

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	<b><u>ASSETS</u></b>				
A.	<b><u>Current Assets:</u></b>				
1	Cash and Cash Equivalents	\$2,003,448	\$2,513,911	\$510,463	25%
2	Short Term Investments	\$830,159	\$195,420	(\$634,739)	-76%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$10,991,250	\$10,792,628	(\$198,622)	-2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,135,356	\$1,095,852	(\$39,504)	-3%
5	Due From Affiliates	\$1,352,988	\$46,292	(\$1,306,696)	-97%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$2,090,275	\$2,035,077	(\$55,198)	-3%
8	Prepaid Expenses	\$2,261,301	\$2,935,422	\$674,121	30%
9	Other Current Assets	\$871,559	\$515,117	(\$356,442)	-41%
	<b>Total Current Assets</b>	<b>\$21,536,336</b>	<b>\$20,129,719</b>	<b>(\$1,406,617)</b>	<b>-7%</b>
B.	<b><u>Noncurrent Assets Whose Use is Limited:</u></b>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
5	Interest in Net Assets of Foundation	\$14,320,874	\$14,189,069	(\$131,805)	-1%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$4,271,517	\$3,686,428	(\$585,089)	-14%
C.	<b><u>Net Fixed Assets:</u></b>				
1	Property, Plant and Equipment	\$89,669,560	\$91,528,719	\$1,859,159	2%
2	Less: Accumulated Depreciation	\$55,543,307	\$60,489,384	\$4,946,077	9%
	<b>Property, Plant and Equipment, Net</b>	<b>\$34,126,253</b>	<b>\$31,039,335</b>	<b>(\$3,086,918)</b>	<b>-9%</b>
3	Construction in Progress	\$0	\$668,678	\$668,678	0%
	<b>Total Net Fixed Assets</b>	<b>\$34,126,253</b>	<b>\$31,708,013</b>	<b>(\$2,418,240)</b>	<b>-7%</b>
	<b>Total Assets</b>	<b>\$74,254,980</b>	<b>\$69,713,229</b>	<b>(\$4,541,751)</b>	<b>-6%</b>

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		FY 2008	FY 2009	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$6,624,895	\$7,756,646	\$1,131,751	17%
2	Salaries, Wages and Payroll Taxes	\$2,694,149	\$2,869,848	\$175,699	7%
3	Due To Third Party Payers	\$1,217,686	\$2,305,128	\$1,087,442	89%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,332,761	\$1,662,730	\$329,969	25%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$3,205,356	\$1,095,852	(\$2,109,504)	-66%
	<b>Total Current Liabilities</b>	<b>\$15,074,847</b>	<b>\$15,690,204</b>	<b>\$615,357</b>	<b>4%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$9,206,726	\$7,543,997	(\$1,662,729)	-18%
	<b>Total Long Term Debt</b>	<b>\$9,206,726</b>	<b>\$7,543,997</b>	<b>(\$1,662,729)</b>	<b>-18%</b>
3	Accrued Pension Liability	\$4,845,380	\$20,426,162	\$15,580,782	322%
4	Other Long Term Liabilities	\$1,563,146	\$2,284,464	\$721,318	46%
	<b>Total Long Term Liabilities</b>	<b>\$15,615,252</b>	<b>\$30,254,623</b>	<b>\$14,639,371</b>	<b>94%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$29,244,007	\$13,080,008	(\$16,163,999)	-55%
2	Temporarily Restricted Net Assets	\$10,559,944	\$7,033,945	(\$3,525,999)	-33%
3	Permanently Restricted Net Assets	\$3,760,930	\$3,654,449	(\$106,481)	-3%
	<b>Total Net Assets</b>	<b>\$43,564,881</b>	<b>\$23,768,402</b>	<b>(\$19,796,479)</b>	<b>-45%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$74,254,980</b>	<b>\$69,713,229</b>	<b>(\$4,541,751)</b>	<b>-6%</b>

<b>NEW MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2008 ACTUAL</b>	<b>FY 2009 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$214,881,435	\$230,831,708	\$15,950,273	7%
2	Less: Allowances	\$121,987,873	\$138,119,123	\$16,131,250	13%
3	Less: Charity Care	\$4,069,072	\$3,386,223	(\$682,849)	-17%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$88,824,490</b>	<b>\$89,326,362</b>	<b>\$501,872</b>	<b>1%</b>
5	Other Operating Revenue	\$5,548,110	\$3,899,680	(\$1,648,430)	-30%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$94,372,600</b>	<b>\$93,226,042</b>	<b>(\$1,146,558)</b>	<b>-1%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$38,024,427	\$39,922,131	\$1,897,704	5%
2	Fringe Benefits	\$11,706,142	\$13,279,342	\$1,573,200	13%
3	Physicians Fees	\$1,670,354	\$1,429,887	(\$240,467)	-14%
4	Supplies and Drugs	\$14,251,377	\$14,176,511	(\$74,866)	-1%
5	Depreciation and Amortization	\$4,944,502	\$4,946,076	\$1,574	0%
6	Bad Debts	\$3,730,727	\$3,220,173	(\$510,554)	-14%
7	Interest	\$730,698	\$675,584	(\$55,114)	-8%
8	Malpractice	\$2,235,043	\$2,375,725	\$140,682	6%
9	Other Operating Expenses	\$18,587,696	\$18,727,325	\$139,629	1%
	<b>Total Operating Expenses</b>	<b>\$95,880,966</b>	<b>\$98,752,754</b>	<b>\$2,871,788</b>	<b>3%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$1,508,366)</b>	<b>(\$5,526,712)</b>	<b>(\$4,018,346)</b>	<b>266%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$123,633	\$81,496	(\$42,137)	-34%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$233,788	\$280,146	\$46,358	20%
	<b>Total Non-Operating Revenue</b>	<b>\$357,421</b>	<b>\$361,642</b>	<b>\$4,221</b>	<b>1%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>(\$1,150,945)</b>	<b>(\$5,165,070)</b>	<b>(\$4,014,125)</b>	<b>349%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>(\$1,150,945)</b>	<b>(\$5,165,070)</b>	<b>(\$4,014,125)</b>	<b>349%</b>
	Principal Payments	\$0	\$1,412,730	\$1,412,730	0%

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$39,004,264	\$38,677,463	(\$326,801)	-1%
2	MEDICARE MANAGED CARE	\$1,617,054	\$1,779,387	\$162,333	10%
3	MEDICAID	\$1,482,601	\$1,258,906	(\$223,695)	-15%
4	MEDICAID MANAGED CARE	\$1,002,271	\$1,182,686	\$180,415	18%
5	CHAMPUS/TRICARE	\$43,454	\$65,802	\$22,348	51%
6	COMMERCIAL INSURANCE	\$1,273,864	\$1,802,193	\$528,329	41%
7	NON-GOVERNMENT MANAGED CARE	\$26,150,269	\$24,798,525	(\$1,351,744)	-5%
8	WORKER'S COMPENSATION	\$2,621,448	\$1,740,810	(\$880,638)	-34%
9	SELF- PAY/UNINSURED	\$1,452,803	\$1,206,064	(\$246,739)	-17%
10	SAGA	\$1,117,977	\$393,529	(\$724,448)	-65%
11	OTHER	\$57,602	\$101,660	\$44,058	76%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$75,823,607</b>	<b>\$73,007,025</b>	<b>(\$2,816,582)</b>	<b>-4%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$53,569,357	\$59,901,818	\$6,332,461	12%
2	MEDICARE MANAGED CARE	\$2,844,299	\$4,046,469	\$1,202,170	42%
3	MEDICAID	\$2,044,790	\$3,822,182	\$1,777,392	87%
4	MEDICAID MANAGED CARE	\$3,072,560	\$3,167,435	\$94,875	3%
5	CHAMPUS/TRICARE	\$187,002	\$212,408	\$25,406	14%
6	COMMERCIAL INSURANCE	\$5,538,188	\$5,357,707	(\$180,481)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$65,493,951	\$75,387,106	\$9,893,155	15%
8	WORKER'S COMPENSATION	\$1,300,817	\$1,510,423	\$209,606	16%
9	SELF- PAY/UNINSURED	\$3,756,696	\$3,396,201	(\$360,495)	-10%
10	SAGA	\$771,912	\$837,929	\$66,017	9%
11	OTHER	\$478,256	\$185,005	(\$293,251)	-61%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$139,057,828</b>	<b>\$157,824,683</b>	<b>\$18,766,855</b>	<b>13%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$92,573,621	\$98,579,281	\$6,005,660	6%
2	MEDICARE MANAGED CARE	\$4,461,353	\$5,825,856	\$1,364,503	31%
3	MEDICAID	\$3,527,391	\$5,081,088	\$1,553,697	44%
4	MEDICAID MANAGED CARE	\$4,074,831	\$4,350,121	\$275,290	7%
5	CHAMPUS/TRICARE	\$230,456	\$278,210	\$47,754	21%
6	COMMERCIAL INSURANCE	\$6,812,052	\$7,159,900	\$347,848	5%
7	NON-GOVERNMENT MANAGED CARE	\$91,644,220	\$100,185,631	\$8,541,411	9%
8	WORKER'S COMPENSATION	\$3,922,265	\$3,251,233	(\$671,032)	-17%
9	SELF- PAY/UNINSURED	\$5,209,499	\$4,602,265	(\$607,234)	-12%
10	SAGA	\$1,889,889	\$1,231,458	(\$658,431)	-35%
11	OTHER	\$535,858	\$286,665	(\$249,193)	-47%
	<b>TOTAL GROSS REVENUE</b>	<b>\$214,881,435</b>	<b>\$230,831,708</b>	<b>\$15,950,273</b>	<b>7%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$13,736,074	\$12,709,505	(\$1,026,569)	-7%
2	MEDICARE MANAGED CARE	\$545,846	\$647,213	\$101,367	19%
3	MEDICAID	\$399,357	\$366,933	(\$32,424)	-8%
4	MEDICAID MANAGED CARE	\$309,031	\$443,232	\$134,201	43%
5	CHAMPUS/TRICARE	\$13,441	\$15,679	\$2,238	17%
6	COMMERCIAL INSURANCE	\$725,035	\$724,301	(\$734)	0%
7	NON-GOVERNMENT MANAGED CARE	\$10,553,050	\$10,099,075	(\$453,975)	-4%
8	WORKER'S COMPENSATION	\$1,421,176	\$1,080,426	(\$340,750)	-24%
9	SELF- PAY/UNINSURED	\$464,817	\$65,680	(\$399,137)	-86%
10	SAGA	\$301,142	\$114,702	(\$186,440)	-62%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	OTHER	\$15,516	\$29,631	\$14,115	91%
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$28,484,485</b>	<b>\$26,296,377</b>	<b>(\$2,188,108)</b>	<b>-8%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$12,968,384	\$12,469,898	(\$498,486)	-4%
2	MEDICARE MANAGED CARE	\$1,209,488	\$1,203,789	(\$5,699)	0%
3	MEDICAID	\$550,791	\$922,256	\$371,465	67%
4	MEDICAID MANAGED CARE	\$1,103,011	\$1,012,218	(\$90,793)	-8%
5	CHAMPUS/TRICARE	\$57,658	\$62,550	\$4,892	8%
6	COMMERCIAL INSURANCE	\$3,491,915	\$2,661,747	(\$830,168)	-24%
7	NON-GOVERNMENT MANAGED CARE	\$34,714,208	\$40,015,675	\$5,301,467	15%
8	WORKER'S COMPENSATION	\$975,138	\$1,029,903	\$54,765	6%
9	SELF- PAY/UNINSURED	\$1,201,937	\$184,951	(\$1,016,986)	-85%
10	SAGA	\$207,925	\$202,184	(\$5,741)	-3%
11	OTHER	\$128,824	\$44,640	(\$84,184)	-65%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$56,609,279</b>	<b>\$59,809,811</b>	<b>\$3,200,532</b>	<b>6%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$26,704,458	\$25,179,403	(\$1,525,055)	-6%
2	MEDICARE MANAGED CARE	\$1,755,334	\$1,851,002	\$95,668	5%
3	MEDICAID	\$950,148	\$1,289,189	\$339,041	36%
4	MEDICAID MANAGED CARE	\$1,412,042	\$1,455,450	\$43,408	3%
5	CHAMPUS/TRICARE	\$71,099	\$78,229	\$7,130	10%
6	COMMERCIAL INSURANCE	\$4,216,950	\$3,386,048	(\$830,902)	-20%
7	NON-GOVERNMENT MANAGED CARE	\$45,267,258	\$50,114,750	\$4,847,492	11%
8	WORKER'S COMPENSATION	\$2,396,314	\$2,110,329	(\$285,985)	-12%
9	SELF- PAY/UNINSURED	\$1,666,754	\$250,631	(\$1,416,123)	-85%
10	SAGA	\$509,067	\$316,886	(\$192,181)	-38%
11	OTHER	\$144,340	\$74,271	(\$70,069)	-49%
	<b>TOTAL NET REVENUE</b>	<b>\$85,093,764</b>	<b>\$86,106,188</b>	<b>\$1,012,424</b>	<b>1%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	1,235	1,184	(51)	-4%
2	MEDICARE MANAGED CARE	55	64	9	16%
3	MEDICAID	70	72	2	3%
4	MEDICAID MANAGED CARE	126	136	10	8%
5	CHAMPUS/TRICARE	1	6	5	500%
6	COMMERCIAL INSURANCE	74	82	8	11%
7	NON-GOVERNMENT MANAGED CARE	1,303	1,113	(190)	-15%
8	WORKER'S COMPENSATION	54	30	(24)	-44%
9	SELF- PAY/UNINSURED	82	60	(22)	-27%
10	SAGA	31	22	(9)	-29%
11	OTHER	1	5	4	400%
	<b>TOTAL DISCHARGES</b>	<b>3,032</b>	<b>2,774</b>	<b>(258)</b>	<b>-9%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	6,043	5,137	(906)	-15%
2	MEDICARE MANAGED CARE	224	233	9	4%
3	MEDICAID	369	234	(135)	-37%
4	MEDICAID MANAGED CARE	306	320	14	5%
5	CHAMPUS/TRICARE	3	17	14	467%
6	COMMERCIAL INSURANCE	220	248	28	13%
7	NON-GOVERNMENT MANAGED CARE	4,030	3,353	(677)	-17%
8	WORKER'S COMPENSATION	124	68	(56)	-45%
9	SELF- PAY/UNINSURED	283	189	(94)	-33%
10	SAGA	178	56	(122)	-69%
11	OTHER	5	19	14	280%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL PATIENT DAYS</b>	<b>11,785</b>	<b>9,874</b>	<b>(1,911)</b>	<b>-16%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	33,658	34,475	817	2%
2	MEDICARE MANAGED CARE	1,902	2,563	661	35%
3	MEDICAID	2,932	3,641	709	24%
4	MEDICAID MANAGED CARE	3,397	3,784	387	11%
5	CHAMPUS/TRICARE	252	259	7	3%
6	COMMERCIAL INSURANCE	4,125	5,457	1,332	32%
7	NON-GOVERNMENT MANAGED CARE	49,952	51,409	1,457	3%
8	WORKER'S COMPENSATION	1,012	855	(157)	-16%
9	SELF- PAY/UNINSURED	5,861	5,963	102	2%
10	SAGA	950	1,212	262	28%
11	OTHER	275	212	(63)	-23%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>104,316</b>	<b>109,830</b>	<b>5,514</b>	<b>5%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$3,296,083	\$3,676,806	\$380,723	12%
2	MEDICARE MANAGED CARE	\$127,595	\$180,079	\$52,484	41%
3	MEDICAID	\$370,527	\$436,206	\$65,679	18%
4	MEDICAID MANAGED CARE	\$813,341	\$1,105,212	\$291,871	36%
5	CHAMPUS/TRICARE	\$52,628	\$31,608	(\$21,020)	-40%
6	COMMERCIAL INSURANCE	\$932,973	\$1,092,159	\$159,186	17%
7	NON-GOVERNMENT MANAGED CARE	\$8,007,295	\$8,468,583	\$461,288	6%
8	WORKER'S COMPENSATION	\$398,711	\$405,907	\$7,196	2%
9	SELF- PAY/UNINSURED	\$1,162,251	\$1,262,006	\$99,755	9%
10	SAGA	\$260,037	\$390,794	\$130,757	50%
11	OTHER	\$36,845	\$99,541	\$62,696	170%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$15,458,286</b>	<b>\$17,148,901</b>	<b>\$1,690,615</b>	<b>11%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$1,111,439	\$1,106,231	(\$5,208)	0%
2	MEDICARE MANAGED CARE	\$39,874	\$61,805	\$21,931	55%
3	MEDICAID	\$105,667	\$131,212	\$25,545	24%
4	MEDICAID MANAGED CARE	\$325,520	\$447,347	\$121,827	37%
5	CHAMPUS/TRICARE	\$21,594	\$12,027	(\$9,567)	-44%
6	COMMERCIAL INSURANCE	\$552,748	\$624,278	\$71,530	13%
7	NON-GOVERNMENT MANAGED CARE	\$4,547,477	\$4,577,332	\$29,855	1%
8	WORKER'S COMPENSATION	\$291,142	\$275,729	(\$15,413)	-5%
9	SELF- PAY/UNINSURED	\$113,880	\$93,035	(\$20,845)	-18%
10	SAGA	\$51,925	\$56,736	\$4,811	9%
11	OTHER	\$2,586	\$12,136	\$9,550	369%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$7,163,852</b>	<b>\$7,397,868</b>	<b>\$234,016</b>	<b>3%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	3,113	2,865	(248)	-8%
2	MEDICARE MANAGED CARE	96	132	36	38%
3	MEDICAID	434	474	40	9%
4	MEDICAID MANAGED CARE	1,300	1,516	216	17%
5	CHAMPUS/TRICARE	69	49	(20)	-29%
6	COMMERCIAL INSURANCE	1,011	1,016	5	0%
7	NON-GOVERNMENT MANAGED CARE	9,052	8,546	(506)	-6%
8	WORKER'S COMPENSATION	659	527	(132)	-20%
9	SELF- PAY/UNINSURED	1,623	1,496	(127)	-8%
10	SAGA	336	439	103	31%
11	OTHER	66	129	63	95%

