

BRISTOL 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.	<u>ASSETS</u>				
A.	<u>Current Assets:</u>				
1	Cash and Cash Equivalents	\$3,254,877	\$6,746,197	\$3,491,320	107%
2	Short Term Investments	\$95,129	\$96,062	\$933	1%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$16,477,565	\$16,448,223	(\$29,342)	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$386,744	\$690,043	\$303,299	78%
5	Due From Affiliates	\$1,920,681	\$1,258,994	(\$661,687)	-34%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,211,581	\$1,641,730	\$430,149	36%
8	Prepaid Expenses	\$1,382,032	\$1,348,803	(\$33,229)	-2%
9	Other Current Assets	\$1,396,942	\$809,889	(\$587,053)	-42%
	Total Current Assets	\$26,125,551	\$29,039,941	\$2,914,390	11%
B.	<u>Noncurrent Assets Whose Use is Limited:</u>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$5,489,709	\$5,202,451	(\$287,258)	-5%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$5,721,634	\$12,609,680	\$6,888,046	120%
	Total Noncurrent Assets Whose Use is Limited:	\$11,211,343	\$17,812,131	\$6,600,788	59%
5	Interest in Net Assets of Foundation	\$3,821,455	\$4,024,158	\$202,703	5%
6	Long Term Investments	\$5,049,813	\$5,552,518	\$502,705	10%
7	Other Noncurrent Assets	\$7,235,426	\$2,839,871	(\$4,395,555)	-61%
C.	<u>Net Fixed Assets:</u>				
1	Property, Plant and Equipment	\$120,373,016	\$122,729,903	\$2,356,887	2%
2	Less: Accumulated Depreciation	\$83,066,063	\$88,333,810	\$5,267,747	6%
	Property, Plant and Equipment, Net	\$37,306,953	\$34,396,093	(\$2,910,860)	-8%
3	Construction in Progress	\$449,988	\$764,061	\$314,073	70%
	Total Net Fixed Assets	\$37,756,941	\$35,160,154	(\$2,596,787)	-7%
	Total Assets	\$91,200,529	\$94,428,773	\$3,228,244	4%

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REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
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<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$7,889,724	\$7,979,787	\$90,063	1%
2	Salaries, Wages and Payroll Taxes	\$6,259,822	\$6,561,782	\$301,960	5%
3	Due To Third Party Payers	\$394,236	\$971,897	\$577,661	147%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,337,309	\$908,760	(\$428,549)	-32%
6	Current Portion of Notes Payable	\$6,410	\$6,738	\$328	5%
7	Other Current Liabilities	\$7,081,067	\$6,750,000	(\$331,067)	-5%
	Total Current Liabilities	\$22,968,568	\$23,178,964	\$210,396	1%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$27,950,820	\$27,049,643	(\$901,177)	-3%
2	Notes Payable (Net of Current Portion)	\$319,228	\$312,490	(\$6,738)	-2%
	Total Long Term Debt	\$28,270,048	\$27,362,133	(\$907,915)	-3%
3	Accrued Pension Liability	\$2,783,218	\$21,959,738	\$19,176,520	689%
4	Other Long Term Liabilities	\$10,754,256	\$14,688,678	\$3,934,422	37%
	Total Long Term Liabilities	\$41,807,522	\$64,010,549	\$22,203,027	53%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$18,132,104	(\$255,398)	(\$18,387,502)	-101%
2	Temporarily Restricted Net Assets	\$1,650,070	\$939,739	(\$710,331)	-43%
3	Permanently Restricted Net Assets	\$6,642,265	\$6,554,919	(\$87,346)	-1%
	Total Net Assets	\$26,424,439	\$7,239,260	(\$19,185,179)	-73%
	Total Liabilities and Net Assets	\$91,200,529	\$94,428,773	\$3,228,244	4%

