Erie County Medical Center Corporation

2026 Operating and Capital Budgets
September 30, 2025

Table of Contents

Management Discussion and Analysis

September 30, 2025

The year ending December 31, 2025 has been a challenging year operationally for ECMCC. Increases in both alternative level of care patients and observation patients have resulted in a decrease in inpatient admissions which when coupled with significant benefit inflation and increased staff to meet NYS minimum staffing requirements, has driven operating losses to levels below the prior year. The 2026 Budget again reflects similar trends and thus has been developed to capture certain growth opportunities along with a focused effort to control expenses. This budget seeks to further the ECMCC Strategic Plan with a focus on short-term improvements strengthening the core business, continuing to provide access to care in our surrounding community and investing in the workforce to meet certain staffing requirements resulting in financial and operational improvement. ECMCC's goals will continue to be measured through the achievement of the ECMCC mission: improving clinical quality, service excellence, and the continued provision of health services to the communities ECMCC serves with compassion.

Management Discussion and Analysis

The industry is generally seeing slowed financial and operational recovery, while also experiencing many of the similar financial and operational challenges both locally and nationally. ECMCC has recognized that growth, improved efficiency, and structural reimbursement changes are needed to properly provide for a pathway to sustainability. Despite the significant operating and admission challenges seen in the local community care settings ECMCC's 2026 goal is to improve operating results through efficiency, targeted revenue improvements, programmatic changes without impacting the critical services we provide and maintaining our exceptional quality outcomes. This will also be completed while simultaneously implementing the EPIC electronic health record. The proposed 2026 operating budget reflects an operating loss of $35 million, approximately 55% of what the 2025 loss is projected to be. This loss is inclusive of significant additional actuarial benefit costs, EPIC implementation costs and inflationary increases. The proposed budget has been developed with the following goals in mind:

Budget Goals

- ✓ Maintain the highest quality of care provided
- ✓ Maintain critical services provided to the community
- ✓ Continue to manage the patient length of stay and experience, while addressing community admission challenges
- ✓ Maintain select capital and equipment upgrades and implement EPIC
- ✓ Maximize retention of staff, improve staffing efficiency and meet NYS minimum standards

Management Discussion and Analysis

Budgetary assumptions are a key component of the process that was followed in developing the Budget. The following summarizes Management's perspective in the development of these assumptions

Activity Levels

The Budget has been prepared using the actual volume seen during 2025 as a baseline. Further consideration was given to the changes internally related to recent trends in volume and activity, an improvement in the ability to discharge patients and ultimately a slightly reduced length of stay, the shift of inpatient cases into the outpatient setting as a result of changing regulations and payer payment policies, growth of various service lines, new physician recruitment, as well as other factors. Management believes that with an appropriate level of commitment by current and new physicians, the levels of activity contained within the Budget are achievable

Management Discussion and Analysis

Revenue and Reimbursement

Projected claim reimbursement from government payers is based on current and proposed regulations where Management has evaluated as probable. Reimbursement from commercial payers is based on current contracts or at rates that Management has evaluated as probable for contracts currently being negotiated. Increases in net revenue associated with revenue cycle improvement initiatives related to contract underpayments and payer denial management have also been incorporated at levels that Management believes are attainable. It is important to note that no significant Medicaid eligibility related changes within the latest Federal bill (H.R.1.) have been incorporated into the plan for 2026 due to the timing of implementation of the new requirements and the lack of clarity around how New York State will plan for their funding changes.

Other operating revenue has been budgeted based on historical experience while taking into account the impact of anticipated growth and improved efficiency in the operation of ECMCC's Specialty Pharmacy services provided to our patients.

Disproportionate share and upper payment limit payments have been budgeted based on the most current information available to Management.

