description not available	0200	Amount	-1,204,535.	
03863	Other Adjustments - description not available	0200	Amount	-9,856.	
03864	Other Adjustments - description not available	0200	Amount	-23,067.	
03870	Other Adjustments - description not available	0200	Amount	-16,379.	
03871	Other Adjustments - description not available	0200	Amount	-9,034.	
03872	Other Adjustments - description not available	0200	Amount	-32,679.	
03879	Other Adjustments - description not available	0200	Amount	-49,973.	
03880	Other Adjustments - description not available	0200	Amount	-315,004.	
03881	Other Adjustments - description not available	0200	Amount	-20,350.	
03883	Other Adjustments - description not available	0200	Amount	-48,040.	
05000	Worksheet A-8 Total	0200	Amount	-119,651,080.	
A81	Wkst A-8-1 Statement of Cost of Services from Related Organizations				
A	Part A Costs incurred and adjustments required as a result of transactions with related Organization				
00100	Cost Center 1	0100	Line No		
00100	PROPERTY INSURANCE	0300	Expense Items		
00100	Cost Center 1	0400	Allowable Cost		
00100	Cost Center 1	0600	Net Adjustments		
00100	Cost Center 1	0700	Worksheet A-7 Ref.		
00200	Cost Center 2	0100	Line No		
00200	DIRECT ALLOC H.O. DEPREC	0300	Expense Items		
00200	Cost Center 2	0400	Allowable Cost		
00200	Cost Center 2	0600	Net Adjustments		
00200	Cost Center 2	0700	Worksheet A-7 Ref.		
00300	Cost Center 3	0100	Line No		
00300	PROPERTY INSURANCE	0300	Expense Items		
00300	Cost Center 3	0400	Allowable Cost		
00300	Cost Center 3	0600	Net Adjustments		
00300	Cost Center 3	0700	Worksheet A-7 Ref.		
00400	Cost Center 4	0100	Line No		
00400	DIRECT ALLOC H.O. DEPREC	0300	Expense Items		
00400	Cost Center 4	0400	Allowable Cost		
00400	Cost Center 4	0600	Net Adjustments		
00400	Cost Center 4	0700	Worksheet A-7 Ref.		
00402	Cost Center 4	0100	Line No		
00402	HUMAN RESOURCE DEPT	0300	Expense Items		
00402	Cost Center 4	0400	Allowable Cost		
00402	Cost Center 4	0600	Net Adjustments		
00403	Cost Center 4	0100	Line No		
00403	EMPLOYEE HLTH SERV	0300	Expense Items		
00403	Cost Center 4	0400	Allowable Cost		
00403	Cost Center 4	0600	Net Adjustments		
00404	Cost Center 4	0100	Line No		
00404	PRE-EMPLOYMENT	0300	Expense Items		

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Line	Line Description	Col	Column Description	Value	Type
A81	Wkst A-8-1 Statement of Cost of Services from Related Organizations				
A	Part A Costs incurred and adjustments required as a result of transactions with related Organization				
00404	Cost Center 4	0400	Allowable Cost		
00404	Cost Center 4	0600	Net Adjustments		
00405	Cost Center 4	0100	Line No		
00405	EXCESS WORKERS COMP	0300	Expense Items		
00405	Cost Center 4	0400	Allowable Cost		
00405	Cost Center 4	0600	Net Adjustments		
00406	Cost Center 4	0100	Line No		
00406	VARIOUS EMPLOYEE DEPTS	0300	Expense Items		
00406	Cost Center 4	0400	Allowable Cost		
00406	Cost Center 4	0600	Net Adjustments		
00409	Cost Center 4	0100	Line No		
00409	MALPRACTICE INSURANCE	0300	Expense Items		
00409	Cost Center 4	0400	Allowable Cost		
00409	Cost Center 4	0600	Net Adjustments		
00410	Cost Center 4	0100	Line No		
00410	OTHER INSURANCE	0300	Expense Items		
00410	Cost Center 4	0400	Allowable Cost		
00410	Cost Center 4	0600	Net Adjustments		
00411	Cost Center 4	0100	Line No		
00411	POOLED CAP - W/S B PT III	0300	Expense Items		
00411	Cost Center 4	0400	Allowable Cost		
00411	Cost Center 4	0600	Net Adjustments		
00412	POOLED OPER INTEREST ALLO	0300	Expense Items		
00413	Cost Center 4	0100	Line No		
00413	A&G DEPT EXPENSE ALLOC	0300	Expense Items		
00413	Cost Center 4	0400	Allowable Cost		
00413	Cost Center 4	0500	Amount Wkst A		
00413	Cost Center 4	0600	Net Adjustments		
00414	Cost Center 4	0100	Line No		
00414	BHSF CORP OVERHEAD	0300	Expense Items		
00414	Cost Center 4	0400	Allowable Cost		
00414	Cost Center 4	0500	Amount Wkst A		
00414	Cost Center 4	0600	Net Adjustments		
00416	Cost Center 4	0100	Line No		
00416	MATERIAL MANAGE ALLOC	0300	Expense Items		
00416	Cost Center 4	0400	Allowable Cost		
00416	Cost Center 4	0600	Net Adjustments		
00418	Cost Center 4	0100	Line No		
00418	HEALTH INFO MANAGE ALLOC	0300	Expense Items		
00418	Cost Center 4	0400	Allowable Cost		
00418	Cost Center 4	0600	Net Adjustments		
00420	Cost Center 4	0100	Line No		
00420	EICU MONITORING	0300	Expense Items		
00420	Cost Center 4	0400	Allowable Cost		
00420	Cost Center 4	0600	Net Adjustments		
00421	Cost Center 4	0100	Line No		