**NEW MILFORD HOSPITAL  
 TWELVE MONTHS ACTUAL FILING  
 FISCAL YEAR 2009  
 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	17,759	17,189	(570)	-3%

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$13,452,782	\$13,297,685	(\$155,097)	-1%
2	Physician Salaries	\$4,926,356	\$5,922,680	\$996,324	20%
3	Non-Nursing, Non-Physician Salaries	\$19,645,289	\$20,701,766	\$1,056,477	5%
	<b>Total Salaries &amp; Wages</b>	<b>\$38,024,427</b>	<b>\$39,922,131</b>	<b>\$1,897,704</b>	<b>5%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$4,141,553	\$4,423,223	\$281,670	7%
2	Physician Fringe Benefits	\$1,516,620	\$1,970,068	\$453,448	30%
3	Non-Nursing, Non-Physician Fringe Benefits	\$6,047,969	\$6,886,051	\$838,082	14%
	<b>Total Fringe Benefits</b>	<b>\$11,706,142</b>	<b>\$13,279,342</b>	<b>\$1,573,200</b>	<b>13%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$815,567	\$491,499	(\$324,068)	-40%
2	Physician Fees	\$1,670,354	\$1,429,887	(\$240,467)	-14%
3	Non-Nursing, Non-Physician Fees	\$33,507	\$5,226	(\$28,281)	-84%
	<b>Total Contractual Labor Fees</b>	<b>\$2,519,428</b>	<b>\$1,926,612</b>	<b>(\$592,816)</b>	<b>-24%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$13,186,387	\$8,262,242	(\$4,924,145)	-37%
2	Pharmaceutical Costs	\$1,064,990	\$5,914,269	\$4,849,279	455%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$14,251,377</b>	<b>\$14,176,511</b>	<b>(\$74,866)</b>	<b>-1%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$2,138,963	\$2,128,831	(\$10,132)	0%
2	Depreciation-Equipment	\$2,796,971	\$2,809,193	\$12,222	0%
3	Amortization	\$8,568	\$8,052	(\$516)	-6%
	<b>Total Depreciation and Amortization</b>	<b>\$4,944,502</b>	<b>\$4,946,076</b>	<b>\$1,574</b>	<b>0%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$3,730,727	\$3,220,173	(\$510,554)	-14%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$730,698	\$675,584	(\$55,114)	-8%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$2,235,043	\$2,375,725	\$140,682	6%
<b>I. Utilities:</b>					
1	Water	\$140,370	\$136,861	(\$3,509)	-2%
2	Natural Gas	\$317,822	\$297,774	(\$20,048)	-6%
3	Oil	\$45,336	\$71,316	\$25,980	57%
4	Electricity	\$1,003,814	\$1,004,729	\$915	0%
5	Telephone	\$230,905	\$248,303	\$17,398	8%
6	Other Utilities	\$0	\$0	\$0	0%
	<b>Total Utilities</b>	<b>\$1,738,247</b>	<b>\$1,758,983</b>	<b>\$20,736</b>	<b>1%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$99,557	\$109,466	\$9,909	10%
2	Legal Fees	\$286,347	\$216,756	(\$69,591)	-24%
3	Consulting Fees	\$482,993	\$454,863	(\$28,130)	-6%
4	Dues and Membership	\$329,576	\$382,280	\$52,704	16%
5	Equipment Leases	\$559,197	\$611,301	\$52,104	9%
6	Building Leases	\$609,222	\$639,252	\$30,030	5%
7	Repairs and Maintenance	\$1,497,071	\$1,455,682	(\$41,389)	-3%
8	Insurance	\$216,513	\$192,977	(\$23,536)	-11%

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$233,287	\$109,392	(\$123,895)	-53%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$49,605	\$45,500	(\$4,105)	-8%
12	General Supplies	\$1,380,770	\$1,720,329	\$339,559	25%
13	Licenses and Subscriptions	\$76,694	\$75,809	(\$885)	-1%
14	Postage and Shipping	\$125,837	\$116,489	(\$9,348)	-7%
15	Advertising	\$458,444	\$502,313	\$43,869	10%
16	Other Business Expenses	\$0	\$0	\$0	0%
	<b>Total Business Expenses</b>	<b>\$6,405,113</b>	<b>\$6,632,409</b>	<b>\$227,296</b>	<b>4%</b>
<b>K.</b>	<b><u>Other Operating Expense:</u></b>				
1	Miscellaneous Other Operating Expenses	\$9,595,262	\$9,839,208	\$243,946	3%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$95,880,966</b>	<b>\$98,752,754</b>	<b>\$2,871,788</b>	<b>3%</b>
	<b>*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				
<b>II.</b>	<b><u>OPERATING EXPENSE BY DEPARTMENT</u></b>				
<b>A.</b>	<b><u>General Services:</u></b>				
1	General Administration	\$23,501,294	\$24,938,927	\$1,437,633	6%
2	General Accounting	\$450,099	\$463,589	\$13,490	3%
3	Patient Billing & Collection	\$1,311,903	\$1,392,752	\$80,849	6%
4	Admitting / Registration Office	\$742,555	\$748,688	\$6,133	1%
5	Data Processing	\$1,599,126	\$1,673,188	\$74,062	5%
6	Communications	\$256,741	\$278,304	\$21,563	8%
7	Personnel	\$716,589	\$576,795	(\$139,794)	-20%
8	Public Relations	\$1,534,803	\$1,513,889	(\$20,914)	-1%
9	Purchasing	\$5,138,253	\$5,833,752	\$695,499	14%
10	Dietary and Cafeteria	\$1,166,330	\$1,172,653	\$6,323	1%
11	Housekeeping	\$1,151,008	\$1,043,759	(\$107,249)	-9%
12	Laundry & Linen	\$323,666	\$310,776	(\$12,890)	-4%
13	Operation of Plant	\$1,443,579	\$1,445,521	\$1,942	0%
14	Security	\$497,084	\$474,991	(\$22,093)	-4%
15	Repairs and Maintenance	\$1,966,523	\$1,889,521	(\$77,002)	-4%
16	Central Sterile Supply	\$456,537	\$478,955	\$22,418	5%
17	Pharmacy Department	\$7,157,275	\$7,129,695	(\$27,580)	0%
18	Other General Services	\$4,105,991	\$4,615,673	\$509,682	12%
	<b>Total General Services</b>	<b>\$53,519,356</b>	<b>\$55,981,428</b>	<b>\$2,462,072</b>	<b>5%</b>
<b>B.</b>	<b><u>Professional Services:</u></b>				
1	Medical Care Administration	\$1,497,755	\$1,365,676	(\$132,079)	-9%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$871,400	\$697,194	(\$174,206)	-20%
4	Medical Records	\$1,022,894	\$983,243	(\$39,651)	-4%
5	Social Service	\$205,982	\$190,048	(\$15,934)	-8%
6	Other Professional Services	\$636,278	\$894,676	\$258,398	41%
	<b>Total Professional Services</b>	<b>\$4,234,309</b>	<b>\$4,130,837</b>	<b>(\$103,472)</b>	<b>-2%</b>
<b>C.</b>	<b><u>Special Services:</u></b>				
1	Operating Room	\$2,692,733	\$2,721,250	\$28,517	1%
2	Recovery Room	\$484,386	\$493,899	\$9,513	2%
3	Anesthesiology	\$160,912	\$146,295	(\$14,617)	-9%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$1,631,564	\$1,667,060	\$35,496	2%
6	Diagnostic Ultrasound	\$0	\$0	\$0	0%
7	Radiation Therapy	\$1,520,441	\$1,503,719	(\$16,722)	-1%

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
8	Radioisotopes	\$543,537	\$564,425	\$20,888	4%
9	CT Scan	\$644,174	\$685,296	\$41,122	6%
10	Laboratory	\$3,448,733	\$4,047,737	\$599,004	17%
11	Blood Storing/Processing	\$625,279	\$643,625	\$18,346	3%
12	Cardiology	\$320,766	\$325,612	\$4,846	2%
13	Electrocardiology	\$511,966	\$482,413	(\$29,553)	-6%
14	Electroencephalography	\$0	\$0	\$0	0%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$202,452	\$206,881	\$4,429	2%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$671,270	\$681,919	\$10,649	2%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$341,127	\$267,659	(\$73,468)	-22%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$508,261	\$551,450	\$43,189	8%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$3,366,419	\$3,551,441	\$185,022	5%
25	MRI	\$975,960	\$964,736	(\$11,224)	-1%
26	PET Scan	\$459,394	\$382,478	(\$76,916)	-17%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$921,586	\$960,887	\$39,301	4%
29	Sleep Center	\$670,101	\$581,145	(\$88,956)	-13%
30	Lithotripsy	\$127,600	\$112,200	(\$15,400)	-12%
31	Cardiac Catheterization/Rehabilitation	\$1,639,530	\$1,024,531	(\$614,999)	-38%
32	Occupational Therapy / Physical Therapy	\$226,044	\$234,824	\$8,780	4%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,112,551	\$2,048,929	(\$63,622)	-3%
	<b>Total Special Services</b>	<b>\$24,806,786</b>	<b>\$24,850,411</b>	<b>\$43,625</b>	<b>0%</b>
<b>D.</b>	<b><u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$3,686,236	\$3,561,197	(\$125,039)	-3%
2	Intensive Care Unit	\$1,567,476	\$1,544,675	(\$22,801)	-1%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$0	\$0	\$0	0%
5	Pediatric Unit	\$420,976	\$395,863	(\$25,113)	-6%
6	Maternity Unit	\$1,408,079	\$1,621,142	\$213,063	15%
7	Newborn Nursery Unit	\$37,554	\$30,069	(\$7,485)	-20%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$644,738	\$675,189	\$30,451	5%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$1,291,540	\$1,180,387	(\$111,153)	-9%
13	Other Routine Services	\$3,874,257	\$4,404,744	\$530,487	14%
	<b>Total Routine Services</b>	<b>\$12,930,856</b>	<b>\$13,413,266</b>	<b>\$482,410</b>	<b>4%</b>
<b>E.</b>	<b><u>Other Departments:</u></b>				
1	Miscellaneous Other Departments	\$389,659	\$376,812	(\$12,847)	-3%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$95,880,966</b>	<b>\$98,752,754</b>	<b>\$2,871,788</b>	<b>3%</b>
	<b>*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				