Management Discussion and Analysis

Operating Expenses

Projected operating expenses are budgeted based on the volume of anticipated activity, along with adjustments for salary rate increases consistent with current collective bargaining agreements, estimated benefit costs as adjusted for actuarially projected gains or losses, supply and other expense inflation rates as well as impacts of performance improvement initiatives. Management believes that the overall growth in expenses of approximately 4.4% contained in the budget are reasonable given the increases in actuarially driven benefit costs, volume related supply costs, EPIC implementation costs, and additional depreciation due to the EPIC project partially offset by salary and other expense reduction initiatives.

Non-Operating Revenue

Non-Operating Revenues have been budgeted consistently with the recent historical trends related to investment income. The reduction is the result of an anticipated utilization of available investments in 2026 for the EPIC project and an assumption that interest rates will decline from 2025 levels. Although ECMCC expects to continue to work closely with NYS on future funding needs for 2026 through both the Vital Access Provider Assurance grant program and other NYS grant programs, Management has elected <u>not</u> to include any additional Federal or New York State operational support for planning purposes in the 2026 operating budget.

Management Discussion and Analysis

Cash Flows

2026 cash flow will remain a key focus of Management given the challenges. Cash flows have been budgeted based on the results of operations, investments in routine and non-routine capital assets, principal payments on long-term debt, continued investments in our clinically integrated network and the required funding of employee benefit plans. In an effort to maintain providing as many critical services as possible, despite the significant program and administrative cost management and FTE management, the budget reflects losses which still may result in a need for future operational and capital cash flow support from governmental agency partners including New York State.

Range of Outcomes and Contingency Plans

Management has considered the sensitivity of each material assumption within the Budget. Management believes that the Budget is reasonably positioned within the range of potential outcomes and recognizes its responsibility for achieving these results. Given the uncertainty of certain material assumptions related to uncertain inflationary pressures, community post-acute capacity, staffing efficiency plan implementation risks, emergent capital or technology needs, future governmental reimbursement and benefit cost fluctuations, Management acknowledges that it may have to adjust operationally during 2026.

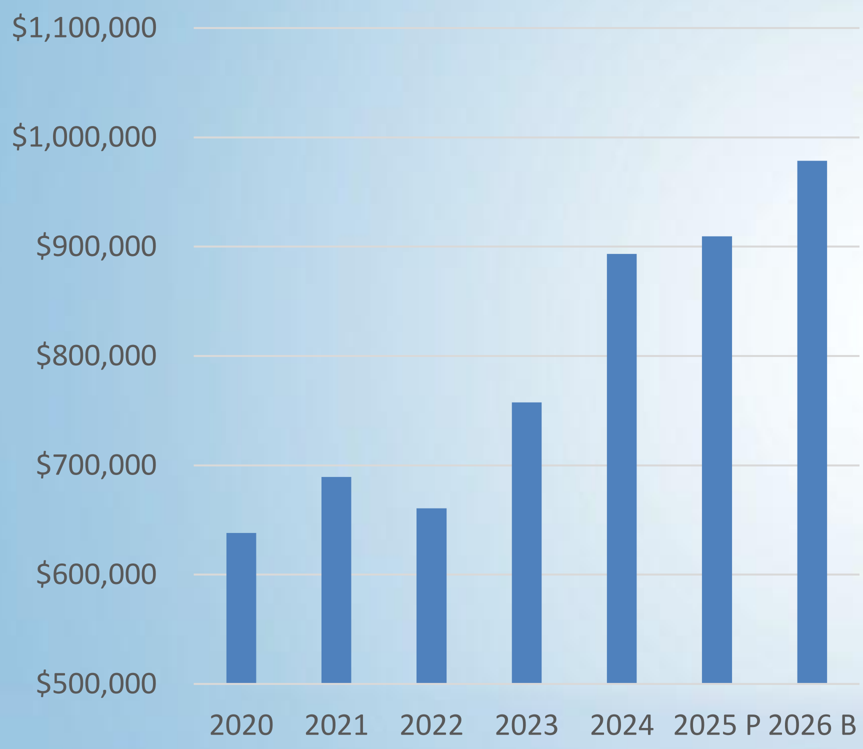
Regulatory Budget Reporting Requirements