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$344,471,297	\$359,092,080	\$14,620,783	4%
2	Less: Allowances	\$224,251,634	\$233,543,365	\$9,291,731	4%
3	Less: Charity Care	\$929,468	\$558,883	(\$370,585)	-40%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$119,290,195	\$124,989,832	\$5,699,637	5%
5	Other Operating Revenue	\$4,950,476	\$4,717,358	(\$233,118)	-5%
6	Net Assets Released from Restrictions	\$1,642,038	\$0	(\$1,642,038)	-100%
	Total Operating Revenue	\$125,882,709	\$129,707,190	\$3,824,481	3%
B. Operating Expenses:					
1	Salaries and Wages	\$51,835,542	\$53,694,846	\$1,859,304	4%
2	Fringe Benefits	\$12,620,615	\$13,808,148	\$1,187,533	9%
3	Physicians Fees	\$3,061,314	\$4,436,306	\$1,374,992	45%
4	Supplies and Drugs	\$14,306,190	\$16,059,529	\$1,753,339	12%
5	Depreciation and Amortization	\$5,826,230	\$5,438,713	(\$387,517)	-7%
6	Bad Debts	\$10,951,622	\$9,166,346	(\$1,785,276)	-16%
7	Interest	\$2,035,567	\$1,891,953	(\$143,614)	-7%
8	Malpractice	\$1,106,630	\$1,255,062	\$148,432	13%
9	Other Operating Expenses	\$23,969,302	\$23,906,496	(\$62,806)	0%
	Total Operating Expenses	\$125,713,012	\$129,657,399	\$3,944,387	3%
	Income/(Loss) From Operations	\$169,697	\$49,791	(\$119,906)	-71%
C. Non-Operating Revenue:					
1	Income from Investments	\$517,650	\$288,634	(\$229,016)	-44%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$1,673,083)	\$34,973	\$1,708,056	-102%
	Total Non-Operating Revenue	(\$1,155,433)	\$323,607	\$1,479,040	-128%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$985,736)	\$373,398	\$1,359,134	-138%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$985,736)	\$373,398	\$1,359,134	-138%
	Principal Payments	\$0	\$1,336,136	\$1,336,136	0%

**BRISTOL 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
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$72,438,709	\$73,389,848	\$951,139	1%
2	MEDICARE MANAGED CARE	\$9,458,517	\$13,301,503	\$3,842,986	41%
3	MEDICAID	\$6,316,675	\$6,492,749	\$176,074	3%
4	MEDICAID MANAGED CARE	\$6,395,487	\$6,901,515	\$506,028	8%
5	CHAMPUS/TRICARE	\$310,557	\$200,630	(\$109,927)	-35%
6	COMMERCIAL INSURANCE	\$23,997,522	\$23,291,323	(\$706,199)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$19,964,389	\$20,754,088	\$789,699	4%
8	WORKER'S COMPENSATION	\$958,104	\$813,914	(\$144,190)	-15%
9	SELF- PAY/UNINSURED	\$1,777,507	\$905,666	(\$871,841)	-49%
10	SAGA	\$4,791,002	\$6,259,297	\$1,468,295	31%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$146,408,469	\$152,310,533	\$5,902,064	4%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$55,200,706	\$57,230,268	\$2,029,562	4%
2	MEDICARE MANAGED CARE	\$9,392,135	\$14,044,609	\$4,652,474	50%
3	MEDICAID	\$6,849,903	\$7,052,167	\$202,264	3%
4	MEDICAID MANAGED CARE	\$14,691,315	\$16,621,710	\$1,930,395	13%
5	CHAMPUS/TRICARE	\$735,885	\$426,014	(\$309,871)	-42%
6	COMMERCIAL INSURANCE	\$51,391,914	\$46,656,078	(\$4,735,836)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$41,387,170	\$45,816,881	\$4,429,711	11%
8	WORKER'S COMPENSATION	\$6,172,512	\$6,137,784	(\$34,728)	-1%
9	SELF- PAY/UNINSURED	\$5,917,877	\$5,537,635	(\$380,242)	-6%
10	SAGA	\$6,323,409	\$7,258,401	\$934,992	15%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$198,062,826	\$206,781,547	\$8,718,721	4%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$127,639,415	\$130,620,116	\$2,980,701	2%
2	MEDICARE MANAGED CARE	\$18,850,652	\$27,346,112	\$8,495,460	45%
3	MEDICAID	\$13,166,578	\$13,544,916	\$378,338	3%
4	MEDICAID MANAGED CARE	\$21,086,802	\$23,523,225	\$2,436,423	12%
5	CHAMPUS/TRICARE	\$1,046,442	\$626,644	(\$419,798)	-40%
6	COMMERCIAL INSURANCE	\$75,389,436	\$69,947,401	(\$5,442,035)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$61,351,559	\$66,570,969	\$5,219,410	9%
8	WORKER'S COMPENSATION	\$7,130,616	\$6,951,698	(\$178,918)	-3%
9	SELF- PAY/UNINSURED	\$7,695,384	\$6,443,301	(\$1,252,083)	-16%
10	SAGA	\$11,114,411	\$13,517,698	\$2,403,287	22%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$344,471,295	\$359,092,080	\$14,620,785	4%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$24,987,110	\$24,601,830	(\$385,280)	-2%
2	MEDICARE MANAGED CARE	\$3,555,267	\$4,630,546	\$1,075,279	30%
3	MEDICAID	\$2,052,430	\$1,929,597	(\$122,833)	-6%
4	MEDICAID MANAGED CARE	\$1,626,822	\$1,669,326	\$42,504	3%
5	CHAMPUS/TRICARE	\$95,359	\$74,488	(\$20,871)	-22%
6	COMMERCIAL INSURANCE	\$9,565,833	\$9,885,372	\$319,539	3%
7	NON-GOVERNMENT MANAGED CARE	\$7,366,524	\$8,851,281	\$1,484,757	20%
8	WORKER'S COMPENSATION	\$958,104	\$813,915	(\$144,189)	-15%
9	SELF- PAY/UNINSURED	\$33,584	\$24,036	(\$9,548)	-28%
10	SAGA	\$998,573	\$955,724	(\$42,849)	-4%

