Mission Health Community Benefit Activities		Estimated	nity Benefit and 340b Savings From Form 990										
		FY 2017		*FY 2016		*FY 2015	FI	*FY 2014		*FY 2013		*FY 2012	
Charity Care (at Cost)	\$	42,498,415	\$	29,750,529	\$		\$	40,139,588	\$	26,813,895	\$	21,895,452	
Unreimbursed Medicaid	ð	42,490,415	\$	5,741,221	_	(6,170,764)		(10,480,943)	_	(19,128,851)	_	(7,868,431	
Unreimbursed medicald Unreimbursed costs (other means tested government programs)			\$	5,741,221	_	,	\$	7,187	\$	(19,120,031)	\$	(7,000,431	
Charity Care Patients	+		Ψ	25.352	Ψ	21,710	P	17,462	φ	10,131	φ	7,882	
# Charity Care Claims	-			68.764		52.790		42,105		22,571		17,286	
Community Health Improvement Programs & Services	-		\$	17,064,874	4	. ,	\$	12,046,512	\$	10,936,554	\$	8,853,316	
Health Professions Education			\$	2,820,332	_		\$	2,764,242	\$	3,119,558	\$	2,708,503	
Subsidized Health Services			\$	48,384,369	_		_	46,789,957	\$	44,099,252	\$	28,000,280	
Research			\$	1,991,197	_	, ,		1,449,597	\$	1,783,655	\$	1,652,313	
Cash and In-kind Contributions	-		\$	7,418,685		5,884,532			\$		_	4,048,301	
TOTAL Mission Health Community Benefit Activities per 990			\$	113,176,724		95,062,831		97,060,919	\$	71,381,568		59,289,734	
Unreimbursed Medicare per Audit			\$	64,323,000	_	55,832,000	_	44,504,000	_	60,033,000	\$	39,339,000	
Other Estimated Community Benefits per Audit*			\$	5,926,276	-	(2,013,831)	_	10,833,081	_	12,139,432	_	14,272,266	
TOTAL Mission Health Community Benefit Activities per AFS*	•		\$	183,426,000	\$	148,881,000	\$	152,398,000	\$	143,554,000	\$	112,901,000	
Cost of Treating Bad Debt Patients	\$	37,730,278		39,679,272	Ė	36,983,206	_	33,143,490	_	36,159,388	_	31,487,323	
Total Uncompensated Care (Charity + Bad Debt, A+D)	\$	80,228,693	\$	69,429,801	\$	64,946,921	\$	73,283,078	\$	62,973,283	\$	53,382,775	
Average Charity Care FY13-FY17	\$	33,433,228	1										
Average Uncompensated Care FY13-FY17	\$	70,172,355											
			•										
Mission Health 340B Value		Estimated FY 2017		FY 2016		FY 2015		FY 2014		FY 2013		FY 2012	
Angel Medical Center	\$	1,508,789	\$	616,670	\$	577,926	\$	677,790	\$	172,435	\$	-	
Blue Ridge	\$	230,234	\$	272,710	\$	388,420	\$	981,228	\$	513,651	\$	-	
Highland-Cashiers	\$	227,505	\$	120,897	\$	270,535	\$	147,015	\$	-	\$	-	
McDowell	\$	2,169,798	\$	1,613,072	\$	736,712	\$	837,572	\$	814,498	\$	96,892	
Mission	\$	26,490,110	\$	28,099,335	\$	24,246,755	\$	20,860,377	\$	13,483,493	\$	2,735,834	
Transylvania Regional	\$	684,568	\$	523,756	\$	467,016	\$	240,278	\$	385,907	\$	286,657	
	_										-		
TOTAL Hospital Savings	\$	31,311,004	\$	31,246,440	\$	26,416,829	\$	23,597,245	\$	15,369,984	\$	3,119,383	
TOTAL Hospital Savings WAC Penalty (WAC Purchases at DSH Hospitals vs. GPO Pricing)	\$	31,311,004 (594,799)	_	31,246,440 (628,674)	-	26,416,829 (614,476)	•	23,597,245 (441,872)	•	15,369,984 (173,735)	\$	3,119,383	

TOTAL 340B Value to Mission Health	\$	38,330,891	\$	37,440,073	\$ 35,350,752	\$ 31,420,708	\$ 18,014,353	\$ 3,119,383
Average 340B Value FY13-FY17	\$	32,111,355	1					
-			1					
		stimated FY 2017		FY 2016	FY 2015	FY 2014	FY 2013	FY 2012
Total Community Benefit % per 990		n/a		8.0%	7.3%	7.9%	6.4%	6.6%
Total Community Benefit % per AFS		n/a		13.0%	11.5%	12.5%	12.8%	12.6%
Total Charity Care %		2.9%		2.1%	2.2%	3.3%	2.4%	2.4%
Total Uncompensated (Bad Debt + Charity) Care %		5.4%		4.9%	5.0%	6.0%	5.6%	5.9%
				•	•		•	•
Total Expenses from Form 990	\$ 1	1,486,122,780	\$	1,407,313,239	\$ 1,294,614,696	\$ 1,223,102,948	\$ 1,118,845,790	\$ 898,795,318

6,822,307 \$

9,548,399 \$

8,265,335 \$

2,818,104 \$

7,614,686 \$

*The footnote related to community benefits for the audited financial statements is prepared after Mission's year end of September 30. The initial cost reports for Medicare and Medicaid are prepared in the spring following the audit and filed at that time. Because of this timing difference, as well as others, there are changes in estimates related to community benefits. These changes in estimates flow through the current year presentation of the financials. From FY 14 through the present, Mission has not restated the estimated community benefits related to the comparative year presented in the Service to the Community footnote for the Audited Financials. The methodology for disclosing community benefits for the Audited Financial Statements is based on the ANDI reported which is used by the NCHA.

Data source for 340b value is GPO less WAC savings report from wholesaler, coupled with 340b vendor reports on value of contract pharmacy operations.

Contract Pharmacy Value

2012 data was first year of 340b vendor utilization, and reflects partial year data. Correspondingly, computed averages over the period reflect FY13-FY17.