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Line	Line Description	Col	Column Description	Value	Type
A81	Wkst A-8-1 Statement of Cost of Services from Related Organizations				
A	Part A Costs incurred and adjustments required as a result of transactions with related Organization				
00421	EICU MALPRACTICE	0300	Expense Items		
00421	Cost Center 4	0400	Allowable Cost		
00421	Cost Center 4	0600	Net Adjustments		
00422	Cost Center 4	0100	Line No		
00422	BUILDNG CAPITAL INTEREST	0300	Expense Items		
00422	Cost Center 4	0400	Allowable Cost		
00422	Cost Center 4	0600	Net Adjustments		
00422	Cost Center 4	0700	Worksheet A-7 Ref.		
00423	Cost Center 4	0100	Line No		
00423	EQUIP CAPITAL INTEREST	0300	Expense Items		
00423	Cost Center 4	0400	Allowable Cost		
00423	Cost Center 4	0600	Net Adjustments		
00423	Cost Center 4	0700	Worksheet A-7 Ref.		
00425	Cost Center 4	0100	Line No		
00425	COMBINED SERVICE LAUNDRY	0300	Expense Items		
00425	Cost Center 4	0400	Allowable Cost		
00425	Cost Center 4	0500	Amount Wkst A		
00426	Cost Center 4	0100	Line No		
00426	BOC - MRI RELATED EXP	0300	Expense Items		
00426	Cost Center 4	0400	Allowable Cost		
00426	Cost Center 4	0500	Amount Wkst A		
00429	Cost Center 4	0100	Line No		
00429	BHE PROPERTY RENTALS	0300	Expense Items		
00429	Cost Center 4	0400	Allowable Cost		
00429	Cost Center 4	0500	Amount Wkst A		
00430	Cost Center 4	0100	Line No		
00430	BHE PROPERTY RENTALS	0300	Expense Items		
00430	Cost Center 4	0400	Allowable Cost		
00430	Cost Center 4	0500	Amount Wkst A		
00431	Cost Center 4	0100	Line No		
00431	BHE PROPERTY RENTALS	0300	Expense Items		
00431	Cost Center 4	0400	Allowable Cost		
00431	Cost Center 4	0500	Amount Wkst A		
00432	Cost Center 4	0100	Line No		
00432	BHE PROPERTY RENTALS	0300	Expense Items		
00432	Cost Center 4	0400	Allowable Cost		
00432	Cost Center 4	0500	Amount Wkst A		
00433	Cost Center 4	0100	Line No		
00433	BHE PROPERTY RENTALS	0300	Expense Items		
00433	Cost Center 4	0400	Allowable Cost		
00433	Cost Center 4	0500	Amount Wkst A		
00435	Cost Center 4	0100	Line No		
00435	RELATED PARTY	0300	Expense Items		
00435	Cost Center 4	0500	Amount Wkst A		
00435	Cost Center 4	0600	Net Adjustments		
00435	Cost Center 4	0700	Worksheet A-7 Ref.		