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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
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$51,239,606	\$53,436,115	\$2,196,509	4%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$13,013,285	\$13,932,270	\$918,985	7%
2	MEDICARE MANAGED CARE	\$1,972,420	\$2,756,321	\$783,901	40%
3	MEDICAID	\$1,994,258	\$2,081,667	\$87,409	4%
4	MEDICAID MANAGED CARE	\$3,746,798	\$4,186,849	\$440,051	12%
5	CHAMPUS/TRICARE	\$162,320	\$96,511	(\$65,809)	-41%
6	COMMERCIAL INSURANCE	\$19,330,937	\$18,725,643	(\$605,294)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$12,213,550	\$15,954,639	\$3,741,089	31%
8	WORKER'S COMPENSATION	\$6,172,512	\$6,137,784	(\$34,728)	-1%
9	SELF- PAY/UNINSURED	\$327,905	\$267,683	(\$60,222)	-18%
10	SAGA	\$1,272,450	\$870,976	(\$401,474)	-32%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$60,206,435	\$65,010,343	\$4,803,908	8%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$38,000,395	\$38,534,100	\$533,705	1%
2	MEDICARE MANAGED CARE	\$5,527,687	\$7,386,867	\$1,859,180	34%
3	MEDICAID	\$4,046,688	\$4,011,264	(\$35,424)	-1%
4	MEDICAID MANAGED CARE	\$5,373,620	\$5,856,175	\$482,555	9%
5	CHAMPUS/TRICARE	\$257,679	\$170,999	(\$86,680)	-34%
6	COMMERCIAL INSURANCE	\$28,896,770	\$28,611,015	(\$285,755)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$19,580,074	\$24,805,920	\$5,225,846	27%
8	WORKER'S COMPENSATION	\$7,130,616	\$6,951,699	(\$178,917)	-3%
9	SELF- PAY/UNINSURED	\$361,489	\$291,719	(\$69,770)	-19%
10	SAGA	\$2,271,023	\$1,826,700	(\$444,323)	-20%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$111,446,041	\$118,446,458	\$7,000,417	6%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	3,204	3,030	(174)	-5%
2	MEDICARE MANAGED CARE	436	567	131	30%
3	MEDICAID	406	397	(9)	-2%
4	MEDICAID MANAGED CARE	700	687	(13)	-2%
5	CHAMPUS/TRICARE	11	11	0	0%
6	COMMERCIAL INSURANCE	478	1,453	975	204%
7	NON-GOVERNMENT MANAGED CARE	2,291	1,213	(1,078)	-47%
8	WORKER'S COMPENSATION	30	22	(8)	-27%
9	SELF- PAY/UNINSURED	80	43	(37)	-46%
10	SAGA	380	423	43	11%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	8,016	7,846	(170)	-2%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	16,289	16,416	127	1%
2	MEDICARE MANAGED CARE	2,071	2,895	824	40%
3	MEDICAID	1,764	1,756	(8)	0%
4	MEDICAID MANAGED CARE	1,869	1,906	37	2%
5	CHAMPUS/TRICARE	40	45	5	13%
6	COMMERCIAL INSURANCE	1,634	4,662	3,028	185%
7	NON-GOVERNMENT MANAGED CARE	7,625	4,019	(3,606)	-47%
8	WORKER'S COMPENSATION	72	46	(26)	-36%
9	SELF- PAY/UNINSURED	370	205	(165)	-45%
10	SAGA	1,524	1,708	184	12%
11	OTHER	0	0	0	0%