- All requirements have been met
  - NYCRR, Part 203, Chapter V, Title 2
  - This package communicates each of the 18 requirements
- New York State Office Of The State Comptroller
- Authority Budget Office
- PARIS submission and certification

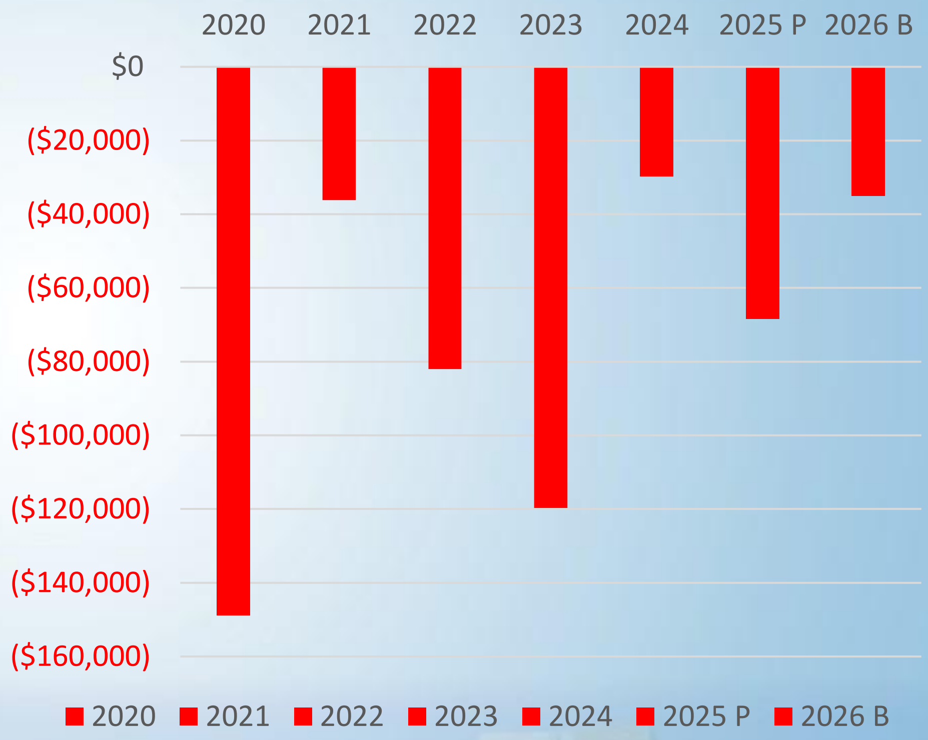
Budget Process

- Executive Leadership Team (ELT) adopt budget schedule and goals
- Using 2025 year-to-date performance and known or anticipated budget variances, a baseline budget and financial projections were prepared
- Department managers worked with ELT to develop departmental targets and performance improvement initiatives
- ELT budget recommendation reviewed and approved by Finance Committee of ECMCC Board
- Budget recommendation reviewed and approved by ECMCC Board

Revenue



Operating Margin



Footnotes:

- 2026 Budgeted margin includes an $12M increase in actuarial post retirement obligations
- For comparability purposes in this chart, operating margins exclude all investment gains, CARES/ARP/PPP/FEMA and NYS VAPAP grants

Key Financial Ratios

	2023	2024	Projected 2025	Budget 2026
Operating Margin %	-14.2%	-2.0%	-6.9%	-3.6%
Operating EBITDA %	-6.0%	4.6%	-0.7%	2.8%
FTE's	3,684	3,752	3,900	3,700
Days Operating Cash On Hand	14.0	32.8	9.7	9.1
Debt Service Coverage	2.2	1.7	(0.8)	0.1
Salaries, Wages & Benefits % of Revenue	76.2%	76.2%	72.6%	68.2%
Supply Expense % of Revenue	21.9%	23.3%	23.5%	23.8%
Benefit % of Salaries and Wages	35.7%	36.3%	32.5%	37.1%
Days In Accounts Receivable, net	66.0	52.3	52.1	49.0

Statements of Revenues and Expenses

(Thousands)