<b>NEW MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2007</b>	<b>FY 2008</b>	<b>FY 2009</b>
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$84,051,521	\$ 88,824,490	\$89,326,362
2	Other Operating Revenue	3,602,031	5,548,110	3,899,680
3	Total Operating Revenue	\$87,653,552	\$94,372,600	\$93,226,042
4	Total Operating Expenses	87,234,032	95,880,966	98,752,754
5	Income/(Loss) From Operations	\$419,520	(\$1,508,366)	(\$5,526,712)
6	Total Non-Operating Revenue	501,009	357,421	361,642
7	Excess/(Deficiency) of Revenue Over Expenses	\$920,529	(\$1,150,945)	(\$5,165,070)
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	0.48%	-1.59%	-5.91%
2	Hospital Non Operating Margin	0.57%	0.38%	0.39%
3	Hospital Total Margin	1.04%	-1.21%	-5.52%
4	Income/(Loss) From Operations	\$419,520	(\$1,508,366)	(\$5,526,712)
5	Total Operating Revenue	\$87,653,552	\$94,372,600	\$93,226,042
6	Total Non-Operating Revenue	\$501,009	\$357,421	\$361,642
7	Total Revenue	\$88,154,561	\$94,730,021	\$93,587,684
8	Excess/(Deficiency) of Revenue Over Expenses	\$920,529	(\$1,150,945)	(\$5,165,070)
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$37,372,385	\$29,244,007	\$13,080,008
2	Hospital Total Net Assets	\$47,477,655	\$43,564,881	\$23,768,402
3	Hospital Change in Total Net Assets	\$47,477,655	(\$3,912,774)	(\$19,796,479)
4	Hospital Change in Total Net Assets %	0.0%	-8.2%	-45.4%
<b>D. <u>Cost Data Summary</u></b>				
1	<b><u>Ratio of Cost to Charges</u></b>	<b>0.42</b>	<b>0.42</b>	<b>0.42</b>
2	Total Operating Expenses	\$84,330,473	\$92,150,239	\$98,752,754
3	Total Gross Revenue	\$196,234,554	\$214,881,435	\$230,831,708
4	Total Other Operating Revenue	\$3,602,031	\$5,244,828	\$3,580,001
5	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.28</b>	<b>1.21</b>	<b>1.19</b>
6	Total Non-Government Payments	\$55,856,088	\$53,547,276	\$55,861,758

NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
7	Total Uninsured Payments	\$1,948,897	\$1,666,754	\$250,631
8	Total Non-Government Charges	\$104,805,232	\$107,588,036	\$115,199,029
9	Total Uninsured Charges	\$4,643,723	\$5,209,499	\$4,602,265
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.64</b>	<b>0.70</b>	<b>0.61</b>
11	Total Medicare Payments	\$22,011,415	\$28,459,792	\$27,030,405
12	Total Medicare Charges	\$81,472,623	\$97,034,974	\$104,405,137
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.74</b>	<b>0.74</b>	<b>0.69</b>
14	Total Medicaid Payments	\$2,179,594	\$2,362,190	\$2,744,639
15	Total Medicaid Charges	\$6,996,049	\$7,602,222	\$9,431,209
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$2,302,322</b>	<b>\$3,093,425</b>	<b>\$2,402,227</b>
17	Charity Care	\$2,004,589	\$2,581,057	\$1,620,381
18	Bad Debts	\$3,451,187	\$4,808,441	\$4,081,840
19	Total Uncompensated Care	\$5,455,776	\$7,389,498	\$5,702,221
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.7%</b>	<b>3.4%</b>	<b>2.4%</b>
21	Total Operating Expenses	\$84,330,473	\$92,150,239	\$98,752,754
<b>E.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.43</b>	<b>1.43</b>	<b>1.28</b>
2	Total Current Assets	\$18,529,375	\$21,536,336	\$20,129,719
3	Total Current Liabilities	\$12,987,962	\$15,074,847	\$15,690,204
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>17</b>	<b>11</b>	<b>11</b>
5	Cash and Cash Equivalents	\$3,140,287	\$2,003,448	\$2,513,911
6	Short Term Investments	796,347	830,159	195,420
7	Total Cash and Short Term Investments	\$3,936,634	\$2,833,607	\$2,709,331
8	Total Operating Expenses	\$87,234,032	\$95,880,966	\$98,752,754
9	Depreciation Expense	\$4,868,890	\$4,944,502	\$4,946,076
10	Operating Expenses less Depreciation Expense	\$82,365,142	\$90,936,464	\$93,806,678
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>36.40</b>	<b>40.16</b>	<b>34.68</b>

<b>NEW MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
12	Net Patient Accounts Receivable	\$ 10,094,863	\$ 10,991,250	\$ 10,792,628
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,711,636	\$1,217,686	\$2,305,128
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 8,383,227	\$ 9,773,564	\$ 8,487,500
16	Total Net Patient Revenue	\$84,051,521	\$ 88,824,490	\$ 89,326,362
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>57.56</b>	<b>60.51</b>	<b>61.05</b>
18	Total Current Liabilities	\$12,987,962	\$15,074,847	\$15,690,204
19	Total Operating Expenses	\$87,234,032	\$95,880,966	\$98,752,754
20	Depreciation Expense	\$4,868,890	\$4,944,502	\$4,946,076
21	Total Operating Expenses less Depreciation Expense	\$82,365,142	\$90,936,464	\$93,806,678
<b>F. <u>Solvency Measures Summary</u></b>				
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>66.0</b>	<b>58.7</b>	<b>34.1</b>
2	Total Net Assets	\$47,477,655	\$43,564,881	\$23,768,402
3	Total Assets	\$71,954,201	\$74,254,980	\$69,713,229
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>24.6</b>	<b>15.6</b>	<b>(0.9)</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$920,529	(\$1,150,945)	(\$5,165,070)
6	Depreciation Expense	\$4,868,890	\$4,944,502	\$4,946,076
7	Excess of Revenues Over Expenses and Depreciation Expense	\$5,789,419	\$3,793,557	(\$218,994)
8	Total Current Liabilities	\$12,987,962	\$15,074,847	\$15,690,204
9	Total Long Term Debt	\$10,537,923	\$9,206,726	\$7,543,997
10	Total Current Liabilities and Total Long Term Debt	\$23,525,885	\$24,281,573	\$23,234,201
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>18.2</b>	<b>17.4</b>	<b>24.1</b>
12	Total Long Term Debt	\$10,537,923	\$9,206,726	\$7,543,997
13	Total Net Assets	\$47,477,655	\$43,564,881	\$23,768,402
14	Total Long Term Debt and Total Net Assets	\$58,015,578	\$52,771,607	\$31,312,399
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>7.4</b>	<b>6.2</b>	<b>0.2</b>
16	Excess Revenues over Expenses	\$920,529	(\$1,150,945)	(\$5,165,070)
17	Interest Expense	\$897,952	\$730,698	\$675,584
18	Depreciation and Amortization Expense	\$4,868,890	\$4,944,502	\$4,946,076

<b>NEW MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
19	Principal Payments	\$0	\$0	\$1,412,730
<b>G. <u>Other Financial Ratios</u></b>				
20	<b><u>Average Age of Plant</u></b>	<b>10.4</b>	<b>11.2</b>	<b>12.2</b>
21	Accumulated Depreciation	\$50,598,804	\$55,543,307	\$60,489,384
22	Depreciation and Amortization Expense	\$4,868,890	\$4,944,502	\$4,946,076
<b>H. <u>Utilization Measures Summary</u></b>				
1	Patient Days	11,268	11,785	9,874
2	Discharges	2,845	3,032	2,774
3	ALOS	4.0	3.9	3.6
4	Staffed Beds	35	37	32
5	Available Beds	-	-	95
6	Licensed Beds	95	95	95
6	Occupancy of Staffed Beds	88.2%	87.3%	84.5%
7	Occupancy of Available Beds	32.5%	34.0%	28.5%
8	Full Time Equivalent Employees	470.3	488.1	488.8
<b>I. <u>Hospital Gross Revenue Payer Mix Percentage</u></b>				
1	Non-Government Gross Revenue Payer Mix Percentage	51.0%	47.6%	47.9%
2	Medicare Gross Revenue Payer Mix Percentage	41.5%	45.2%	45.2%
3	Medicaid Gross Revenue Payer Mix Percentage	3.6%	3.5%	4.1%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	1.3%	1.1%	0.7%
5	Uninsured Gross Revenue Payer Mix Percentage	2.4%	2.4%	2.0%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$100,161,509	\$102,378,537	\$110,596,764
9	Medicare Gross Revenue (Charges)	\$81,472,623	\$97,034,974	\$104,405,137
10	Medicaid Gross Revenue (Charges)	\$6,996,049	\$7,602,222	\$9,431,209
11	Other Medical Assistance Gross Revenue (Charges)	\$2,565,627	\$2,425,747	\$1,518,123
12	Uninsured Gross Revenue (Charges)	\$4,643,723	\$5,209,499	\$4,602,265
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$395,023	\$230,456	\$278,210
14	Total Gross Revenue (Charges)	\$196,234,554	\$214,881,435	\$230,831,708
<b>J. <u>Hospital Net Revenue Payer Mix Percentage</u></b>				
1	Non-Government Net Revenue Payer Mix Percentage	66.7%	61.0%	64.6%

NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
2	Medicare Net Revenue Payer Mix Percentage	27.2%	33.4%	31.4%
3	Medicaid Net Revenue Payer Mix Percentage	2.7%	2.8%	3.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.9%	0.8%	0.5%
5	Uninsured Net Revenue Payer Mix Percentage	2.4%	2.0%	0.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$53,907,191	\$51,880,522	\$55,611,127
9	Medicare Net Revenue (Payments)	\$22,011,415	\$28,459,792	\$27,030,405
10	Medicaid Net Revenue (Payments)	\$2,179,594	\$2,362,190	\$2,744,639
11	Other Medical Assistance Net Revenue (Payments)	\$727,954	\$653,406	\$391,157
12	Uninsured Net Revenue (Payments)	\$1,948,897	\$1,666,754	\$250,631
13	CHAMPUS / TRICARE Net Revenue Payments)	\$105,324	\$71,099	\$78,229
14	Total Net Revenue (Payments)	\$80,880,375	\$85,093,763	\$86,106,188
<b>K.</b>	<b><u>Discharges</u></b>			
1	Non-Government (Including Self Pay / Uninsured)	1,437	1,513	1,285
2	Medicare	1,220	1,290	1,248
3	Medical Assistance	182	228	235
4	Medicaid	159	196	208
5	Other Medical Assistance	23	32	27
6	CHAMPUS / TRICARE	6	1	6
7	Uninsured (Included In Non-Government)	70	82	60
8	Total	2,845	3,032	2,774
<b>L.</b>	<b><u>Case Mix Index</u></b>			
1	Non-Government (Including Self Pay / Uninsured)	1.088000	1.124200	1.138300
2	Medicare	1.427000	1.525100	1.563400
3	Medical Assistance	0.757815	0.910108	0.781677
4	Medicaid	0.718400	0.823400	0.753000
5	Other Medical Assistance	1.030300	1.441200	1.002600
6	CHAMPUS / TRICARE	0.988800	1.990000	0.628300
7	Uninsured (Included In Non-Government)	1.188800	1.028200	1.088400
8	Total Case Mix Index	1.212039	1.278953	1.298234
<b>M.</b>	<b><u>Emergency Department Visits</u></b>			
1	Emergency Room - Treated and Admitted	1,659	1,794	1,957
2	Emergency Room - Treated and Discharged	17,650	17,759	17,189
3	Total Emergency Room Visits	19,309	19,553	19,146

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I.</b>	<b>MEDICARE MANAGED CARE</b>				
<b>A.</b>	<b>ANTHEM - MEDICARE BLUE CONNECTICUT</b>				
1	Inpatient Charges	\$32,211	\$34,591	\$2,380	7%
2	Inpatient Payments	\$10,873	\$12,582	\$1,709	16%
3	Outpatient Charges	\$36,799	\$85,723	\$48,924	133%
4	Outpatient Payments	\$15,648	\$25,502	\$9,854	63%
5	Discharges	2	1	(1)	-50%
6	Patient Days	11	4	(7)	-64%
7	Outpatient Visits (Excludes ED Visits)	18	32	14	78%
8	Emergency Department Outpatient Visits	8	14	6	75%
9	Emergency Department Inpatient Admissions	1	1	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$69,010</b>	<b>\$120,314</b>	<b>\$51,304</b>	<b>74%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$26,521</b>	<b>\$38,084</b>	<b>\$11,563</b>	<b>44%</b>
<b>B.</b>	<b>CIGNA HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$1,062	\$0	(\$1,062)	-100%
4	Outpatient Payments	\$452	\$0	(\$452)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,062</b>	<b>\$0</b>	<b>(\$1,062)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$452</b>	<b>\$0</b>	<b>(\$452)</b>	<b>-100%</b>
<b>C.</b>	<b>CONNECTICARE, INC.</b>				
1	Inpatient Charges	\$151,530	\$398,940	\$247,410	163%
2	Inpatient Payments	\$51,150	\$145,106	\$93,956	184%
3	Outpatient Charges	\$52,692	\$921,010	\$868,318	1648%
4	Outpatient Payments	\$22,406	\$273,992	\$251,586	1123%
5	Discharges	6	11	5	83%
6	Patient Days	24	32	8	33%
7	Outpatient Visits (Excludes ED Visits)	44	324	280	636%
8	Emergency Department Outpatient Visits	3	23	20	667%
9	Emergency Department Inpatient Admissions	5	6	1	20%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$204,222</b>	<b>\$1,319,950</b>	<b>\$1,115,728</b>	<b>546%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$73,556</b>	<b>\$419,098</b>	<b>\$345,542</b>	<b>470%</b>