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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 PATIENT DAYS	33,258	33,658	400	1%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	41,115	41,971	856	2%
2	MEDICARE MANAGED CARE	5,237	7,345	2,108	40%
3	MEDICAID	4,611	5,172	561	12%
4	MEDICAID MANAGED CARE	14,746	15,511	765	5%
5	CHAMPUS/TRICARE	563	312	(251)	-45%
6	COMMERCIAL INSURANCE	13,733	34,217	20,484	149%
7	NON-GOVERNMENT MANAGED CARE	57,389	33,601	(23,788)	-41%
8	WORKER'S COMPENSATION	4,728	4,501	(227)	-5%
9	SELF- PAY/UNINSURED	4,510	4,061	(449)	-10%
10	SAGA	4,857	5,324	467	10%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	151,489	152,015	526	0%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$6,401,601	\$7,047,968	\$646,367	10%
2	MEDICARE MANAGED CARE	\$831,060	\$1,124,714	\$293,654	35%
3	MEDICAID	\$1,817,276	\$1,858,080	\$40,804	2%
4	MEDICAID MANAGED CARE	\$5,612,650	\$6,164,483	\$551,833	10%
5	CHAMPUS/TRICARE	\$138,608	\$153,427	\$14,819	11%
6	COMMERCIAL INSURANCE	\$2,625,946	\$6,275,921	\$3,649,975	139%
7	NON-GOVERNMENT MANAGED CARE	\$9,551,917	\$5,511,938	(\$4,039,979)	-42%
8	WORKER'S COMPENSATION	\$558,408	\$478,963	(\$79,445)	-14%
9	SELF- PAY/UNINSURED	\$3,010,997	\$2,668,724	(\$342,273)	-11%
10	SAGA	\$2,278,576	\$2,376,412	\$97,836	4%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$32,827,039	\$33,660,630	\$833,591	3%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$1,509,145	\$1,715,475	\$206,330	14%
2	MEDICARE MANAGED CARE	\$174,529	\$220,781	\$46,252	27%
3	MEDICAID	\$529,076	\$548,505	\$19,429	4%
4	MEDICAID MANAGED CARE	\$1,431,422	\$1,552,833	\$121,411	8%
5	CHAMPUS/TRICARE	\$30,574	\$34,751	\$4,177	14%
6	COMMERCIAL INSURANCE	\$2,473,606	\$2,519,155	\$45,549	2%
7	NON-GOVERNMENT MANAGED CARE	\$1,653,089	\$1,919,257	\$266,168	16%
8	WORKER'S COMPENSATION	\$558,408	\$478,963	(\$79,445)	-14%
9	SELF- PAY/UNINSURED	\$166,837	\$128,899	(\$37,938)	-23%
10	SAGA	\$458,514	\$285,169	(\$173,345)	-38%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$8,985,200	\$9,403,788	\$418,588	5%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	4,969	5,182	213	4%
2	MEDICARE MANAGED CARE	695	915	220	32%
3	MEDICAID	1,723	1,542	(181)	-11%
4	MEDICAID MANAGED CARE	7,002	7,609	607	9%
5	CHAMPUS/TRICARE	148	141	(7)	-5%
6	COMMERCIAL INSURANCE	2,987	6,409	3,422	115%
7	NON-GOVERNMENT MANAGED CARE	9,623	5,134	(4,489)	-47%
8	WORKER'S COMPENSATION	714	589	(125)	-18%
9	SELF- PAY/UNINSURED	3,967	3,564	(403)	-10%
10	SAGA	2,582	2,466	(116)	-4%
11	OTHER	0	0	0	0%

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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
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	34,410	33,551	(859)	-2%