	2024 Audited	2025 Projection	2026 Budget	Increase (Decrease)	
Net Patient Revenue	$ 656,228	$ 706,967	$ 760,493	$ 53,526	7.6%
Disproportionate Share / IGT and UPL Payments	164,953	108,279	123,068	14,789	13.7%
Other Operating Revenues	72,133	96,678	98,816	2,138	2.2%
Total Operating Revenues	893,314	911,923	982,377	70,453	7.7%
Operating Expenses					
Salaries and Wages	366,699	387,387	378,320	(9,068)	-2.3%
Employee Benefits	133,022	125,993	140,359	14,366	11.4%
Physician & Resident Fees	112,289	124,939	128,098	3,159	2.5%
Purchased Services	72,027	82,472	96,424	13,952	16.9%
Supplies	153,120	165,785	181,261	15,476	9.3%
Other Expenses	26,769	31,700	30,882	(818)	-2.6%
Depreciation	47,115	45,327	50,258	4,931	10.9%
Interest	12,021	11,304	11,775	472	4.2%
Total Operating Expenses	923,062	974,906	1,017,377	42,470	4.4%
Operating Income	(29,748)	(62,983)	(35,000)	27,983	-44.4%
Grant revenue	17,352	9,876	-	(9,876)	-100.0%
Income/(Loss) from Operations with grants	(12,396)	(53,107)	(35,000)	18,107	-34.1%
Non Operating Revenues	7,411	7,706	287	(7,419)	-96.3%
Excess of Revenues Over Expenses	$ (4,985)	$ (45,401)	$ (34,713)	$ 10,688	-23.5%

Statements of Net Position

(Thousands)

	2024 Audited	2025 Projection	2026 Budget	Increase (Decrease)	
Assets					
Current Assets					
Cash and Investments	$ 34,585	$ 24,616	$ 24,030	$ (585)	-2.4%
Patient Accounts Receivable, Net	93,708	100,912	102,116	1,204	1.2%
Other Current Assets	74,801	70,469	70,853	384	0.5%
Total Current Assets	203,094	195,997	196,999	1,002	0.5%
Assets Whose Use Is Limited	191,599	122,022	88,784	(33,238)	70.9%
Property and Equipment, Net	282,632	274,736	266,595	(8,140)	-3.0%
Other Assets	161,718	160,756	154,220	(6,536)	-4.1%
Total Assets	839,042	753,510	706,598	(46,912)	-6.2%
Liabilities and Net Assets					
Current Liabilities					
Current Portion of Long Term Debt	37,901	38,285	25,259	(13,026)	-34.0%
Accounts Payable, Third-Party & Accrued	307,284	280,578	277,201	(3,377)	-1.2%
Total Current Liabilities	345,185	318,864	302,460	(16,404)	-5.1%
Long Term Debt	207,177	199,284	199,025	(259)	-0.1%
Deferred Inflows	142,978	142,962	142,962	-	0.0%
Other Post Employment Benefits	265,829	257,426	265,148	7,723	3.0%
Self Insurance Liabilities	159,026	161,530	158,270	(3,260)	-2.0%
Total Liabilities	1,120,196	1,080,065	1,067,865	(12,200)	-1.1%
Net Position	(281,154)	(326,555)	(361,266)	(34,712)	10.6%
Total Liabilities and Net Assets	$ 839,042	$ 753,510	$ 706,598	$ (46,912)	-6.2%

Statements of Cash Flow

(Thousands)