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$708,356	\$624,595	(\$83,761)	-12%
2	Inpatient Payments	\$239,110	\$227,183	(\$11,927)	-5%
3	Outpatient Charges	\$2,274,764	\$1,665,352	(\$609,412)	-27%
4	Outpatient Payments	\$967,303	\$495,427	(\$471,876)	-49%
5	Discharges	24	24	0	0%
6	Patient Days	100	89	(11)	-11%
7	Outpatient Visits (Excludes ED Visits)	779	806	27	3%
8	Emergency Department Outpatient Visits	43	31	(12)	-28%
9	Emergency Department Inpatient Admissions	17	17	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,983,120</b>	<b>\$2,289,947</b>	<b>(\$693,173)</b>	<b>-23%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,206,413</b>	<b>\$722,610</b>	<b>(\$483,803)</b>	<b>-40%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$553,488	\$435,645	(\$117,843)	-21%
2	Inpatient Payments	\$186,833	\$158,456	(\$28,377)	-15%
3	Outpatient Charges	\$139,822	\$1,022,628	\$882,806	631%
4	Outpatient Payments	\$59,457	\$304,223	\$244,766	412%
5	Discharges	16	19	3	19%
6	Patient Days	62	65	3	5%
7	Outpatient Visits (Excludes ED Visits)	101	460	359	355%
8	Emergency Department Outpatient Visits	22	44	22	100%
9	Emergency Department Inpatient Admissions	13	14	1	8%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$693,310</b>	<b>\$1,458,273</b>	<b>\$764,963</b>	<b>110%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$246,290</b>	<b>\$462,679</b>	<b>\$216,389</b>	<b>88%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$0	\$22,237	\$22,237	0%
2	Inpatient Payments	\$0	\$8,088	\$8,088	0%
3	Outpatient Charges	\$8,960	\$20,806	\$11,846	132%
4	Outpatient Payments	\$3,810	\$6,190	\$2,380	62%
5	Discharges	0	1	1	0%
6	Patient Days	0	6	6	0%
7	Outpatient Visits (Excludes ED Visits)	9	11	2	22%
8	Emergency Department Outpatient Visits	5	5	0	0%
9	Emergency Department Inpatient Admissions	0	1	1	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$8,960</b>	<b>\$43,043</b>	<b>\$34,083</b>	<b>380%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,810</b>	<b>\$14,278</b>	<b>\$10,468</b>	<b>275%</b>

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$171,469	\$263,379	\$91,910	54%
2	Inpatient Payments	\$57,880	\$95,798	\$37,918	66%
3	Outpatient Charges	\$330,200	\$323,081	(\$7,119)	-2%
4	Outpatient Payments	\$140,412	\$96,114	(\$44,298)	-32%
5	Discharges	7	8	1	14%
6	Patient Days	27	37	10	37%
7	Outpatient Visits (Excludes ED Visits)	855	796	(59)	-7%
8	Emergency Department Outpatient Visits	14	14	0	0%
9	Emergency Department Inpatient Admissions	6	7	1	17%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$501,669</b>	<b>\$586,460</b>	<b>\$84,791</b>	<b>17%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$198,292</b>	<b>\$191,912</b>	<b>(\$6,380)</b>	<b>-3%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$7,869	\$7,869	0%
4	Outpatient Payments	\$0	\$2,341	\$2,341	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	2	2	0%
8	Emergency Department Outpatient Visits	0	1	1	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$7,869</b>	<b>\$7,869</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$2,341</b>	<b>\$2,341</b>	<b>0%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J. HUMANA</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$1,617,054</b>	<b>\$1,779,387</b>	<b>\$162,333</b>	<b>10%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$545,846</b>	<b>\$647,213</b>	<b>\$101,367</b>	<b>19%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$2,844,299</b>	<b>\$4,046,469</b>	<b>\$1,202,170</b>	<b>42%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$1,209,488</b>	<b>\$1,203,789</b>	<b>(\$5,699)</b>	<b>0%</b>
	<b>TOTAL DISCHARGES</b>	<b>55</b>	<b>64</b>	<b>9</b>	<b>16%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>224</b>	<b>233</b>	<b>9</b>	<b>4%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>1,806</b>	<b>2,431</b>	<b>625</b>	<b>35%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>96</b>	<b>132</b>	<b>36</b>	<b>38%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>42</b>	<b>46</b>	<b>4</b>	<b>10%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$4,461,353</b>	<b>\$5,825,856</b>	<b>\$1,364,503</b>	<b>31%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,755,334</b>	<b>\$1,851,002</b>	<b>\$95,668</b>	<b>5%</b>

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$565,762	\$253,902	(\$311,860)	-55%
2	Inpatient Payments	\$174,443	\$95,154	(\$79,289)	-45%
3	Outpatient Charges	\$1,834,881	\$580,992	(\$1,253,889)	-68%
4	Outpatient Payments	\$658,700	\$185,668	(\$473,032)	-72%
5	Discharges	77	38	(39)	-51%
6	Patient Days	178	74	(104)	-58%
7	Outpatient Visits (Excludes ED Visits)	1,345	383	(962)	-72%
8	Emergency Department Outpatient Visits	848	235	(613)	-72%
9	Emergency Department Inpatient Admissions	19	7	(12)	-63%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,400,643</b>	<b>\$834,894</b>	<b>(\$1,565,749)</b>	<b>-65%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$833,143</b>	<b>\$280,822</b>	<b>(\$552,321)</b>	<b>-66%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$105,090	\$517,648	\$412,558	393%
2	Inpatient Payments	\$32,402	\$193,998	\$161,596	499%
3	Outpatient Charges	\$156,339	\$1,595,693	\$1,439,354	921%
4	Outpatient Payments	\$56,124	\$509,936	\$453,812	809%
5	Discharges	11	65	54	491%
6	Patient Days	27	168	141	522%
7	Outpatient Visits (Excludes ED Visits)	134	1,183	1,049	783%
8	Emergency Department Outpatient Visits	128	854	726	567%
9	Emergency Department Inpatient Admissions	3	9	6	200%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$261,429</b>	<b>\$2,113,341</b>	<b>\$1,851,912</b>	<b>708%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$88,526</b>	<b>\$703,934</b>	<b>\$615,408</b>	<b>695%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$263,975	\$0	(\$263,975)	-100%
2	Inpatient Payments	\$81,391	\$0	(\$81,391)	-100%
3	Outpatient Charges	\$955,060	\$0	(\$955,060)	-100%
4	Outpatient Payments	\$342,854	\$0	(\$342,854)	-100%
5	Discharges	30	0	(30)	-100%
6	Patient Days	77	0	(77)	-100%
7	Outpatient Visits (Excludes ED Visits)	523	0	(523)	-100%
8	Emergency Department Outpatient Visits	272	0	(272)	-100%
9	Emergency Department Inpatient Admissions	4	0	(4)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,219,035</b>	<b>\$0</b>	<b>(\$1,219,035)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$424,245</b>	<b>\$0</b>	<b>(\$424,245)</b>	<b>-100%</b>

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$67,444	\$0	(\$67,444)	-100%
2	Inpatient Payments	\$20,795	\$0	(\$20,795)	-100%
3	Outpatient Charges	\$126,280	\$0	(\$126,280)	-100%
4	Outpatient Payments	\$45,333	\$0	(\$45,333)	-100%
5	Discharges	8	0	(8)	-100%
6	Patient Days	24	0	(24)	-100%
7	Outpatient Visits (Excludes ED Visits)	95	0	(95)	-100%
8	Emergency Department Outpatient Visits	52	0	(52)	-100%

**NEW MILFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	1	0	(1)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$193,724</b>	<b>\$0</b>	<b>(\$193,724)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$66,128</b>	<b>\$0</b>	<b>(\$66,128)</b>	<b>-100%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$109,185	\$109,185	0%
2	Inpatient Payments	\$0	\$40,919	\$40,919	0%
3	Outpatient Charges	\$0	\$226,702	\$226,702	0%
4	Outpatient Payments	\$0	\$72,447	\$72,447	0%
5	Discharges	0	9	9	0%
6	Patient Days	0	28	28	0%
7	Outpatient Visits (Excludes ED Visits)	0	124	124	0%
8	Emergency Department Outpatient Visits	0	90	90	0%
9	Emergency Department Inpatient Admissions	0	2	2	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$335,887</b>	<b>\$335,887</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$113,366</b>	<b>\$113,366</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$0	\$301,951	\$301,951	0%
2	Inpatient Payments	\$0	\$113,161	\$113,161	0%
3	Outpatient Charges	\$0	\$764,048	\$764,048	0%
4	Outpatient Payments	\$0	\$244,167	\$244,167	0%
5	Discharges	0	24	24	0%
6	Patient Days	0	50	50	0%
7	Outpatient Visits (Excludes ED Visits)	0	578	578	0%
8	Emergency Department Outpatient Visits	0	337	337	0%
9	Emergency Department Inpatient Admissions	0	2	2	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$1,065,999</b>	<b>\$1,065,999</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$357,328</b>	<b>\$357,328</b>	<b>0%</b>
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$1,002,271</b>	<b>\$1,182,686</b>	<b>\$180,415</b>	<b>18%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$309,031</b>	<b>\$443,232</b>	<b>\$134,201</b>	<b>43%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$3,072,560</b>	<b>\$3,167,435</b>	<b>\$94,875</b>	<b>3%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$1,103,011</b>	<b>\$1,012,218</b>	<b>(\$90,793)</b>	<b>-8%</b>
	<b>TOTAL DISCHARGES</b>	<b>126</b>	<b>136</b>	<b>10</b>	<b>8%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>306</b>	<b>320</b>	<b>14</b>	<b>5%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>2,097</b>	<b>2,268</b>	<b>171</b>	<b>8%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>1,300</b>	<b>1,516</b>	<b>216</b>	<b>17%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>27</b>	<b>20</b>	<b>(7)</b>	<b>-26%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$4,074,831</b>	<b>\$4,350,121</b>	<b>\$275,290</b>	<b>7%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,412,042</b>	<b>\$1,455,450</b>	<b>\$43,408</b>	<b>3%</b>

**NEW MILFORD HOSPITAL  
 TWELVE MONTHS ACTUAL FILING  
 FISCAL YEAR 2009  
 REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

THE NEW MILFORD HOSPITAL, INC					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	<b><u>ASSETS</u></b>				
A.	<b><u>Current Assets:</u></b>				
1	Cash and Cash Equivalents	\$5,649,889	\$3,470,654	(\$2,179,235)	-39%
2	Short Term Investments	\$830,159	\$195,420	(\$634,739)	-76%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$11,674,918	\$11,329,197	(\$345,721)	-3%
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,135,356	\$1,095,852	(\$39,504)	-3%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$2,090,275	\$2,035,077	(\$55,198)	-3%
8	Prepaid Expenses	\$2,342,535	\$3,007,450	\$664,915	28%
9	Other Current Assets	\$3,669,062	\$2,368,603	(\$1,300,459)	-35%
	<b>Total Current Assets</b>	<b>\$27,392,194</b>	<b>\$23,502,253</b>	<b>(\$3,889,941)</b>	<b>-14%</b>
B.	<b><u>Noncurrent Assets Whose Use is Limited:</u></b>				
1	Held by Trustee	\$3,760,930	\$3,654,449	(\$106,481)	-3%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$3,760,930</b>	<b>\$3,654,449</b>	<b>(\$106,481)</b>	<b>-3%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$7,337,692	\$9,767,460	\$2,429,768	33%
7	Other Noncurrent Assets	\$1,799,250	\$1,155,832	(\$643,418)	-36%
C.	<b><u>Net Fixed Assets:</u></b>				
1	Property, Plant and Equipment	\$90,226,218	\$92,754,055	\$2,527,837	3%
2	Less: Accumulated Depreciation	\$55,868,113	\$60,856,636	\$4,988,523	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$34,358,105</b>	<b>\$31,897,419</b>	<b>(\$2,460,686)</b>	<b>-7%</b>
3	Construction in Progress	\$0	\$0	\$0	0%
	<b>Total Net Fixed Assets</b>	<b>\$34,358,105</b>	<b>\$31,897,419</b>	<b>(\$2,460,686)</b>	<b>-7%</b>
	<b>Total Assets</b>	<b>\$74,648,171</b>	<b>\$69,977,413</b>	<b>(\$4,670,758)</b>	<b>-6%</b>

<b>THE NEW MILFORD HOSPITAL, INC</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>II. <u>LIABILITIES AND NET ASSETS</u></b>					
<b>A. <u>Current Liabilities:</u></b>					
1	Accounts Payable and Accrued Expenses	\$6,803,874	\$7,819,842	\$1,015,968	15%
2	Salaries, Wages and Payroll Taxes	\$2,823,714	\$2,986,189	\$162,475	6%
3	Due To Third Party Payers	\$1,302,333	\$2,389,775	\$1,087,442	83%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,332,761	\$1,662,730	\$329,969	25%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$3,205,356	\$1,095,852	(\$2,109,504)	-66%
	<b>Total Current Liabilities</b>	<b>\$15,468,038</b>	<b>\$15,954,388</b>	<b>\$486,350</b>	<b>3%</b>
<b>B. <u>Long Term Debt:</u></b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$9,206,726	\$7,543,997	(\$1,662,729)	-18%
	<b>Total Long Term Debt</b>	<b>\$9,206,726</b>	<b>\$7,543,997</b>	<b>(\$1,662,729)</b>	<b>-18%</b>
3	Accrued Pension Liability	\$4,845,380	\$20,426,162	\$15,580,782	322%
4	Other Long Term Liabilities	\$1,563,146	\$2,284,464	\$721,318	46%
	<b>Total Long Term Liabilities</b>	<b>\$15,615,252</b>	<b>\$30,254,623</b>	<b>\$14,639,371</b>	<b>94%</b>
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
<b>C. <u>Net Assets:</u></b>					
1	Unrestricted Net Assets or Equity	\$29,244,007	\$9,579,333	(\$19,664,674)	-67%
2	Temporarily Restricted Net Assets	\$10,559,944	\$10,534,620	(\$25,324)	0%
3	Permanently Restricted Net Assets	\$3,760,930	\$3,654,449	(\$106,481)	-3%
	<b>Total Net Assets</b>	<b>\$43,564,881</b>	<b>\$23,768,402</b>	<b>(\$19,796,479)</b>	<b>-45%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$74,648,171</b>	<b>\$69,977,413</b>	<b>(\$4,670,758)</b>	<b>-6%</b>