**BRISTOL 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>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$19,832,509	\$21,080,745	\$1,248,236	6%
2	Physician Salaries	\$724,920	\$539,198	(\$185,722)	-26%
3	Non-Nursing, Non-Physician Salaries	\$31,278,113	\$32,074,903	\$796,790	3%
	Total Salaries & Wages	\$51,835,542	\$53,694,846	\$1,859,304	4%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$4,792,505	\$5,421,117	\$628,612	13%
2	Physician Fringe Benefits	\$175,176	\$138,660	(\$36,516)	-21%
3	Non-Nursing, Non-Physician Fringe Benefits	\$7,652,934	\$8,248,371	\$595,437	8%
	Total Fringe Benefits	\$12,620,615	\$13,808,148	\$1,187,533	9%
C. Contractual Labor Fees:					
1	Nursing Fees	\$835,425	\$459,503	(\$375,922)	-45%
2	Physician Fees	\$3,061,314	\$4,436,306	\$1,374,992	45%
3	Non-Nursing, Non-Physician Fees	\$875,061	\$757,788	(\$117,273)	-13%
	Total Contractual Labor Fees	\$4,771,800	\$5,653,597	\$881,797	18%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$9,145,772	\$9,611,576	\$465,804	5%
2	Pharmaceutical Costs	\$5,160,418	\$6,447,953	\$1,287,535	25%
	Total Medical Supplies and Pharmaceutical Cost	\$14,306,190	\$16,059,529	\$1,753,339	12%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$2,549,538	\$2,442,111	(\$107,427)	-4%
2	Depreciation-Equipment	\$3,218,942	\$2,938,850	(\$280,092)	-9%
3	Amortization	\$57,750	\$57,752	\$2	0%
	Total Depreciation and Amortization	\$5,826,230	\$5,438,713	(\$387,517)	-7%
F. Bad Debts:					
1	Bad Debts	\$10,951,622	\$9,166,346	(\$1,785,276)	-16%
G. Interest Expense:					
1	Interest Expense	\$2,035,567	\$1,891,953	(\$143,614)	-7%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$1,106,630	\$1,255,062	\$148,432	13%
I. Utilities:					
1	Water	\$82,983	\$57,139	(\$25,844)	-31%
2	Natural Gas	\$893,993	\$1,031,026	\$137,033	15%
3	Oil	\$49,899	\$5,091	(\$44,808)	-90%
4	Electricity	\$1,362,505	\$1,424,828	\$62,323	5%
5	Telephone	\$291,442	\$276,016	(\$15,426)	-5%
6	Other Utilities	\$1,641	\$794	(\$847)	-52%
	Total Utilities	\$2,682,463	\$2,794,894	\$112,431	4%
J. Business Expenses:					
1	Accounting Fees	\$146,316	\$136,529	(\$9,787)	-7%
2	Legal Fees	\$350,834	\$380,379	\$29,545	8%
3	Consulting Fees	\$952,292	\$1,044,767	\$92,475	10%
4	Dues and Membership	\$241,769	\$246,904	\$5,135	2%
5	Equipment Leases	\$653,095	\$584,303	(\$68,792)	-11%
6	Building Leases	\$935,855	\$784,641	(\$151,214)	-16%
7	Repairs and Maintenance	\$736,074	\$813,156	\$77,082	10%
8	Insurance	\$347,728	\$300,276	(\$47,452)	-14%

**BRISTOL 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	\$218,066	\$205,515	(\$12,551)	-6%
10	Conferences	\$3,150	\$6,834	\$3,684	117%
11	Property Tax	\$40,565	\$31,054	(\$9,511)	-23%
12	General Supplies	\$730,779	\$703,193	(\$27,586)	-4%
13	Licenses and Subscriptions	\$79,434	\$71,376	(\$8,058)	-10%
14	Postage and Shipping	\$192,037	\$183,302	(\$8,735)	-5%
15	Advertising	\$1,038,923	\$777,609	(\$261,314)	-25%
16	Other Business Expenses	\$12,909,436	\$13,624,473	\$715,037	6%
	Total Business Expenses	\$19,576,353	\$19,894,311	\$317,958	2%
K.	<u>Other Operating Expense:</u>				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$125,713,012	\$129,657,399	\$3,944,387	3%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				
II.	<u>OPERATING EXPENSE BY DEPARTMENT</u>				
A.	<u>General Services:</u>				
1	General Administration	\$4,139,592	\$4,769,915	\$630,323	15%
2	General Accounting	\$1,970,911	\$1,561,141	(\$409,770)	-21%
3	Patient Billing & Collection	\$1,808,582	\$2,265,434	\$456,852	25%
4	Admitting / Registration Office	\$669,685	\$688,697	\$19,012	3%
5	Data Processing	\$2,705,942	\$2,967,179	\$261,237	10%
6	Communications	\$548,859	\$315,397	(\$233,462)	-43%
7	Personnel	\$1,339,779	\$1,107,940	(\$231,839)	-17%
8	Public Relations	\$851,343	\$919,758	\$68,415	8%
9	Purchasing	\$687,616	\$687,419	(\$197)	0%
10	Dietary and Cafeteria	\$1,705,295	\$1,676,704	(\$28,591)	-2%
11	Housekeeping	\$1,768,336	\$1,782,878	\$14,542	1%
12	Laundry & Linen	\$475,915	\$507,235	\$31,320	7%
13	Operation of Plant	\$2,341,065	\$2,582,257	\$241,192	10%
14	Security	\$360,105	\$423,323	\$63,218	18%
15	Repairs and Maintenance	\$2,561,157	\$2,512,915	(\$48,242)	-2%
16	Central Sterile Supply	\$496,165	\$438,356	(\$57,809)	-12%
17	Pharmacy Department	\$6,285,248	\$7,847,289	\$1,562,041	25%
18	Other General Services	\$1,325,737	\$1,183,474	(\$142,263)	-11%
	Total General Services	\$32,041,332	\$34,237,311	\$2,195,979	7%
B.	<u>Professional Services:</u>				
1	Medical Care Administration	\$844,580	\$1,216,034	\$371,454	44%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,185,062	\$1,353,852	\$168,790	14%
4	Medical Records	\$1,808,237	\$1,795,630	(\$12,607)	-1%
5	Social Service	\$797,654	\$769,820	(\$27,834)	-3%
6	Other Professional Services	\$2,128,499	\$3,002,190	\$873,691	41%
	Total Professional Services	\$6,764,032	\$8,137,526	\$1,373,494	20%
C.	<u>Special Services:</u>				
1	Operating Room	\$8,513,615	\$8,912,839	\$399,224	5%
2	Recovery Room	\$811,102	\$814,922	\$3,820	0%
3	Anesthesiology	\$166,135	\$157,148	(\$8,987)	-5%
4	Delivery Room	\$391,762	\$407,077	\$15,315	4%
5	Diagnostic Radiology	\$2,553,953	\$2,730,257	\$176,304	7%
6	Diagnostic Ultrasound	\$379,966	\$397,088	\$17,122	5%
7	Radiation Therapy	\$29,220	\$36,148	\$6,928	24%