	Audited 2024	Projected 2025	Budget 2026	Increase (Decrease)	%
Cash Flows From Operating Activities					
Excess of Revenues Over Expenses	$ (4,985)	$ (45,401)	$ (34,713)	$ 10,688	-24%
Depreciation & Amortization	47,115	45,327	50,258	4,931	11%
Provision for Bad Debt	12,663	15,632	17,102	1,469	9%
(Increase) Decrease in Non-operating revenues	(12,742)	(6,279)	11,488	17,767	-283%
(Increase) Decrease in Patient Accounts Receivable, Net	(3,982)	(22,837)	(18,305)	4,531	-20%
(Increase) Decrease in Current and Other Assets	22,961	5,294	6,152	858	16%
Increase (Decrease) in Accounts Payable, Third-Party & Accrued	33,947	(26,706)	(3,377)	23,329	-87%
Increase (Decrease) in Deferred In-Flows	65,962	(16)	-	16	-100%
Increase (Decrease) in Self Insurance Liabilities	(66,208)	(5,900)	4,463	10,363	-176%
Net Cash Provided By (Used In) Operating Activities	94,731	(40,885)	33,067	73,952	-181%
Cash Flows From Investing Activities					
Other Investing Activities, Net	(45,748)	77,283	33,525	(43,758)	-57%
Net Cash Provided By (Used In) Investing Activities	(45,748)	77,283	33,525	(43,758)	-57%
Cash Flows From Financing Activities					
Additions to Property and Equipment	(12,551)	(37,431)	(42,117)	(4,686)	13%
Non-operating grants	17,333	9,876	-	(9,876)	-100%
Changes in Long Term Debt	(39,952)	(18,812)	(25,061)	(6,249)	33%
Net Cash Provided By (Used In) Financing Activities	(35,170)	(46,367)	(67,178)	(20,811)	45%
Net Increase (Decrease) in Cash and Investments	13,812	(9,970)	(586)	9,384	-94%
Cash and Investments, Beginning	20,773	34,585	24,616	(9,970)	-29%
Cash and Investments, Ending	$ 34,585	$ 24,616	$ 24,030	$ (586)	-2%

Operating Performance Reconciliation

(Thousands)

	2025 Budget	2026 Budget	Increase / (Decrease)
2025 Budgeted Income from Operations			**(34,998)**
Operating Revenues			
Net Patient Service Revenue	719,848	760,493	40,645
Disproportionate Share, IGT and UPL Revenue	130,932	123,068	(7,864)
Other Operating Revenue	74,547	98,816	24,269
Total Operating Revenues	925,327	982,377	57,050
Operating Expenses			
Salaries and Benefits	503,106	518,678	15,572
Physician Fees and Professional Services	204,675	224,522	19,847
Supplies	163,047	181,261	18,214
Other Expenses	32,381	30,882	(1,499)
Depreciation and Amortization	45,603	50,258	4,655
Interest	11,513	11,775	262
Total Operating Expenses	960,325	1,017,377	57,052
2026 Budgeted Loss from Operations	**(34,998)**	**(35,000)**	**(35,000)**

Principal Budget Assumptions

- Volume
- Patient Revenue and Reimbursement
- IGT / UPL Payments
- Other Revenues
- Staffing Costs / Vacancy Management
- Other Expenses
- Cash Flows

Revenue

- Net average revenue rate increase of 3.5% (includes all payers)
  - Minimal Medicaid increase coupled with a higher-than-average overall increase in Medicare related to the 2025-2026 Medicare Wage Index and commercial insurance rate increases.

- Total Discharges increased by 3.5% increase from 2025 levels
  - Let by acute discharges related to an improvement in average length of stay, a reduction in the average ALC daily census, the addition of a provider within rehab services, and the addition of new surgical providers

- Outpatient visits increase of 2.7% increase from 2025 levels
  - Additional visits due to an increase in specialty clinic visits due to the addition of providers in 2025.
  - Additional infusion therapy visits

- Increase in total surgeries of 8.1%
  - Primarily led by the addition of new surgeons coupled, growth in existing service lines (general surgery, neurosurgery and orthopedic surgery) along with improvements in the operating room efficiency.