THE NEW MILFORD HOSPITAL, INC					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$218,177,759	\$234,092,596	\$15,914,837	7%
2	Less: Allowances	\$122,298,071	\$138,119,122	\$15,821,051	13%
3	Less: Charity Care	\$4,069,072	\$3,386,224	(\$682,848)	-17%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$91,810,616</b>	<b>\$92,587,250</b>	<b>\$776,634</b>	<b>1%</b>
5	Other Operating Revenue	\$6,781,593	\$5,129,602	(\$1,651,991)	-24%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$98,592,209</b>	<b>\$97,716,852</b>	<b>(\$875,357)</b>	<b>-1%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$40,694,361	\$42,871,480	\$2,177,119	5%
2	Fringe Benefits	\$11,864,241	\$13,348,463	\$1,484,222	13%
3	Physicians Fees	\$1,670,354	\$1,429,887	(\$240,467)	-14%
4	Supplies and Drugs	\$14,353,448	\$14,272,379	(\$81,069)	-1%
5	Depreciation and Amortization	\$4,979,589	\$4,988,522	\$8,933	0%
6	Bad Debts	\$3,761,404	\$3,220,173	(\$541,231)	-14%
7	Interest	\$730,698	\$675,584	(\$55,114)	-8%
8	Malpractice	\$2,235,043	\$2,375,725	\$140,682	6%
9	Other Operating Expenses	\$19,959,020	\$20,034,860	\$75,840	0%
	<b>Total Operating Expenses</b>	<b>\$100,248,158</b>	<b>\$103,217,073</b>	<b>\$2,968,915</b>	<b>3%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$1,655,949)</b>	<b>(\$5,500,221)</b>	<b>(\$3,844,272)</b>	<b>232%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$229,389	\$169,309	(\$60,080)	-26%
2	Gifts, Contributions and Donations	\$248,631	\$173,032	(\$75,599)	-30%
3	Other Non-Operating Gains/(Losses)	\$26,984	(\$7,190)	(\$34,174)	-127%
	<b>Total Non-Operating Revenue</b>	<b>\$505,004</b>	<b>\$335,151</b>	<b>(\$169,853)</b>	<b>-34%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>(\$1,150,945)</b>	<b>(\$5,165,070)</b>	<b>(\$4,014,125)</b>	<b>349%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>(\$1,150,945)</b>	<b>(\$5,165,070)</b>	<b>(\$4,014,125)</b>	<b>349%</b>

## THE NEW MILFORD HOSPITAL, INC

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2009

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2007</b>	<b>FY 2008</b>	<b>FY 2009</b>
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$87,023,873	\$91,810,616	\$92,587,250
2	Other Operating Revenue	5,075,018	6,781,593	5,129,602
3	Total Operating Revenue	\$92,098,891	\$98,592,209	\$97,716,852
4	Total Operating Expenses	91,556,804	100,248,158	103,217,073
5	Income/(Loss) From Operations	\$542,087	(\$1,655,949)	(\$5,500,221)
6	Total Non-Operating Revenue	357,187	505,004	335,151
7	Excess/(Deficiency) of Revenue Over Expenses	\$899,274	(\$1,150,945)	(\$5,165,070)
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	0.59%	-1.67%	-5.61%
2	Parent Corporation Non-Operating Margin	0.39%	0.51%	0.34%
3	Parent Corporation Total Margin	0.97%	-1.16%	-5.27%
4	Income/(Loss) From Operations	\$542,087	(\$1,655,949)	(\$5,500,221)
5	Total Operating Revenue	\$92,098,891	\$98,592,209	\$97,716,852
6	Total Non-Operating Revenue	\$357,187	\$505,004	\$335,151
7	Total Revenue	\$92,456,078	\$99,097,213	\$98,052,003
8	Excess/(Deficiency) of Revenue Over Expenses	\$899,274	(\$1,150,945)	(\$5,165,070)
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$33,871,710	\$29,244,007	\$9,579,333
2	Parent Corporation Total Net Assets	\$47,477,655	\$43,564,881	\$23,768,402
3	Parent Corporation Change in Total Net Assets	\$47,477,655	(\$3,912,774)	(\$19,796,479)
4	Parent Corporation Change in Total Net Assets %	0.0%	-8.2%	-45.4%

THE NEW MILFORD HOSPITAL, INC				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009
<b>D. Liquidity Measures Summary</b>				
<b>1</b>	<b>Current Ratio</b>	<b>1.59</b>	<b>1.77</b>	<b>1.47</b>
2	Total Current Assets	\$21,020,771	\$27,392,194	\$23,502,253
3	Total Current Liabilities	\$13,235,133	\$15,468,038	\$15,954,388
<b>4</b>	<b>Days Cash on Hand</b>	<b>24</b>	<b>25</b>	<b>14</b>
5	Cash and Cash Equivalents	\$4,863,680	\$5,649,889	\$3,470,654
6	Short Term Investments	796,347	830,159	195,420
7	Total Cash and Short Term Investments	\$5,660,027	\$6,480,048	\$3,666,074
8	Total Operating Expenses	\$91,556,804	\$100,248,158	\$103,217,073
9	Depreciation Expense	\$4,908,821	\$4,979,589	\$4,988,522
10	Operating Expenses less Depreciation Expense	\$86,647,983	\$95,268,569	\$98,228,551
<b>11</b>	<b>Days Revenue in Patient Accounts Receivable</b>	<b>37</b>	<b>41</b>	<b>35</b>
12	Net Patient Accounts Receivable	\$ 10,557,397	\$ 11,674,918	\$ 11,329,197
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,796,283	\$1,302,333	\$2,389,775
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 8,761,114	\$ 10,372,585	\$ 8,939,422
16	Total Net Patient Revenue	\$87,023,873	\$91,810,616	\$92,587,250
<b>17</b>	<b>Average Payment Period</b>	<b>56</b>	<b>59</b>	<b>59</b>
18	Total Current Liabilities	\$13,235,133	\$15,468,038	\$15,954,388
19	Total Operating Expenses	\$91,556,804	\$100,248,158	\$103,217,073
20	Depreciation Expense	\$4,908,821	\$4,979,589	\$4,988,522
21	Total Operating Expenses less Depreciation Expense	\$86,647,983	\$95,268,569	\$98,228,551

<b>THE NEW MILFORD HOSPITAL, INC</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b><u>FY 2007</u></b>	<b><u>FY 2008</u></b>	<b><u>FY 2009</u></b>
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>65.8</b>	<b>58.4</b>	<b>34.0</b>
2	Total Net Assets	\$47,477,655	\$43,564,881	\$23,768,402
3	Total Assets	\$72,201,372	\$74,648,171	\$69,977,413
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>24.4</b>	<b>15.5</b>	<b>(0.8)</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$899,274	(\$1,150,945)	(\$5,165,070)
6	Depreciation Expense	\$4,908,821	\$4,979,589	\$4,988,522
7	Excess of Revenues Over Expenses and Depreciation Expense	\$5,808,095	\$3,828,644	(\$176,548)
8	Total Current Liabilities	\$13,235,133	\$15,468,038	\$15,954,388
9	Total Long Term Debt	\$10,537,923	\$9,206,726	\$7,543,997
10	Total Current Liabilities and Total Long Term Debt	\$23,773,056	\$24,674,764	\$23,498,385
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>18.2</b>	<b>17.4</b>	<b>24.1</b>
12	Total Long Term Debt	\$10,537,923	\$9,206,726	\$7,543,997
13	Total Net Assets	\$47,477,655	\$43,564,881	\$23,768,402
14	Total Long Term Debt and Total Net Assets	\$58,015,578	\$52,771,607	\$31,312,399

NEW MILFORD HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2009						
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
		PATIENT	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
					BEDS (A)	BEDS
1	Adult Medical/Surgical	7,202	21	63	94.0%	31.3%
2	ICU/CCU (Excludes Neonatal ICU)	1,040	4	8	71.2%	35.6%
3	Psychiatric: Ages 0 to 17	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0	0	0	0.0%	0.0%
	<b>TOTAL PSYCHIATRIC</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0%</b>	<b>0.0%</b>
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	836	3	8	76.3%	28.6%
7	Newborn	717	3	10	65.5%	19.6%
8	Neonatal ICU	0	0	0	0.0%	0.0%
9	Pediatric	79	1	6	21.6%	3.6%
10	Other	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>9,157</b>	<b>29</b>	<b>85</b>	<b>86.5%</b>	<b>29.5%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>9,874</b>	<b>32</b>	<b>95</b>	<b>84.5%</b>	<b>28.5%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>9,874</b>	<b>32</b>	<b>95</b>	<b>84.5%</b>	<b>28.5%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>11,785</b>	<b>37</b>	<b>95</b>	<b>87.3%</b>	<b>34.0%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-1,911</b>	<b>-5</b>	<b>0</b>	<b>-2.7%</b>	<b>-5.5%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-16%</b>	<b>-14%</b>	<b>0%</b>	<b>-3%</b>	<b>-16%</b>
	Total Licensed Beds and Bassinets	95				
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>						

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	1,717	1,452	-265	-15%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,701	4,922	221	5%
3	Emergency Department Scans	2,290	2,293	3	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>8,708</b>	<b>8,667</b>	<b>-41</b>	<b>0%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	164	178	14	9%
2	Outpatient Scans (Excluding Emergency Department Scans)	2,121	2,074	-47	-2%
3	Emergency Department Scans	32	9	-23	-72%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>2,317</b>	<b>2,261</b>	<b>-56</b>	<b>-2%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	1	0	-1	-100%
2	Outpatient Scans (Excluding Emergency Department Scans)	285	305	20	7%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>286</b>	<b>305</b>	<b>19</b>	<b>7%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Linear Accelerator Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	68	35	-33	-49%
2	Outpatient Procedures	75	33	-42	-56%
	<b>Total Cardiac Catheterization Procedures</b>	<b>143</b>	<b>68</b>	<b>-75</b>	<b>-52%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	10	10	0	0%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>10</b>	<b>10</b>	<b>0</b>	<b>0%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	1,003	881	-122	-12%
2	Outpatient Surgical Procedures	2,335	2,461	126	5%
	<b>Total Surgical Procedures</b>	<b>3,338</b>	<b>3,342</b>	<b>4</b>	<b>0%</b>

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J.</b>	<b><u>Endoscopy Procedures</u></b>				
1	Inpatient Endoscopy Procedures	95	121	26	27%
2	Outpatient Endoscopy Procedures	2,345	2,364	19	1%
	<b>Total Endoscopy Procedures</b>	<b>2,440</b>	<b>2,485</b>	<b>45</b>	<b>2%</b>
<b>K.</b>	<b><u>Hospital Emergency Room Visits</u></b>				
1	Emergency Room Visits: Treated and Admitted	1,794	1,957	163	9%
2	Emergency Room Visits: Treated and Discharged	17,759	17,189	-570	-3%
	<b>Total Emergency Room Visits</b>	<b>19,553</b>	<b>19,146</b>	<b>-407</b>	<b>-2%</b>
<b>L.</b>	<b><u>Hospital Clinic Visits</u></b>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	5,686	7,012	1,326	23%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	0	0	0	0%
	<b>Total Hospital Clinic Visits</b>	<b>5,686</b>	<b>7,012</b>	<b>1,326</b>	<b>23%</b>
<b>M.</b>	<b><u>Other Hospital Outpatient Visits</u></b>				
1	Rehabilitation (PT/OT/ST)	723	767	44	6%
2	Cardiology	830	723	-107	-13%
3	Chemotherapy	1,685	1,600	-85	-5%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	77,633	82,539	4,906	6%
	<b>Total Other Hospital Outpatient Visits</b>	<b>80,871</b>	<b>85,629</b>	<b>4,758</b>	<b>6%</b>
<b>N.</b>	<b><u>Hospital Full Time Equivalent Employees</u></b>				
1	Total Nursing FTEs	160.9	154.5	-6.4	-4%
2	Total Physician FTEs	20.7	24.4	3.7	18%
3	Total Non-Nursing and Non-Physician FTEs	306.5	309.9	3.4	1%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>488.1</b>	<b>488.8</b>	<b>0.7</b>	<b>0%</b>