**BRISTOL 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	\$624,430	\$498,772	(\$125,658)	-20%
9	CT Scan	\$792,223	\$861,637	\$69,414	9%
10	Laboratory	\$4,294,332	\$4,817,798	\$523,466	12%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$702,929	\$727,243	\$24,314	3%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$22,312	\$20,195	(\$2,117)	-9%
15	Occupational Therapy	\$170,584	\$166,130	(\$4,454)	-3%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$6,300	\$888,587	\$882,287	14005%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$272,436	\$221,307	(\$51,129)	-19%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$253,292	\$259,797	\$6,505	3%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$4,097,267	\$3,672,244	(\$425,023)	-10%
25	MRI	\$1,116,442	\$1,137,315	\$20,873	2%
26	PET Scan	\$729,990	\$483,112	(\$246,878)	-34%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,133,702	\$1,179,805	\$46,103	4%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,567,769	\$1,484,964	(\$82,805)	-5%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$3,121,038	\$3,338,938	\$217,900	7%
	Total Special Services	\$31,750,799	\$33,213,323	\$1,462,524	5%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$8,200,099	\$8,205,620	\$5,521	0%
2	Intensive Care Unit	\$3,164,093	\$3,170,209	\$6,116	0%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,005,786	\$2,062,084	\$56,298	3%
5	Pediatric Unit	\$266,789	\$237,930	(\$28,859)	-11%
6	Maternity Unit	\$1,923,881	\$1,775,021	(\$148,860)	-8%
7	Newborn Nursery Unit	\$324,780	\$373,362	\$48,582	15%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$869,947	\$903,309	\$33,362	4%
11	Home Care	\$2,363,752	\$2,491,206	\$127,454	5%
12	Outpatient Clinics	\$4,196,574	\$3,800,294	(\$396,280)	-9%
13	Other Routine Services	\$704,199	\$690,666	(\$13,533)	-2%
	Total Routine Services	\$24,019,900	\$23,709,701	(\$310,199)	-1%
E.	<u>Other Departments:</u>				
1	Miscellaneous Other Departments	\$31,136,949	\$30,359,538	(\$777,411)	-2%
	Total Operating Expenses - All Departments*	\$125,713,012	\$129,657,399	\$3,944,387	3%
	*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

BRISTOL 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
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$114,164,519	\$ 119,290,195	\$124,989,832
2	Other Operating Revenue	4,581,688	6,592,514	4,717,358
3	Total Operating Revenue	\$118,746,207	\$125,882,709	\$129,707,190
4	Total Operating Expenses	122,064,635	125,713,012	129,657,399
5	Income/(Loss) From Operations	(\$3,318,428)	\$169,697	\$49,791
6	Total Non-Operating Revenue	10,737,106	(1,155,433)	323,607
7	Excess/(Deficiency) of Revenue Over Expenses	\$7,418,678	(\$985,736)	\$373,398
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	-2.56%	0.14%	0.04%
2	Hospital Non Operating Margin	8.29%	-0.93%	0.25%
3	Hospital Total Margin	5.73%	-0.79%	0.29%
4	Income/(Loss) From Operations	(\$3,318,428)	\$169,697	\$49,791
5	Total Operating Revenue	\$118,746,207	\$125,882,709	\$129,707,190
6	Total Non-Operating Revenue	\$10,737,106	(\$1,155,433)	\$323,607
7	Total Revenue	\$129,483,313	\$124,727,276	\$130,030,797
8	Excess/(Deficiency) of Revenue Over Expenses	\$7,418,678	(\$985,736)	\$373,398
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$31,129,463	\$18,132,104	(\$255,398)
2	Hospital Total Net Assets	\$41,084,073	\$26,424,439	\$7,239,260
3	Hospital Change in Total Net Assets	\$41,084,073	(\$14,659,634)	(\$19,185,179)
4	Hospital Change in Total Net Assets %	0.0%	-35.7%	-72.6%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.33	0.33	0.36
2	Total Operating Expenses	\$111,542,211	\$114,761,390	\$129,657,399
3	Total Gross Revenue	\$329,686,767	\$344,471,295	\$359,092,081
4	Total Other Operating Revenue	\$4,581,688	\$5,949,098	\$4,093,007
5	Private Payment to Cost Ratio	1.10	1.18	1.18
6	Total Non-Government Payments	\$51,001,178	\$55,968,949	\$60,660,353