- Terrace View average daily census increase of 1.5% to 383 residents

- IGT/DSH – Year-over-year growth based upon estimated net changes in allowable costs net of increases in associated Medicaid revenue

- Revenue cycle process improvements of $2.5M included within contract underpayments, denials, bad debt expense reductions

Volume Summary

	2024 Actual	2025 Projection	2026 Budget	Increase (Decrease) 26 - 25	%
Discharges					
Acute	12,992	12,868	13,250	382	3.0%
Other	5,113	5,039	5,286	247	4.9%
Total	18,105	17,907	18,536	629	3.5%
Average Length of Stay					
Acute	7.9	7.7	7.5	(0.2)	-2.8%
Other	11.2	11.2	11.3	0.0	0.4%
Total	8.9	8.7	8.6	(0.1)	-1.1%
Observation Cases	3,448	4,075	3,900	(175)	-4.3%
Outpatient Visits	299,260	308,791	317,278	8,487	2.7%
Clinics	160,028	168,131	174,841	6,710	4.0%
Behavioral Health	35,260	33,737	35,050	1,313	3.9%
Chemical Dependency	17,976	16,613	17,580	967	5.8%
Dialysis	25,815	26,884	25,552	(1,332)	-5.0%
Other	60,181	63,426	64,255	829	1.3%
Surgical Cases					
Inpatient	5,625	5,413	5,824	411	7.6%
Outpatient	7,590	7,651	8,292	641	8.4%
Total	13,215	13,064	14,116	1,052	8.1%
Case Mix Index - Acute	1.95	1.96	1.96	-	0.0%
Emergency Visits	54,101	55,810	56,920	1,110	2.0%
CPEP Visits	9,894	9,966	10,280	314	3.2%
Terrace View ADC	367.5	377.3	383.0	5.7	1.5%

DSH/IGT and UPL Revenue
(Accrual Basis Revenue)

	Audited 2024	Projected 2025	Budget 2026
DSH	149,675	94,984	110,348
UPL	15,278	13,295	12,720
Total	164,953	108,279	123,068

Expenses

- Salaries
  - Decrease in overall FTE's to 3,700 (Worked hours - primary decrease)
  - Reduced overtime costs
  - Contracted salary increases total an average of 3.5%
  - Non-Union wage increases total 0% - 3%
  - Implementation of other contracted enhancements (step changes, other shift pay changes)

- Benefits
  - Inflation driving health insurance costs, workers compensation, unemployment related costs (partially offset by FTE reduction)
  - $8.8M increase in pension expense due to increase in FTEs over several years to meet NYS minimums, salaries, actuarial assumptions and ECMCC's increased share of the cost coupled with the estimated impact of enhanced benefit plan provisions agreed on for hospital law enforcement staff
  - $3M increase in post-retiree health benefit cost because of estimated actuarial assumption impacts

Expenses (cont'd)

- Physician & Residents
  - Contracted increases for physicians and residents
  - Physician practice infrastructure investments (captive PC)

- Contractual Fees/Purchased Services
  - Operating expenses related to the implementation of EPIC (EHR) and Infor (ERP system)
  - Increased administrative costs for specialty pharmacy program operations due to increased volume

Expenses (cont'd)

- Supplies
  - Increase in volume from projected 2025 volume levels including an 8.1% increase in total surgeries
  - Inflationary increases in all supply categories - most significant in pharmacy costs and tariff costs, partially offset by savings initiatives of $1.5 million (physician preference, pricing, joint contracting)
  - Increase in specialty pharmacy and infusion therapy drug costs due to increased volume and inflation

- Depreciation and Interest
  - Increased overall depreciation and interest costs
    - New depreciation expenses related to the EPIC and Infor projects expected to go-live and be placed in service during the 4th quarter 2026.

Cash Flow Assumptions

- Net breakeven impact on cash during 2026
- Days in accounts receivable improving to 49 days
- Days in accounts payable holding at 60 days
- Routine capital budget spend consistent with 2024 and 2025 at $8.0 million and EPIC/INFOR implementation costs funded by Restricted funds
- Pension payment increase of $8.8 million

Performance Improvement Initiatives

- FTE management and overtime reduction
- Inpatient and outpatient growth strategies
- Operating Room block time optimization
- Length of stay improvements / ALC ADC reduction
- Revenue cycle improvement initiatives
- Value analysis program reducing supply costs
- Various non-labor expense reduction initiatives
- Continued infrastructure investment in population health strategies