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Line	Line Description	Col	Column Description	Value	Type
A81	Wkst A-8-1 Statement of Cost of Services from Related Organizations				
A	Part A Costs incurred and adjustments required as a result of transactions with related Organization				
00500	Worksheet A-8-1 Part A Total (sum lines 1-4) Transfer to Worksheet A-8 Col 2 Line 14	0400	Allowable Cost	141,583,720.	
00500	Worksheet A-8-1 Part A Total (sum lines 1-4) Transfer to Worksheet A-8 Col 2 Line 14	0500	Amount Wkst A	151,817,503.	
00500	Worksheet A-8-1 Part A Total (sum lines 1-4) Transfer to Worksheet A-8 Col 2 Line 14	0600	Net Adjustments	-10,233,783.	
B	Part B Interrelationship to related organizations and/or home office				
00100	B	0100	Line No		Symbol
00100	BAPTIST HEALTH SOUTH FLOR	0400	Name		Symbol
00100	Cost Center 1	0500	Percent of Ownership		Symbol
00100	HOME OFFICE	0600	Type of Business		Symbol
00200	B	0100	Line No		
00200	Cost Center 2	0500	Percent of Ownership		Percent
00300	B	0100	Line No		
00300	Cost Center 3	0500	Percent of Ownership		Percent
00400	B	0100	Line No		
00400	Cost Center 4	0500	Percent of Ownership		Percent
00502	B	0100	Line No		
00502	Cost Center 5	0500	Percent of Ownership		Percent
00503	B	0100	Line No		
00503	Cost Center 5	0500	Percent of Ownership		Percent
00504	B	0100	Line No		
00504	Cost Center 5	0500	Percent of Ownership		Percent
00505	B	0100	Line No		
00505	Cost Center 5	0500	Percent of Ownership		Percent
00506	B	0100	Line No		
00506	Cost Center 5	0500	Percent of Ownership		Percent
00507	B	0100	Line No		
00507	Cost Center 5	0500	Percent of Ownership		Percent
00509	B	0100	Line No		
00509	Cost Center 5	0500	Percent of Ownership		Percent
00510	B	0100	Line No		
00510	Cost Center 5	0500	Percent of Ownership		Percent
00511	B	0100	Line No		
00511	Cost Center 5	0500	Percent of Ownership		Percent
00512	B	0100	Line No		
00512	Cost Center 5	0500	Percent of Ownership		Percent
00513	B	0100	Line No		
00513	Cost Center 5	0500	Percent of Ownership		Percent
00514	B	0100	Line No		
00514	Cost Center 5	0500	Percent of Ownership		Percent
00516	B	0100	Line No		
00516	Cost Center 5	0500	Percent of Ownership		Percent
00518	B	0100	Line No		
00518	Cost Center 5	0500	Percent of Ownership		Percent
00520	B	0100	Line No		
00520	Cost Center 5	0500	Percent of Ownership		Percent

CR Hospital Reference Report

A sample report of Worksheet A - A trial balance of expenses.

Line	Line Description	Col	Column Description	Value	Type
A81	Wkst A-8-1 Statement of Cost of Services from Related Organizations				
B	Part B Interrelationship to related organizations and/or home office				
00522	B	0100	Line No		
00522	Cost Center 5	0500	Percent of Ownership		Percent
00523	B	0100	Line No		
00523	Cost Center 5	0500	Percent of Ownership		Percent
00525	C	0100	Line No		
00525	COMBINED SERVICES	0200	Name		
00525	Cost Center 5	0300	Percent of Ownership		Percent
00525	LAUNDRY SERVICES CO-OP	0600	Type of Business		
00526	B	0100	Line No		
00526	BAPTIST OUTPATIENT CENTER	0400	Name		
00526	Cost Center 5	0500	Percent of Ownership		Percent
00526	MRI MANAGEMENT	0600	Type of Business		
00528	B	0100	Line No		
00528	BAPTIST HLTH ENTERPRISES	0400	Name		
00528	Cost Center 5	0500	Percent of Ownership		Percent
00528	BLDG RENTAL & MAINT	0600	Type of Business		
00529	B	0100	Line No		
00529	Cost Center 5	0500	Percent of Ownership		Percent
00530	B	0100	Line No		
00530	Cost Center 5	0500	Percent of Ownership		Percent
00531	B	0100	Line No		
00531	Cost Center 5	0500	Percent of Ownership		Percent
00532	B	0100	Line No		
00532	Cost Center 5	0500	Percent of Ownership		Percent
00533	B	0100	Line No		
00533	Cost Center 5	0500	Percent of Ownership		Percent
00534	B	0100	Line No		
00534	Cost Center 5	0500	Percent of Ownership		Percent
A82	Wkst A-8-2 Provider-Based Physician Adjustments				
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	0300	Total Remuneration	1,742,237.	
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	0400	Professional Amount	1,290,923.	
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	0500	Provider Amount	451,314.	
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	0700	Physician Hours	3,410.	Hours
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	0800	Unadj RCE Limit	290,902.	Limit
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	1600	Adjusted RCE Limit	290,902.	
10100	Worksheet A-8-2 Total (Sum of Lines 1 to 11)	1700	Limit Disallowance	160,412.	