| | Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually | | | | | | |
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| Date o | of Filing> | | | | | | |
| Full L | egal Name of Entity Reporting> | | | | | | |
| Туре | of Provider Reporting (see options below)> | | | | | | |
| (Hosp | ital, Hospital System, Group Practice) | | | | | | |
| (1) | (2) | (3) | (4) | | | | |
| Line | Name of Group Practice being reported | Description of the nature of the relationship of the Hospital or Hospital System to the Group Practice | Is the Group Practice reported owned or affiliated by the Hospital or Hospital System? | | | | |
| 1 | Saint Francis Emergency Medical Group | | Affiliated | | | | |
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Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually

| Date of Filing> |
|---|
| Full Legal Name of Entity Reporting> |
| Type of Provider Reporting (see options below)> |

(Hospital, Hospital System, Group Practice)

If more than one Group Practice is being reported, please follow the instructions below to add additional tabs.

- 1 Right click on the the "PhysicianName" tab below
- Click the "Move or Copy" option
- Under the heading "Before Sheet:," click on "Business Entity"
- Click inside the "create a copy" box
- Click "OK"

| | Name of Group Practice> | |
|------|---|---|
| (1) | (2) | (3) |
| Line | Physician Name (Last, First) | Physician Specialty(s) |
| | | When user clicks into a cell below, a dropdown box appears allowing the user to ente multiple services. Users must select one service at a time when entering services. |
| 1 | Wolf MD,C. Steven | Emergency medicine |
| | Turbiak,Thomas W | Emergency medicine |
| 3 | Brunell MD, Thomas | Emergency medicine |
| | Sanders MD, William M | Emergency medicine |
| | Moorman MD,Jeffrey L | Emergency medicine |
| | Abbatiello MD,Carol | Emergency medicine |
| | LaPolla MD,Gary A | Emergency medicine |
| | Carolan MD, Beverly J | Emergency medicine |
| | Cinti MD,Paula M Schiller MD,Elizabeth Y | Emergency medicine |
| | Pettini DO,John R | Emergency medicine Emergency medicine |
| | Dansky MD,Perry | Emergency medicine Emergency medicine |
| | Ibrahim MD,Danyal | Emergency medicine |
| | Fojtik MD,John P | Emergency medicine |
| | Bankwalla MD,Arnaz A | Emergency medicine |
| | Markuszka MD,Karl A | Emergency medicine |
| 17 | Ryan DO,Emily A | Emergency medicine |
| 18 | Smith MD,Jillian L | Emergency medicine |
| 19 | Parekh MD,Sachin R | Emergency medicine |
| 20 | Michalewski, Tomasz G | Emergency medicine |
| | Brancato, Jaclyn M | Emergency medicine |
| | Rosen,Karen D | Emergency medicine |
| 23 | Brody MD,Richard L | Emergency medicine |
| | Dugan MD, Jennifer M | Emergency medicine |
| | Gelin MD, Joan K | Emergency medicine |
| | Rishel, Joan L | Emergency medicine |
| | Martin MD,Jennifer A Apollon MD,Rebecca B | Emergency medicine |
| | Gilmore MD,Thomas J | Emergency medicine Emergency medicine |
| | Quinby MD, Peter R | Emergency medicine |
| | Bernard DO,Hannah M | Emergency medicine |
| | Grant MD,Robert J | Emergency medicine |
| | Leavens MD,John E | Emergency medicine |
| | Neulander MD,Matthew J | Emergency medicine |
| | Maningas, Thomas T | Emergency medicine |
| 36 | Correira,Kristine C | Emergency medicine |
| 37 | Ward MD,Che Damon | Emergency medicine |
| | Fialkovich MD,John J | Emergency medicine |
| | Lee MD,Kie Y | Emergency medicine |
| | Zucker DO,Amanda M | Emergency medicine |
| | Casey MD,Zoe Cassandra | Emergency medicine |
| | Medoro MD,Amanda K | Emergency medicine |
| | Gravino MD,Fonda N | Emergency medicine |
| | Jolly MD, Tiphany A | Emergency medicine Emergency medicine |
| | Curran MD,Gerard P Birmingham MD,Hynes M | Emergency medicine Emergency medicine |
| | Rhyee MD,Sean H | Emergency medicine Emergency medicine |
| | Spear MD,Jeffrey P | Emergency medicine Emergency medicine |
| 49 | opodi mojodnoj i | Emergency medicine |
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| | Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually | | | | | | |
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| Date o | of Filing> | | | | | | |
| | egal Name of Entity Reporting> | | | | | | |
| | of Provider Reporting (see options below)> | | | | | | |
|) ypc | (Hospital, Hospital System, Group Practice) | | | | | | |
| 1 2 3 4 | e than one Group Practice is being reported, please follow the instru- Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" Click inside the "create a copy" box Click "OK" | actions below to add additional tabs. | | | | | |
| | Name of Group Practice> | | | | | | |
| (1) | (2) | (3) | | | | | |
| Line | Physician Name (Last, First) | Physician Specialty(s) | | | | | |
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| | | When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. | | | | | |
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| 56 57 | | When user clicks into a cell below, a dropdown box appears allowing the user to enter | | | | | |
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| 56 57 58 59 60 61 62 | | When user clicks into a cell below, a dropdown box appears allowing the user to enter | | | | | |
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| 56 57 58 59 60 61 62 63 64 65 66 67 | | When user clicks into a cell below, a dropdown box appears allowing the user to enter | | | | | |
| 56 57 58 59 60 61 62 63 64 65 66 | | When user clicks into a cell below, a dropdown box appears allowing the user to enter | | | | | |
| 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 | | When user clicks into a cell below, a dropdown box appears allowing the user to enter | | | | | |
| 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 | | When user clicks into a cell below, a dropdown box appears allowing the user to enter | | | | | |

| Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually | | | | | |
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| Date of Filing | | | | | |
| If more than one Group Practice is being reported, please follow the instructions below to add additional tabs. 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" | | | | | |

4 Click inside the "create a copy" box

5 Click "OK"

| (1) | (2) | (3) | (4) | (5) | (6) | |
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| | , , | ` ' | Primary Service Area as defined in Section 1(11) | Name and address of each Business Entity that | · · | |
| Line | Name and address of Group Practice | Location | of PA 14-168 | provides services as part of the Group Practice | Description of services at this location | |
| | | | | | When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. | |
| 1 | St Francis Emergency Medical Group | 114 Woodland Street, Hartford CT | Harford/06112(13.28%), Hartford/06105 (12.42%), Hartford/06106 (8.8%), Hartford/06120 (7.51%), Bloomfield/06002 (5.52%), Windsor/06095 (4.27%), East Hartford/06108 (4.16%), Hartford/06114 (3.5%), East Hartford/06118 (3.1%), 06082/Enfiled (2.49%), Manchester/06040 (1.98%), West Hartford/06117 (1.9%), West Hartford/06119 (1.8%), Windsor Locks/06096 (1.46%), Wethersfield/06109 (1.35%), South Windsor/06074 (1.34%) | 114 Woodland Street, Hartford, CT | Emergency medicine | |
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| | Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually | | | | | | |
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| Full L | ate of Filing | | | | | | |
| 1 2 3 4 | more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box | | | | | | |
| (1) | Click "OK" (2) | (3) | (4) | (5) | (6) | | |
| Line | Name and address of Group Practice | | Primary Service Area as defined in Section 1(11) of PA 14-168 | Name and address of each Business Entity that provides services as part of the Group Practice | Description of services at this location | | |

| (1) | (2) | (3) | (4) | (5) | (6) |
|------|------------------------------------|----------|--------------|---|--|
| | | | | Name and address of each Business Entity that | |
| Line | Name and address of Group Practice | Location | of PA 14-168 | provides services as part of the Group Practice | Description of services at this location |
| | | | | | When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. |
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