

**Table: County of Santa Cruz Health Services Agency
Uncompensated Care Worksheet: 7% Calculation Method**

Entity: Dominican Hospital

HCAI I.D.#: 106440755

2022 Fiscal Year: 7/01/2021 to 6/30/2022

Part I.: Medical Costs - Audited by HCAI

A. Cost To Charges Ratio: Section 8(1) - page 30

1. Operating Expenses (Line 200)	\$	463,996,351
2. Gross Revenues (Line 30)	\$	2,380,587,893
3. Cost to Charges Ratio (CCR) = A.1. / A.2.		19.49%

B. Uncompensated Care Commitment:

1. Operating Expenses (Page 30, Line 200 - same as above)	\$	463,996,351
2. Less: Govt. Payors Gross Charges [Section 12(7)-12(9) page 49-53]		
a. Medicare Traditional: Line 415, Col. 1+2 - page 49	\$	1,050,326,180
b. Medicare Managed: Line 415, Col 3+4 - page 49	\$	260,380,078
c. Medi-Cal Traditional : Line 415, Col. 5+6 - page 51	\$	70,168,177
d. Medi-Cal Managed: Line 415, Col. 7+8 - page 51	\$	455,872,403
e. County Traditional: Medi-Cruz (Line 415, Col. 9+10) - page	\$	-
f. County Managed (Line 415, Col. 11+12) - page 53	\$	-
3. Total B.2.	\$	1,836,746,838
4. Cost of Government Programs = B.3.*A.3.	\$	357,997,213
5. Net Operating Expense = B.1. - B.4.	\$	105,999,138
6. Threshold Factor Percentage - Uncompensated care 7% Method		7.00%
7. Required Care = B.5 * B.6	\$	7,419,940

C. Uncompensated Care Provided: Section 8(2) - page 31

1. Charity (Line 355)	\$	20,334,808
2. Bad Debts (Line 300)	\$	5,109,345
3. Total Charges = C.1. + C.2.	\$	25,444,153
4. Provided Care = A.3 * C.3	\$	4,959,277

D. Excess or (Deficit) Care = C.4 - B.7	Deficit:	\$	(2,460,663)
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Part II.: Cash & In-Kind Services

Qualifying Expenses Provided for Deficit Correction - Approved by HSA

E. Hospital's list (See Attached for details)

a. Cash Contributions to tax-exempt organizations:	\$	1,172,327
Cash contributions to non-profit healthcare organizations directly supporting low-income indigent populations.		
b. Physician Recruitment	\$	104,746
Relocation costs for medical specialists providing care to indigent patients.		
c. Other community benefit programs	\$	7,757,872
Mobile Wellness Clinic		
d. Emergency Room Department	\$	4,235,264
Losses or significant expenses for operating an Emergency Room.		

Total Provided Deficit Correction (E.) :	= \$	13,270,209
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F. Excess Care:	\$	10,809,546
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