BRISTOL 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	\$470,349	\$361,489	\$291,719
8	Total Non-Government Charges	\$145,272,348	\$151,566,995	\$149,913,369
9	Total Uninsured Charges	\$7,745,044	\$7,695,384	\$6,443,301
10	<u>Medicare Payment to Cost Ratio</u>	0.92	0.91	0.81
11	Total Medicare Payments	\$43,151,898	\$43,528,082	\$45,920,967
12	Total Medicare Charges	\$140,591,338	\$146,490,067	\$157,966,228
13	<u>Medicaid Payment to Cost Ratio</u>	0.87	0.84	0.75
14	Total Medicaid Payments	\$9,376,136	\$9,420,308	\$9,867,439
15	Total Medicaid Charges	\$32,160,526	\$34,253,380	\$37,068,141
16	<u>Uncompensated Care Cost</u>	\$3,929,667	\$3,891,013	\$3,471,915
17	Charity Care	\$1,253,957	\$929,468	\$558,883
18	Bad Debts	\$10,522,424	\$10,951,622	\$9,166,346
19	Total Uncompensated Care	\$11,776,381	\$11,881,090	\$9,725,229
20	<u>Uncompensated Care % of Total Expenses</u>	3.5%	3.4%	2.7%
21	Total Operating Expenses	\$111,542,211	\$114,761,390	\$129,657,399
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.09	1.14	1.25
2	Total Current Assets	\$25,494,117	\$26,125,551	\$29,039,941
3	Total Current Liabilities	\$23,427,988	\$22,968,568	\$23,178,964
4	<u>Days Cash on Hand</u>	4	10	20
5	Cash and Cash Equivalents	\$1,145,449	\$3,254,877	\$6,746,197
6	Short Term Investments	91,905	95,129	96,062
7	Total Cash and Short Term Investments	\$1,237,354	\$3,350,006	\$6,842,259
8	Total Operating Expenses	\$122,064,635	\$125,713,012	\$129,657,399
9	Depreciation Expense	\$6,035,523	\$5,826,230	\$5,438,713
10	Operating Expenses less Depreciation Expense	\$116,029,112	\$119,886,782	\$124,218,686
11	<u>Days Revenue in Patient Accounts Receivable</u>	52.66	49.21	45.19

BRISTOL 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
12	Net Patient Accounts Receivable	\$ 17,942,004	\$ 16,477,565	\$ 16,448,223
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,472,532	\$394,236	\$971,897
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 16,469,472	\$ 16,083,329	\$ 15,476,326
16	Total Net Patient Revenue	\$114,164,519	\$ 119,290,195	\$ 124,989,832
17	Average Payment Period	73.70	69.93	68.11
18	Total Current Liabilities	\$23,427,988	\$22,968,568	\$23,178,964
19	Total Operating Expenses	\$122,064,635	\$125,713,012	\$129,657,399
20	Depreciation Expense	\$6,035,523	\$5,826,230	\$5,438,713
21	Total Operating Expenses less Depreciation Expense	\$116,029,112	\$119,886,782	\$124,218,686
F. Solvency Measures Summary				
1	Equity Financing Ratio	39.7	29.0	7.7
2	Total Net Assets	\$41,084,073	\$26,424,439	\$7,239,260
3	Total Assets	\$103,534,725	\$91,200,529	\$94,428,773
4	Cash Flow to Total Debt Ratio	25.4	9.4	11.5
5	Excess/(Deficiency) of Revenues Over Expenses	\$7,418,678	(\$985,736)	\$373,398
6	Depreciation Expense	\$6,035,523	\$5,826,230	\$5,438,713
7	Excess of Revenues Over Expenses and Depreciation Expense	\$13,454,201	\$4,840,494	\$5,812,111
8	Total Current Liabilities	\$23,427,988	\$22,968,568	\$23,178,964
9	Total Long Term Debt	\$29,604,718	\$28,270,048	\$27,362,133
10	Total Current Liabilities and Total Long Term Debt	\$53,032,706	\$51,238,616	\$50,541,097
11	Long Term Debt to Capitalization Ratio	41.9	51.7	79.1
12	Total Long Term Debt	\$29,604,718	\$28,270,048	\$27,362,133
13	Total Net Assets	\$41,084,073	\$26,424,439	\$7,239,260
14	Total Long Term Debt and Total Net Assets	\$70,688,791	\$54,694,487	\$34,601,393
15	Debt Service Coverage Ratio	7.6	3.4	2.4
16	Excess Revenues over Expenses	\$7,418,678	(\$985,736)	\$373,398
17	Interest Expense	\$2,028,558	\$2,035,567	\$1,891,953
18	Depreciation and Amortization Expense	\$6,035,523	\$5,826,230	\$5,438,713