Emerging Issues and Risk Areas

- NYS budget uncertainty given Federal Medicaid reform
  - Medicaid reimbursement uncertainty
  - NYS operational support (VAPAP) availability and uncertainty
- Timing of future DSH/IGT payments
- Impact of EPIC implementation during 2026 on operations
- Operating performance improvements
  - Market driven length of stay challenges (Post-acute staffing)
  - FTE vacancy management risks
  - Inpatient and outpatient volume sensitivity
    - Ambulatory surgery market pressure
- Continued inflationary pressures on non-salary operating costs and pharmaceutical shortages
- Benefit expense and contribution changes
  - Pension and OPEB

2026 Capital Budget Summary

ECMCC must limit routine capital spending funding from internal operations and remain consistent with 2025

- $8 Million routine capital spend *($8M in 2025)*
  - $8M from internal operating funds

- $49.9 Million EPIC EHR/Infor ERP system implementations
  - Restricted funds and FEMA receipts

3 Year Financial Projections

- Reimbursement rate increases adjusted to historical net rate increases, excluding one-time increases (not anticipated to keep pace with expense growth)
- IGT/UPL at current projections
- Salary expense consistent with current collective bargaining agreements
- Benefits % of salary expense steady throughout projection period
- Supply and other expense inflation consistent with 2025 and 2026
- Reflects growth in routine capital replacement investments given age of facility and equipment and under capitalization which has occurred since 2020
- Reflects operating support need from New York State or Federal safety net support programs in addition to future operational improvements and significant service reductions in the absence of external support
- Assumes the significant Disproportionate Share (DSH) cuts will be delayed (based upon history)
- Excludes any impact of potential PayGo Statutory Medicare reductions and NYS future budgetary reductions as a result of the Medicaid eligibility changes in H.R.1. federal bill given uncertainty on what actions may be taken at both the Federal and State legislative levels

Statements of Revenues and Expenses – Projected

(Thousands)

	Audited 2024	Projected 2025	Budget 2026	2027	Projected 2028	2029
Operating Revenues						
Net Patient Service Revenue	656,228	706,967	760,493	798,962	837,328	876,156
Disproportionate Share, IGT and UPL Revenue	164,953	108,279	123,068	128,213	133,538	139,050
Other Operating Revenue	72,133	96,678	98,816	99,804	100,802	101,810
Total Operating Revenues	893,314	911,923	982,377	1,026,980	1,071,668	1,117,016
Operating Expenses						
Salaries and Benefits	499,721	513,380	518,678	563,612	603,394	643,435
Physician Fees and Professional Services	184,315	207,411	224,522	229,012	235,883	242,959
Supplies	153,120	165,785	181,261	190,170	196,849	203,631
Other Expenses	26,769	31,700	30,882	32,445	34,088	35,814
Depreciation and Amortization	47,115	45,327	50,258	49,756	49,258	48,766
Interest	12,021	11,304	11,775	11,984	12,196	12,411
Total Operating Expenses	923,062	974,906	1,017,377	1,076,980	1,131,668	1,187,016
	(29,748)	(62,983)	(35,000)	(50,000)	(60,000)	(70,000)
External Support/Operating Efficiencies	-	-	-	50,000	60,000	70,000
Income/(Loss) from Operations	(29,748)	(62,983)	(35,000)	(0)	(0)	(0)
Grant revenue	17,352	9,876	-	-	-	-
Income/(Loss) from Operations with Grants	(12,396)	(53,107)	(35,000)	(0)	(0)	(0)
Non Operating Revenues & Capital Contributions	7,411	7,706	287	287	287	287
Excess of Revenues Over Expenses	(4,985)	(45,401)	(34,713)	287	287	287

Statements of Financial Position – Projected

(Thousands)