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>A. Outpatient Surgical Procedures</b>					
1	The New Milford Hospital Inc	2,335	2,461	126	5%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>2,335</b>	<b>2,461</b>	<b>126</b>	<b>5%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	The New Milford Hospital Inc	2,345	2,364	19	1%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>2,345</b>	<b>2,364</b>	<b>19</b>	<b>1%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	The New Milford Hospital Inc	17,759	17,189	-570	-3%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>17,759</b>	<b>17,189</b>	<b>-570</b>	<b>-3%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$40,621,318	\$40,456,850	(\$164,468)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,281,920	\$13,356,718	(\$925,202)	-6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.16%	33.01%	-2.14%	-6%
4	DISCHARGES	1,290	1,248	(42)	-3%
5	CASE MIX INDEX (CMI)	1.52510	1.56340	0.03830	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,967.37900	1,951.12320	(16.25580)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,259.36	\$6,845.66	(\$413.71)	-6%
8	PATIENT DAYS	6,267	5,370	(897)	-14%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,278.91	\$2,487.28	\$208.38	9%
10	AVERAGE LENGTH OF STAY	4.9	4.3	(0.6)	-11%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$56,413,656	\$63,948,287	\$7,534,631	13%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,177,872	\$13,673,687	(\$504,185)	-4%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.13%	21.38%	-3.75%	-15%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	138.88%	158.07%	19.19%	14%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,791.51293	1,972.65635	181.14343	10%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,913.91	\$6,931.61	(\$982.30)	-12%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$97,034,974	\$104,405,137	\$7,370,163	8%
18	TOTAL ACCRUED PAYMENTS	\$28,459,792	\$27,030,405	(\$1,429,387)	-5%
19	TOTAL ALLOWANCES	\$68,575,182	\$77,374,732	\$8,799,550	13%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$31,498,384	\$29,547,592	(\$1,950,792)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,164,078	\$11,969,482	(\$1,194,596)	-9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.79%	40.51%	-1.28%	-3%
4	DISCHARGES	1,513	1,285	(228)	-15%
5	CASE MIX INDEX (CMI)	1.12420	1.13830	0.01410	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,700.91460	1,462.71550	(238.19910)	-14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,739.41	\$8,183.06	\$443.64	6%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$480.05)	(\$1,337.40)	(\$857.35)	179%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$816,520)	(\$1,956,235)	(\$1,139,715)	140%
10	PATIENT DAYS	4,657	3,858	(799)	-17%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,826.73	\$3,102.51	\$275.78	10%
12	AVERAGE LENGTH OF STAY	3.1	3.0	(0.1)	-2%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$76,089,652	\$85,651,437	\$9,561,785	13%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$40,383,198	\$43,892,276	\$3,509,078	9%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	53.07%	51.25%	-1.83%	-3%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	241.57%	289.88%	48.31%	20%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,654.90634	3,724.90918	70.00283	2%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$11,049.04	\$11,783.45	\$734.41	7%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$3,135.13)	(\$4,851.84)	(\$1,716.71)	55%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$11,458,598)	(\$18,072,654)	(\$6,614,055)	58%
<b>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</b>					
21	TOTAL ACCRUED CHARGES	\$107,588,036	\$115,199,029	\$7,610,993	7%
22	TOTAL ACCRUED PAYMENTS	\$53,547,276	\$55,861,758	\$2,314,482	4%
23	TOTAL ALLOWANCES	\$54,040,760	\$59,337,271	\$5,296,511	10%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$12,275,118)	(\$20,028,889)	(\$7,753,770)	63%
<b>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$102,378,537	\$110,596,764	\$8,218,227	8%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$55,727,275	\$56,961,715	\$1,234,440	2%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$46,651,262	\$53,635,049	\$6,983,787	15%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.57%	48.50%	2.93%	

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>C.</b>	<b>UNINSURED</b>				
	<b>UNINSURED INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$1,452,803	\$1,206,064	(\$246,739)	-17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$464,817	\$65,680	(\$399,137)	-86%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.99%	5.45%	-26.55%	-83%
4	DISCHARGES	82	60	(22)	-27%
5	CASE MIX INDEX (CMI)	1.02820	1.08840	0.06020	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	84.31240	65.30400	(19.00840)	-23%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,513.03	\$1,005.76	(\$4,507.27)	-82%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$2,226.38	\$7,177.30	\$4,950.92	222%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$1,746.33	\$5,839.90	\$4,093.57	234%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$147,237	\$381,369	\$234,131	159%
11	PATIENT DAYS	283	189	(94)	-33%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,642.46	\$347.51	(\$1,294.95)	-79%
13	AVERAGE LENGTH OF STAY	3.5	3.2	(0.3)	-9%
	<b>UNINSURED OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$3,756,696	\$3,396,201	(\$360,495)	-10%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,201,937	\$184,951	(\$1,016,986)	-85%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.99%	5.45%	-26.55%	-83%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	258.58%	281.59%	23.01%	9%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	212.03774	168.95626	(43.08149)	-20%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,668.50	\$1,094.67	(\$4,573.84)	-81%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,380.53	\$10,688.78	\$5,308.25	99%
21	MEDICARE - UNINSURED OP PMT / OPED	\$2,245.41	\$5,836.94	\$3,591.54	160%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$476,111	\$986,188	\$510,077	107%
	<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$5,209,499	\$4,602,265	(\$607,234)	-12%
24	TOTAL ACCRUED PAYMENTS	\$1,666,754	\$250,631	(\$1,416,123)	-85%
25	TOTAL ALLOWANCES	\$3,542,745	\$4,351,634	\$808,889	23%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$623,348	\$1,367,557	\$744,209	119%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$2,484,872	\$2,441,592	(\$43,280)	-2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$708,388	\$810,165	\$101,777	14%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	28.51%	33.18%	4.67%	16%
4	DISCHARGES	196	208	12	6%
5	CASE MIX INDEX (CMI)	0.82340	0.75300	(0.07040)	-9%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	161.38640	156.62400	(4.76240)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,389.39	\$5,172.67	\$783.28	18%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,350.02	\$3,010.38	(\$339.64)	-10%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,869.97	\$1,672.98	(\$1,196.99)	-42%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$463,175	\$262,029	(\$201,146)	-43%
11	PATIENT DAYS	675	554	(121)	-18%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,049.46	\$1,462.39	\$412.93	39%
13	AVERAGE LENGTH OF STAY	3.4	2.7	(0.8)	-23%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,117,350	\$6,989,617	\$1,872,267	37%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,653,802	\$1,934,474	\$280,672	17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.32%	27.68%	-4.64%	-14%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	205.94%	286.27%	80.33%	39%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	403.64276	595.44770	191.80493	48%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,097.19	\$3,248.77	(\$848.42)	-21%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,951.85	\$8,534.68	\$1,582.83	23%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,816.72	\$3,682.84	(\$133.88)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,540,590	\$2,192,938	\$652,347	42%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$7,602,222	\$9,431,209	\$1,828,987	24%
24	TOTAL ACCRUED PAYMENTS	\$2,362,190	\$2,744,639	\$382,449	16%
25	TOTAL ALLOWANCES	\$5,240,032	\$6,686,570	\$1,446,538	28%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,003,765	\$2,454,967	\$451,202	23%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>E.</b>	<b>OTHER MEDICAL ASSISTANCE (O.M.A.)</b>				
	<b>OTHER MEDICAL ASSISTANCE INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$1,175,579	\$495,189	(\$680,390)	-58%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$316,657	\$144,333	(\$172,324)	-54%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.94%	29.15%	2.21%	8%
4	DISCHARGES	32	27	(5)	-16%
5	CASE MIX INDEX (CMI)	1.44120	1.00260	(0.43860)	-30%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	46.11840	27.07020	(19.04820)	-41%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,866.17	\$5,331.80	(\$1,534.37)	-22%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$873.24	\$2,851.25	\$1,978.01	227%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$393.19	\$1,513.85	\$1,120.66	285%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$18,133	\$40,980	\$22,847	126%
11	PATIENT DAYS	183	75	(108)	-59%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,730.37	\$1,924.44	\$194.07	11%
13	AVERAGE LENGTH OF STAY	5.7	2.8	(2.9)	-51%
	<b>OTHER MEDICAL ASSISTANCE OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,250,168	\$1,022,934	(\$227,234)	-18%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$336,749	\$246,824	(\$89,925)	-27%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.94%	24.13%	-2.81%	-10%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	106.34%	206.57%	100.23%	94%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	34.03036	55.77510	21.74474	64%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,895.55	\$4,425.34	(\$5,470.20)	-55%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$1,153.49	\$7,358.11	\$6,204.61	538%
21	MEDICARE - O.M.A. OP PMT / CMAD	(\$1,981.64)	\$2,506.27	\$4,487.90	-226%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$67,436)	\$139,787	\$207,223	-307%
	<b>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$2,425,747	\$1,518,123	(\$907,624)	-37%
24	TOTAL ACCRUED PAYMENTS	\$653,406	\$391,157	(\$262,249)	-40%
25	TOTAL ALLOWANCES	\$1,772,341	\$1,126,966	(\$645,375)	-36%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	(\$49,303)	\$180,768	\$230,070	-467%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>F.</b>	<b>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>				
	<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$3,660,451	\$2,936,781	(\$723,670)	-20%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,025,045	\$954,498	(\$70,547)	-7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	28.00%	32.50%	4.50%	16%
4	DISCHARGES	228	235	7	3%
5	CASE MIX INDEX (CMI)	0.91011	0.78168	(0.12843)	-14%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	207.50480	183.69420	(23.81060)	-11%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,939.86	\$5,196.12	\$256.26	5%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,799.55	\$2,986.93	\$187.38	7%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,319.50	\$1,649.53	(\$669.97)	-29%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$481,308	\$303,009	(\$178,299)	-37%
11	PATIENT DAYS	858	629	(229)	-27%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,194.69	\$1,517.48	\$322.79	27%
13	AVERAGE LENGTH OF STAY	3.8	2.7	(1.1)	-29%
	<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$6,367,518	\$8,012,551	\$1,645,033	26%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,990,551	\$2,181,298	\$190,747	10%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.26%	27.22%	-4.04%	-13%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	173.95%	272.83%	98.88%	57%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	437.67312	651.22280	213.54968	49%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,548.03	\$3,349.54	(\$1,198.49)	-26%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,501.01	\$8,433.91	\$1,932.90	30%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,365.88	\$3,582.07	\$216.19	6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,473,155	\$2,332,725	\$859,571	58%
	<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$10,027,969	\$10,949,332	\$921,363	9%
24	TOTAL ACCRUED PAYMENTS	\$3,015,596	\$3,135,796	\$120,200	4%
25	TOTAL ALLOWANCES	\$7,012,373	\$7,813,536	\$801,163	11%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$43,454	\$65,802	\$22,348	51%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,441	\$15,679	\$2,238	17%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.93%	23.83%	-7.10%	-23%
4	DISCHARGES	1	6	5	500%
5	CASE MIX INDEX (CMI)	1.99000	0.62830	(1.36170)	-68%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1.99000	3.76980	1.77980	89%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,754.27	\$4,159.11	(\$2,595.16)	-38%
8	PATIENT DAYS	3	17	14	467%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,480.33	\$922.29	(\$3,558.04)	-79%
10	AVERAGE LENGTH OF STAY	3.0	2.8	(0.2)	-6%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$187,002	\$212,408	\$25,406	14%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$57,658	\$62,550	\$4,892	8%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$230,456	\$278,210	\$47,754	21%
14	TOTAL ACCRUED PAYMENTS	\$71,099	\$78,229	\$7,130	10%
15	TOTAL ALLOWANCES	\$159,357	\$199,981	\$40,624	25%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$5,244,828	\$3,580,001	(\$1,664,827)	-32%
2	TOTAL OPERATING EXPENSES	\$92,150,239	\$98,752,754	\$6,602,515	7%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$303,282	\$319,679	\$16,397	5%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$2,581,057	\$1,620,381	(\$960,676)	-37%
5	BAD DEBTS (CHARGES)	\$4,808,441	\$4,081,840	(\$726,601)	-15%
6	UNCOMPENSATED CARE (CHARGES)	\$7,389,498	\$5,702,221	(\$1,687,277)	-23%
7	COST OF UNCOMPENSATED CARE	\$2,936,695	\$2,134,973	(\$801,723)	-27%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$10,027,969	\$10,949,332	\$921,363	9%
9	TOTAL ACCRUED PAYMENTS	\$3,015,596	\$3,135,796	\$120,200	4%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$3,985,262	\$4,099,547	\$114,285	3%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$969,666	\$963,751	(\$5,915)	-1%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$75,823,607	\$73,007,025	(\$2,816,582)	-4%
2	TOTAL INPATIENT PAYMENTS	\$28,484,484	\$26,296,377	(\$2,188,107)	-8%
3	TOTAL INPATIENT PAYMENTS / CHARGES	37.57%	36.02%	-1.55%	-4%
4	TOTAL DISCHARGES	3,032	2,774	(258)	-9%
5	TOTAL CASE MIX INDEX	1.27895	1.29823	0.01928	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	3,877,78840	3,601,30270	(276,48570)	-7%
7	TOTAL OUTPATIENT CHARGES	\$139,057,828	\$157,824,683	\$18,766,855	13%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	183.40%	216.18%	32.78%	18%
9	TOTAL OUTPATIENT PAYMENTS	\$56,609,279	\$59,809,811	\$3,200,532	6%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.71%	37.90%	-2.81%	-7%
11	TOTAL CHARGES	\$214,881,435	\$230,831,708	\$15,950,273	7%
12	TOTAL PAYMENTS	\$85,093,763	\$86,106,188	\$1,012,425	1%
13	TOTAL PAYMENTS / TOTAL CHARGES	39.60%	37.30%	-2.30%	-6%
14	PATIENT DAYS	11,785	9,874	(1,911)	-16%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$44,325,223	\$43,459,433	(\$865,790)	-2%
2	INPATIENT PAYMENTS	\$15,320,406	\$14,326,895	(\$993,511)	-6%
3	GOVT. INPATIENT PAYMENTS / CHARGES	34.56%	32.97%	-1.60%	-5%
4	DISCHARGES	1,519	1,489	(30)	-2%
5	CASE MIX INDEX	1.43310	1.43626	0.00316	0%
6	CASE MIX ADJUSTED DISCHARGES	2,176,87380	2,138,58720	(38,28660)	-2%
7	OUTPATIENT CHARGES	\$62,968,176	\$72,173,246	\$9,205,070	15%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	142.06%	166.07%	24.01%	17%
9	OUTPATIENT PAYMENTS	\$16,226,081	\$15,917,535	(\$308,546)	-2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.77%	22.05%	-3.71%	-14%
11	TOTAL CHARGES	\$107,293,399	\$115,632,679	\$8,339,280	8%
12	TOTAL PAYMENTS	\$31,546,487	\$30,244,430	(\$1,302,057)	-4%
13	TOTAL PAYMENTS / CHARGES	29.40%	26.16%	-3.25%	-11%
14	PATIENT DAYS	7,128	6,016	(1,112)	-16%
15	TOTAL GOVERNMENT DEDUCTIONS	\$75,746,912	\$85,388,249	\$9,641,337	13%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	4.9	4.3	(0.6)	-11%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.0	(0.1)	-2%
3	UNINSURED	3.5	3.2	(0.3)	-9%
4	MEDICAID	3.4	2.7	(0.8)	-23%
5	OTHER MEDICAL ASSISTANCE	5.7	2.8	(2.9)	-51%
6	CHAMPUS / TRICARE	3.0	2.8	(0.2)	-6%
7	TOTAL AVERAGE LENGTH OF STAY	3.9	3.6	(0.3)	-8%