	Audited 2024	Projected 2025	Budget 2026	2027	Projected 2028	2029
ASSETS						
Current Assets						
Cash & Investments	34,585	24,616	24,030	28,090	38,058	50,197
Patient Accounts Receivable	93,708	100,912	102,116	107,261	112,406	117,600
Other Current Assets	74,801	70,469	70,853	71,265	71,444	71,878
Total Current Assets	203,094	195,997	196,999	206,616	221,909	239,675
Assets Whose Use Is Limited	191,599	122,022	88,784	88,692	88,595	89,495
Property and Equipment	282,632	274,736	266,595	249,839	235,581	221,816
Other Assets	161,718	160,756	154,220	152,931	151,723	150,595
Total Assets	839,042	753,510	706,598	698,078	697,807	701,579
LIABILITIES AND NET ASSETS						
Current Liabilities						
Current Portion of Long Term Debt	37,901	38,285	25,259	20,928	17,293	15,535
Accounts Payable, Third-Party & Accrued	307,284	280,578	277,201	287,923	297,823	307,839
Total Current Liabilities	345,185	318,864	302,460	308,851	315,116	323,374
Long Term Debt	207,177	199,284	199,025	178,097	160,804	145,269
Deferred Inflows	142,978	142,962	142,962	143,962	144,962	145,962
Other Post Employment Benefits	265,829	257,426	265,148	273,103	281,296	289,735
Self Insurance Reserves	159,026	161,530	158,270	155,046	156,323	157,646
Total Liabilities	1,120,196	1,080,065	1,067,865	1,059,058	1,058,500	1,061,986
Net Position	(281,154)	(326,555)	(361,266)	(360,980)	(360,693)	(360,406)
Total Liabilities and Net Assets	839,042	753,510	706,598	698,078	697,807	701,580

Statements of Cash Flow - Projected

(Thousands)

	Audited 2024	Projected 2025	Budget 2026	2027	Projected 2028	2029
Cash Flows From Operating Activities						
Excess of Revenues Over Expenses	(4,985)	(45,401)	(34,713)	287	287	287
Depreciation & Amortization	47,115	45,327	50,258	49,756	49,258	48,766
Provision for bad debt	12,663	15,632	17,102	16,680	16,725	16,771
(Increase) Decrease in Non-operating revenues	(12,742)	(6,279)	11,488	11,696	11,908	12,124
(Increase) Decrease in Patient Accounts Receivable, Net	(3,982)	(22,837)	(18,305)	(21,825)	(21,870)	(21,965)
(Increase) Decrease in Current and Other Assets	22,961	5,294	6,152	877	1,029	695
Increase (Decrease) in Accounts Payable, Third-Pary & Accrued	33,947	(26,706)	(3,377)	10,722	9,900	10,017
Increase (Decrease) in Third Party Payer Settlements		-	-	-	-	-
Increase (Decrease) in Deferred In Flows	65,962	(16)	-	1,000	1,000	1,000
Increase (Decrease) in Self Insurance Liabilities	(66,208)	(5,900)	4,463	4,730	9,470	9,762
Net Cash Provided By (Used In) Operating Activities	94,731	(40,885)	33,067	73,923	77,708	77,456
Cash Flows From Investing Activities						
Other Investing Activities, Net	(45,748)	77,283	33,525	379	384	(613)
Net Cash Provided By (Used In) Investing Activities	(45,748)	77,283	33,525	379	384	(613)
Cash Flows From Financing Activities						
Additions to Property and Equipment	(12,551)	(37,431)	(42,117)	(33,000)	(35,000)	(35,000)
Non-operating grants	17,333	9,876	-	-	-	-
Changes in Long Term Debt	(39,952)	(18,812)	(25,061)	(37,243)	(33,124)	(29,704)
Net Cash Provided By (Used In) Financing Activities	(35,170)	(46,367)	(67,178)	(70,243)	(68,124)	(64,704)
Net Increase (Decrease) in Cash and Investments	13,812	(9,970)	(585)	4,060	9,968	12,139
Cash and Investments, Beginning	20,773	34,585	24,616	24,030	28,090	38,058
Cash and Investments, Ending	34,585	24,616	24,030	28,090	38,058	50,197