NEW MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$214,881,435	\$230,831,708	\$15,950,273	7%
2	TOTAL GOVERNMENT DEDUCTIONS	\$75,746,912	\$85,388,249	\$9,641,337	13%
3	UNCOMPENSATED CARE	\$7,389,498	\$5,702,221	(\$1,687,277)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$46,651,262	\$53,635,049	\$6,983,787	15%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$129,787,672	\$144,725,519	\$14,937,847	12%
7	TOTAL ACCRUED PAYMENTS	\$85,093,763	\$86,106,189	\$1,012,426	1%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$303,282	\$319,679	\$16,397	5%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$85,397,045	\$86,425,868	\$1,028,823	1%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3974147185	0.3744107287	(0.0230039898)	-6%
11	COST OF UNCOMPENSATED CARE	\$2,936,695	\$2,134,973	(\$801,723)	-27%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$969,666	\$963,751	(\$5,915)	-1%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,906,362	\$3,098,724	(\$807,638)	-21%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$1,540,590	\$2,192,938	\$652,347	42%
2	OTHER MEDICAL ASSISTANCE	(\$49,303)	\$180,768	\$230,070	-467%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$623,348	\$1,367,557	\$744,209	119%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$2,114,636	\$3,741,262	\$1,626,626	77%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,730,727	\$3,220,173	(\$510,554)	-13.69%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$89,127,772	\$89,646,041	\$518,269	0.58%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$214,881,435	\$230,831,708	\$15,950,273	7.42%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$410,301	\$904,175	\$493,874	120.37%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$7,799,799	\$6,606,397	(\$1,193,402)	-15.30%

NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$31,498,384	\$29,547,592	(\$1,950,792)
2	MEDICARE	\$40,621,318	40,456,850	(\$164,468)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,660,451	2,936,781	(\$723,670)
4	MEDICAID	\$2,484,872	2,441,592	(\$43,280)
5	OTHER MEDICAL ASSISTANCE	\$1,175,579	495,189	(\$680,390)
6	CHAMPUS / TRICARE	\$43,454	65,802	\$22,348
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,452,803	1,206,064	(\$246,739)
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$44,325,223</b>	<b>\$43,459,433</b>	<b>(\$865,790)</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$75,823,607</b>	<b>\$73,007,025</b>	<b>(\$2,816,582)</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$76,089,652	\$85,651,437	\$9,561,785
2	MEDICARE	\$56,413,656	63,948,287	\$7,534,631
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,367,518	8,012,551	\$1,645,033
4	MEDICAID	\$5,117,350	6,989,617	\$1,872,267
5	OTHER MEDICAL ASSISTANCE	\$1,250,168	1,022,934	(\$227,234)
6	CHAMPUS / TRICARE	\$187,002	212,408	\$25,406
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,756,696	3,396,201	(\$360,495)
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$62,968,176</b>	<b>\$72,173,246</b>	<b>\$9,205,070</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$139,057,828</b>	<b>\$157,824,683</b>	<b>\$18,766,855</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$107,588,036	\$115,199,029	\$7,610,993
2	TOTAL MEDICARE	\$97,034,974	\$104,405,137	\$7,370,163
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$10,027,969	\$10,949,332	\$921,363
4	TOTAL MEDICAID	\$7,602,222	\$9,431,209	\$1,828,987
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,425,747	\$1,518,123	(\$907,624)
6	TOTAL CHAMPUS / TRICARE	\$230,456	\$278,210	\$47,754
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,209,499	\$4,602,265	(\$607,234)
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$107,293,399</b>	<b>\$115,632,679</b>	<b>\$8,339,280</b>
	<b>TOTAL CHARGES</b>	<b>\$214,881,435</b>	<b>\$230,831,708</b>	<b>\$15,950,273</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,164,078	\$11,969,482	(\$1,194,596)
2	MEDICARE	\$14,281,920	13,356,718	(\$925,202)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,025,045	954,498	(\$70,547)
4	MEDICAID	\$708,388	810,165	\$101,777
5	OTHER MEDICAL ASSISTANCE	\$316,657	144,333	(\$172,324)
6	CHAMPUS / TRICARE	\$13,441	15,679	\$2,238
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$464,817	65,680	(\$399,137)
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$15,320,406</b>	<b>\$14,326,895</b>	<b>(\$993,511)</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$28,484,484</b>	<b>\$26,296,377</b>	<b>(\$2,188,107)</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$40,383,198	\$43,892,276	\$3,509,078
2	MEDICARE	\$14,177,872	13,673,687	(\$504,185)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,990,551	2,181,298	\$190,747
4	MEDICAID	\$1,653,802	1,934,474	\$280,672
5	OTHER MEDICAL ASSISTANCE	\$336,749	246,824	(\$89,925)
6	CHAMPUS / TRICARE	\$57,658	62,550	\$4,892
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,201,937	184,951	(\$1,016,986)
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$16,226,081</b>	<b>\$15,917,535</b>	<b>(\$308,546)</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$56,609,279</b>	<b>\$59,809,811</b>	<b>\$3,200,532</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$53,547,276	\$55,861,758	\$2,314,482
2	TOTAL MEDICARE	\$28,459,792	\$27,030,405	(\$1,429,387)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,015,596	\$3,135,796	\$120,200
4	TOTAL MEDICAID	\$2,362,190	\$2,744,639	\$382,449
5	TOTAL OTHER MEDICAL ASSISTANCE	\$653,406	\$391,157	(\$262,249)
6	TOTAL CHAMPUS / TRICARE	\$71,099	\$78,229	\$7,130
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,666,754	\$250,631	(\$1,416,123)
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$31,546,487</b>	<b>\$30,244,430</b>	<b>(\$1,302,057)</b>
	<b>TOTAL PAYMENTS</b>	<b>\$85,093,763</b>	<b>\$86,106,188</b>	<b>\$1,012,425</b>

<b>NEW MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.66%	12.80%	-1.86%
2	MEDICARE	18.90%	17.53%	-1.38%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.70%	1.27%	-0.43%
4	MEDICAID	1.16%	1.06%	-0.10%
5	OTHER MEDICAL ASSISTANCE	0.55%	0.21%	-0.33%
6	CHAMPUS / TRICARE	0.02%	0.03%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.68%	0.52%	-0.15%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>20.63%</b>	<b>18.83%</b>	<b>-1.80%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>35.29%</b>	<b>31.63%</b>	<b>-3.66%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.41%	37.11%	1.70%
2	MEDICARE	26.25%	27.70%	1.45%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.96%	3.47%	0.51%
4	MEDICAID	2.38%	3.03%	0.65%
5	OTHER MEDICAL ASSISTANCE	0.58%	0.44%	-0.14%
6	CHAMPUS / TRICARE	0.09%	0.09%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.75%	1.47%	-0.28%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>29.30%</b>	<b>31.27%</b>	<b>1.96%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>64.71%</b>	<b>68.37%</b>	<b>3.66%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.47%	13.90%	-1.57%
2	MEDICARE	16.78%	15.51%	-1.27%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.20%	1.11%	-0.10%
4	MEDICAID	0.83%	0.94%	0.11%
5	OTHER MEDICAL ASSISTANCE	0.37%	0.17%	-0.20%
6	CHAMPUS / TRICARE	0.02%	0.02%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.55%	0.08%	-0.47%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>18.00%</b>	<b>16.64%</b>	<b>-1.37%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>33.47%</b>	<b>30.54%</b>	<b>-2.93%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	47.46%	50.97%	3.52%
2	MEDICARE	16.66%	15.88%	-0.78%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.34%	2.53%	0.19%
4	MEDICAID	1.94%	2.25%	0.30%
5	OTHER MEDICAL ASSISTANCE	0.40%	0.29%	-0.11%
6	CHAMPUS / TRICARE	0.07%	0.07%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.41%	0.21%	-1.20%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>19.07%</b>	<b>18.49%</b>	<b>-0.58%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>66.53%</b>	<b>69.46%</b>	<b>2.93%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

<b>NEW MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,513	1,285	(228)
2	MEDICARE	1,290	1,248	(42)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	228	235	7
4	MEDICAID	196	208	12
5	OTHER MEDICAL ASSISTANCE	32	27	(5)
6	CHAMPUS / TRICARE	1	6	5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	82	60	(22)
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>1,519</b>	<b>1,489</b>	<b>(30)</b>
	<b>TOTAL DISCHARGES</b>	<b>3,032</b>	<b>2,774</b>	<b>(258)</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,657	3,858	(799)
2	MEDICARE	6,267	5,370	(897)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	858	629	(229)
4	MEDICAID	675	554	(121)
5	OTHER MEDICAL ASSISTANCE	183	75	(108)
6	CHAMPUS / TRICARE	3	17	14
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	283	189	(94)
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>7,128</b>	<b>6,016</b>	<b>(1,112)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>11,785</b>	<b>9,874</b>	<b>(1,911)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.0	(0.1)
2	MEDICARE	4.9	4.3	(0.6)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.8	2.7	(1.1)
4	MEDICAID	3.4	2.7	(0.8)
5	OTHER MEDICAL ASSISTANCE	5.7	2.8	(2.9)
6	CHAMPUS / TRICARE	3.0	2.8	(0.2)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.5	3.2	(0.3)
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.7</b>	<b>4.0</b>	<b>(0.7)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>3.9</b>	<b>3.6</b>	<b>(0.3)</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.12420	1.13830	0.01410
2	MEDICARE	1.52510	1.56340	0.03830
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.91011	0.78168	(0.12843)
4	MEDICAID	0.82340	0.75300	(0.07040)
5	OTHER MEDICAL ASSISTANCE	1.44120	1.00260	(0.43860)
6	CHAMPUS / TRICARE	1.99000	0.62830	(1.36170)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.02820	1.08840	0.06020
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.43310</b>	<b>1.43626</b>	<b>0.00316</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.27895</b>	<b>1.29823</b>	<b>0.01928</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$102,378,537	\$110,596,764	\$8,218,227
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$55,727,275	\$56,961,715	\$1,234,440
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$46,651,262	\$53,635,049	\$6,983,787
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.57%	48.50%	2.93%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT <b>OHCA INPUT</b> )	\$303,282	\$319,679	\$16,397
8	CHARITY CARE	\$2,581,057	\$1,620,381	(\$960,676)
9	BAD DEBTS	\$4,808,441	\$4,081,840	(\$726,601)
10	TOTAL UNCOMPENSATED CARE	\$7,389,498	\$5,702,221	(\$1,687,277)
11	TOTAL OTHER OPERATING REVENUE	\$102,378,537	\$110,596,764	\$8,218,227
12	TOTAL OPERATING EXPENSES	\$92,150,239	\$98,752,754	\$6,602,515

<b>NEW MILFORD HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2009</b> <b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u> <u>FY 2008</u>	<u>ACTUAL</u> <u>FY 2009</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>

<b>NEW MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,700.91460	1,462.71550	(238.19910)
2	MEDICARE	1,967.37900	1,951.12320	(16.25580)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	207.50480	183.69420	(23.81060)
4	MEDICAID	161.38640	156.62400	(4.76240)
5	OTHER MEDICAL ASSISTANCE	46.11840	27.07020	(19.04820)
6	CHAMPUS / TRICARE	1.99000	3.76980	1.77980
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	84.31240	65.30400	(19.00840)
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>2,176.87380</b>	<b>2,138.58720</b>	<b>(38.28660)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>3,877.78840</b>	<b>3,601.30270</b>	<b>(276.48570)</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,654.90634	3,724.90918	70.00283
2	MEDICARE	1,791.51293	1,972.65635	181.14343
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	437.67312	651.22280	213.54968
4	MEDICAID	403.64276	595.44770	191.80493
5	OTHER MEDICAL ASSISTANCE	34.03036	55.77510	21.74474
6	CHAMPUS / TRICARE	4.30345	19.36792	15.06447
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	212.03774	168.95626	-43.08149
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>2,233.48950</b>	<b>2,643.24708</b>	<b>409.75758</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>5,888.39584</b>	<b>6,368.15625</b>	<b>479.76041</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,739.41	\$8,183.06	\$443.64
2	MEDICARE	\$7,259.36	\$6,845.66	(\$413.71)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,939.86	\$5,196.12	\$256.26
4	MEDICAID	\$4,389.39	\$5,172.67	\$783.28
5	OTHER MEDICAL ASSISTANCE	\$6,866.17	\$5,331.80	(\$1,534.37)
6	CHAMPUS / TRICARE	\$6,754.27	\$4,159.11	(\$2,595.16)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,513.03	\$1,005.76	(\$4,507.27)
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,037.80</b>	<b>\$6,699.23</b>	<b>(\$338.57)</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,345.55</b>	<b>\$7,301.91</b>	<b>(\$43.64)</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,049.04	\$11,783.45	\$734.41
2	MEDICARE	\$7,913.91	\$6,931.61	(\$982.30)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,548.03	\$3,349.54	(\$1,198.49)
4	MEDICAID	\$4,097.19	\$3,248.77	(\$848.42)
5	OTHER MEDICAL ASSISTANCE	\$9,895.55	\$4,425.34	(\$5,470.20)
6	CHAMPUS / TRICARE	\$13,398.10	\$3,229.57	(\$10,168.53)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,668.50	\$1,094.67	(\$4,573.84)
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$7,264.90</b>	<b>\$6,021.96</b>	<b>(\$1,242.94)</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$9,613.70</b>	<b>\$9,392.01</b>	<b>(\$221.69)</b>

NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$1,540,590	\$2,192,938	\$652,347
2	OTHER MEDICAL ASSISTANCE	(\$49,303)	\$180,768	\$230,070
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$623,348	\$1,367,557	\$744,209
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$2,114,636</b>	<b>\$3,741,262</b>	<b>\$1,626,626</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$214,881,435	\$230,831,708	\$15,950,273
2	TOTAL GOVERNMENT DEDUCTIONS	\$75,746,912	\$85,388,249	\$9,641,337
3	UNCOMPENSATED CARE	\$7,389,498	\$5,702,221	(\$1,687,277)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$46,651,262	\$53,635,049	\$6,983,787
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$129,787,672	\$144,725,519	\$14,937,847
7	TOTAL ACCRUED PAYMENTS	\$85,093,763	\$86,106,189	\$1,012,426
8	UCP DSH PAYMENTS (OHCA INPUT)	\$303,282	\$319,679	\$16,397
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$85,397,045	\$86,425,868	\$1,028,823
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3974147185	0.3744107287	(0.0230039898)
11	COST OF UNCOMPENSATED CARE	\$2,936,695	\$2,134,973	(\$801,723)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$969,666	\$963,751	(\$5,915)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,906,362	\$3,098,724	(\$807,638)
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	41.79%	40.51%	-1.28%
2	MEDICARE	35.16%	33.01%	-2.14%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28.00%	32.50%	4.50%
4	MEDICAID	28.51%	33.18%	4.67%
5	OTHER MEDICAL ASSISTANCE	26.94%	29.15%	2.21%
6	CHAMPUS / TRICARE	30.93%	23.83%	-7.10%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	31.99%	5.45%	-26.55%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>34.56%</b>	<b>32.97%</b>	<b>-1.60%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>37.57%</b>	<b>36.02%</b>	<b>-1.55%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	53.07%	51.25%	-1.83%
2	MEDICARE	25.13%	21.38%	-3.75%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	31.26%	27.22%	-4.04%
4	MEDICAID	32.32%	27.68%	-4.64%
5	OTHER MEDICAL ASSISTANCE	26.94%	24.13%	-2.81%
6	CHAMPUS / TRICARE	30.83%	29.45%	-1.38%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	31.99%	5.45%	-26.55%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>25.77%</b>	<b>22.05%</b>	<b>-3.71%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>40.71%</b>	<b>37.90%</b>	<b>-2.81%</b>

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$85,093,763	\$86,106,188	\$1,012,425
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$303,282	\$319,679	\$16,397
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$85,397,045</b>	<b>\$86,425,867</b>	<b>\$1,028,822</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,730,727	\$3,220,173	(\$510,554)
4	<b>CALCULATED NET REVENUE</b>	<b>\$93,936,213</b>	<b>\$89,646,040</b>	<b>(\$4,290,173)</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$89,127,772	\$89,646,041	\$518,269
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$4,808,441</b>	<b>(\$1)</b>	<b>(\$4,808,442)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$214,881,435	\$230,831,708	\$15,950,273
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$214,881,435</b>	<b>\$230,831,708</b>	<b>\$15,950,273</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$214,881,435	\$230,831,708	\$15,950,273
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,389,498	\$5,702,221	(\$1,687,277)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$410,301	\$904,175	\$493,874
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$7,799,799</b>	<b>\$6,606,396</b>	<b>(\$1,193,403)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,799,799	\$6,606,397	(\$1,193,402)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>(\$1)</b>	<b>(\$1)</b>

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2009
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$29,547,592
2	MEDICARE	40,456,850
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,936,781
4	MEDICAID	2,441,592
5	OTHER MEDICAL ASSISTANCE	495,189
6	CHAMPUS / TRICARE	65,802
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,206,064
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$43,459,433</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$73,007,025</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$85,651,437
2	MEDICARE	63,948,287
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,012,551
4	MEDICAID	6,989,617
5	OTHER MEDICAL ASSISTANCE	1,022,934
6	CHAMPUS / TRICARE	212,408
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,396,201
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$72,173,246</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$157,824,683</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$115,199,029
2	TOTAL GOVERNMENT ACCRUED CHARGES	115,632,679
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$230,831,708</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,969,482
2	MEDICARE	13,356,718
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	954,498
4	MEDICAID	810,165
5	OTHER MEDICAL ASSISTANCE	144,333
6	CHAMPUS / TRICARE	15,679
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	65,680
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$14,326,895</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$26,296,377</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$43,892,276
2	MEDICARE	13,673,687
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,181,298
4	MEDICAID	1,934,474
5	OTHER MEDICAL ASSISTANCE	246,824
6	CHAMPUS / TRICARE	62,550
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	184,951
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$15,917,535</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$59,809,811</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$55,861,758
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	30,244,430
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$86,106,188</b>

<b>NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,285
2	MEDICARE	1,248
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	235
4	MEDICAID	208
5	OTHER MEDICAL ASSISTANCE	27
6	CHAMPUS / TRICARE	6
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	60
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>1,489</b>
	<b>TOTAL DISCHARGES</b>	<b>2,774</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.13830
2	MEDICARE	1.56340
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.78168
4	MEDICAID	0.75300
5	OTHER MEDICAL ASSISTANCE	1.00260
6	CHAMPUS / TRICARE	0.62830
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.08840
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.43626</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.29823</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$110,596,764
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$56,961,715
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$53,635,049
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	48.50%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$319,679
8	CHARITY CARE	\$1,620,381
9	BAD DEBTS	\$4,081,840
10	TOTAL UNCOMPENSATED CARE	\$5,702,221
11	TOTAL OTHER OPERATING REVENUE	\$3,580,001
12	TOTAL OPERATING EXPENSES	\$98,752,754

<b>NEW MILFORD HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2009</b> <b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$86,106,188
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$319,679
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$86,425,867</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,220,173
	<b>CALCULATED NET REVENUE</b>	<b>\$89,646,040</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$89,646,041
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$230,831,708
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$230,831,708</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$230,831,708
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,702,221
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$904,175
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$6,606,396</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,606,397
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>

NEW MILFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Hospital Charity Care (from HRS Report 500)</b>					
1	Number of Applicants	278	274	(4)	-1%
2	Number of Approved Applicants	254	250	(4)	-2%
3	<b>Total Charges (A)</b>	\$2,581,057	\$1,620,381	(\$960,676)	-37%
4	<b>Average Charges</b>	<b>\$10,162</b>	<b>\$6,482</b>	<b>(\$3,680)</b>	<b>-36%</b>
5	Ratio of Cost to Charges (RCC)	0.421997	0.418624	(0.003373)	-1%
6	<b>Total Cost</b>	<b>\$1,089,198</b>	<b>\$678,330</b>	<b>(\$410,868)</b>	<b>-38%</b>
7	<b>Average Cost</b>	<b>\$4,288</b>	<b>\$2,713</b>	<b>(\$1,575)</b>	<b>-37%</b>
8	Charity Care - Inpatient Charges	\$594,246	\$749,801	\$155,555	26%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,843,021	721,359	(1,121,662)	-61%
10	Charity Care - Emergency Department Charges	143,790	149,221	5,431	4%
11	<b>Total Charges (A)</b>	<b>\$2,581,057</b>	<b>\$1,620,381</b>	<b>(\$960,676)</b>	<b>-37%</b>
12	Charity Care - Number of Patient Days	133	140	7	5%
13	Charity Care - Number of Discharges	51	39	(12)	-24%
14	Charity Care - Number of Outpatient ED Visits	557	174	(383)	-69%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	181	484	303	167%
<b>B. Hospital Bad Debts (from HRS Report 500)</b>					
1	Bad Debts - Inpatient Services	\$1,692,542	\$1,293,341	(\$399,201)	-24%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	2,779,084	2,490,722	(288,362)	-10%
3	Bad Debts - Emergency Department	336,815	297,777	(39,038)	-12%
4	<b>Total Bad Debts (A)</b>	<b>\$4,808,441</b>	<b>\$4,081,840</b>	<b>(\$726,601)</b>	<b>-15%</b>
<b>C. Hospital Uncompensated Care (from HRS Report 500)</b>					
1	Charity Care (A)	\$2,581,057	\$1,620,381	(\$960,676)	-37%
2	Bad Debts (A)	4,808,441	4,081,840	(726,601)	-15%
3	<b>Total Uncompensated Care (A)</b>	<b>\$7,389,498</b>	<b>\$5,702,221</b>	<b>(\$1,687,277)</b>	<b>-23%</b>
4	Uncompensated Care - Inpatient Services	\$2,286,788	\$2,043,142	(\$243,646)	-11%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	4,622,105	3,212,081	(1,410,024)	-31%
6	Uncompensated Care - Emergency Department	480,605	446,998	(33,607)	-7%
7	<b>Total Uncompensated Care (A)</b>	<b>\$7,389,498</b>	<b>\$5,702,221</b>	<b>(\$1,687,277)</b>	<b>-23%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					



NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
<b>A. <u>Gross and Net Revenue</u></b>				
1	Inpatient Gross Revenue	\$66,893,286	\$75,823,607	\$73,007,025
2	Outpatient Gross Revenue	\$129,341,268	\$139,057,828	\$157,824,683
3	Total Gross Patient Revenue	\$196,234,554	\$214,881,435	\$230,831,708
4	Net Patient Revenue	\$84,051,521	\$88,824,490	\$89,326,362
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$87,234,032	\$95,880,966	\$98,752,754
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	11,268	11,785	9,874
2	Discharges	2,845	3,032	2,774
3	Average Length of Stay	4.0	3.9	3.6
4	Equivalent (Adjusted) Patient Days (EPD)	33,055	33,398	31,219
0	Equivalent (Adjusted) Discharges (ED)	8,346	8,593	8,771
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.21204	1.27895	1.29823
2	Case Mix Adjusted Patient Days (CMAPD)	13,657	15,072	12,819
3	Case Mix Adjusted Discharges (CMAD)	3,448	3,878	3,601
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	40,064	42,715	40,530
5	Case Mix Adjusted Equivalent Discharges (CMAED)	10,116	10,990	11,387
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$17,415	\$18,233	\$23,378
2	Total Gross Revenue per Discharge	\$68,975	\$70,871	\$83,213
3	Total Gross Revenue per EPD	\$5,937	\$6,434	\$7,394
4	Total Gross Revenue per ED	\$23,513	\$25,008	\$26,318
5	Total Gross Revenue per CMAEPD	\$4,898	\$5,031	\$5,695
6	Total Gross Revenue per CMAED	\$19,399	\$19,553	\$20,272
7	Inpatient Gross Revenue per EPD	\$2,024	\$2,270	\$2,339
8	Inpatient Gross Revenue per ED	\$8,015	\$8,824	\$8,324

NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
<b>F. Net Revenue Per Statistic</b>				
1	Net Patient Revenue per Patient Day	\$7,459	\$7,537	\$9,047
2	Net Patient Revenue per Discharge	\$29,544	\$29,296	\$32,201
3	Net Patient Revenue per EPD	\$2,543	\$2,660	\$2,861
4	Net Patient Revenue per ED	\$10,071	\$10,337	\$10,185
5	Net Patient Revenue per CMAEPD	\$2,098	\$2,079	\$2,204
6	Net Patient Revenue per CMAED	\$8,309	\$8,083	\$7,845
<b>G. Operating Expense Per Statistic</b>				
1	Total Operating Expense per Patient Day	\$7,742	\$8,136	\$10,001
2	Total Operating Expense per Discharge	\$30,662	\$31,623	\$35,599
3	Total Operating Expense per EPD	\$2,639	\$2,871	\$3,163
4	Total Operating Expense per ED	\$10,452	\$11,159	\$11,259
5	Total Operating Expense per CMAEPD	\$2,177	\$2,245	\$2,437
6	Total Operating Expense per CMAED	\$8,624	\$8,725	\$8,673
<b>H. Nursing Salary and Fringe Benefits Expense</b>				
1	Nursing Salary Expense	\$12,482,927	\$13,452,782	\$13,297,685
2	Nursing Fringe Benefits Expense	\$3,753,448	\$4,141,553	\$4,423,223
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$16,236,375</b>	<b>\$17,594,335</b>	<b>\$17,720,908</b>
<b>I. Physician Salary and Fringe Expense</b>				
1	Physician Salary Expense	\$4,671,709	\$4,926,356	\$5,922,680
2	Physician Fringe Benefits Expense	\$1,404,720	\$1,516,620	\$1,970,068
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$6,076,429</b>	<b>\$6,442,976</b>	<b>\$7,892,748</b>
<b>J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>				
1	Non-Nursing, Non-Physician Salary Expense	\$17,956,887	\$19,645,289	\$20,701,766
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$5,399,394	\$6,047,969	\$6,886,051
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$23,356,281</b>	<b>\$25,693,258</b>	<b>\$27,587,817</b>
<b>K. Total Salary and Fringe Benefits Expense</b>				
1	Total Salary Expense	\$35,111,523	\$38,024,427	\$39,922,131
2	Total Fringe Benefits Expense	\$10,557,562	\$11,706,142	\$13,279,342
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$45,669,085</b>	<b>\$49,730,569</b>	<b>\$53,201,473</b>

NEW MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	154.6	160.9	154.5
2	Total Physician FTEs	21.0	20.7	24.4
3	Total Non-Nursing, Non-Physician FTEs	294.7	306.5	309.9
4	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>470.3</b>	<b>488.1</b>	<b>488.8</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$80,743	\$83,610	\$86,069
2	Nursing Fringe Benefits Expense per FTE	\$24,278	\$25,740	\$28,629
3	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$105,022</b>	<b>\$109,350</b>	<b>\$114,698</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$222,462	\$237,988	\$242,733
2	Physician Fringe Benefits Expense per FTE	\$66,891	\$73,267	\$80,740
3	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$289,354</b>	<b>\$311,255</b>	<b>\$323,473</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$60,933	\$64,096	\$66,801
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$18,322	\$19,732	\$22,220
3	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$79,254</b>	<b>\$83,828</b>	<b>\$89,022</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$74,658	\$77,903	\$81,674
2	Total Fringe Benefits Expense per FTE	\$22,449	\$23,983	\$27,167
3	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$97,106</b>	<b>\$101,886</b>	<b>\$108,841</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$4,053	\$4,220	\$5,388
2	Total Salary and Fringe Benefits Expense per Discharge	\$16,052	\$16,402	\$19,179
3	Total Salary and Fringe Benefits Expense per EPD	\$1,382	\$1,489	\$1,704
4	Total Salary and Fringe Benefits Expense per ED	\$5,472	\$5,788	\$6,066
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,140	\$1,164	\$1,313
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,515	\$4,525	\$4,672