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
19	Principal Payments	\$0	\$0	\$1,336,136
G. <u>Other Financial Ratios</u>				
20	<u>Average Age of Plant</u>	12.8	14.3	16.2
21	Accumulated Depreciation	\$77,300,854	\$83,066,063	\$88,333,810
22	Depreciation and Amortization Expense	\$6,035,523	\$5,826,230	\$5,438,713
H. <u>Utilization Measures Summary</u>				
1	Patient Days	33,663	33,258	33,658
2	Discharges	8,064	8,016	7,846
3	ALOS	4.2	4.1	4.3
4	Staffed Beds	115	115	132
5	Available Beds	-	-	154
6	Licensed Beds	154	154	154
6	Occupancy of Staffed Beds	80.2%	79.2%	69.9%
7	Occupancy of Available Beds	59.9%	59.2%	59.9%
8	Full Time Equivalent Employees	876.5	905.1	899.4
I. <u>Hospital Gross Revenue Payer Mix Percentage</u>				
1	Non-Government Gross Revenue Payer Mix Percentage	41.7%	41.8%	40.0%
2	Medicare Gross Revenue Payer Mix Percentage	42.6%	42.5%	44.0%
3	Medicaid Gross Revenue Payer Mix Percentage	9.8%	9.9%	10.3%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.3%	3.2%	3.8%
5	Uninsured Gross Revenue Payer Mix Percentage	2.3%	2.2%	1.8%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.3%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$137,527,304	\$143,871,611	\$143,470,068
9	Medicare Gross Revenue (Charges)	\$140,591,338	\$146,490,067	\$157,966,228
10	Medicaid Gross Revenue (Charges)	\$32,160,526	\$34,253,380	\$37,068,141
11	Other Medical Assistance Gross Revenue (Charges)	\$10,742,037	\$11,114,411	\$13,517,699
12	Uninsured Gross Revenue (Charges)	\$7,745,044	\$7,695,384	\$6,443,301
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$920,518	\$1,046,442	\$626,644
14	Total Gross Revenue (Charges)	\$329,686,767	\$344,471,295	\$359,092,081
J. <u>Hospital Net Revenue Payer Mix Percentage</u>				
1	Non-Government Net Revenue Payer Mix Percentage	47.9%	49.9%	51.0%

BRISTOL 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	40.9%	39.1%	38.8%
3	Medicaid Net Revenue Payer Mix Percentage	8.9%	8.5%	8.3%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.7%	2.0%	1.5%
5	Uninsured Net Revenue Payer Mix Percentage	0.4%	0.3%	0.2%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.2%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$50,530,829	\$55,607,460	\$60,368,634
9	Medicare Net Revenue (Payments)	\$43,151,898	\$43,528,082	\$45,920,967
10	Medicaid Net Revenue (Payments)	\$9,376,136	\$9,420,308	\$9,867,439
11	Other Medical Assistance Net Revenue (Payments)	\$1,795,197	\$2,271,023	\$1,826,700
12	Uninsured Net Revenue (Payments)	\$470,349	\$361,489	\$291,719
13	CHAMPUS / TRICARE Net Revenue Payments)	\$226,669	\$257,679	\$170,999
14	Total Net Revenue (Payments)	\$105,551,078	\$111,446,041	\$118,446,458
K. Discharges				
1	Non-Government (Including Self Pay / Uninsured)	3,046	2,879	2,731
2	Medicare	3,589	3,640	3,597
3	Medical Assistance	1,412	1,486	1,507
4	Medicaid	1,049	1,106	1,084
5	Other Medical Assistance	363	380	423
6	CHAMPUS / TRICARE	17	11	11
7	Uninsured (Included In Non-Government)	79	80	43
8	Total	8,064	8,016	7,846
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	0.892700	0.969300	0.955900
2	Medicare	1.250700	1.280200	1.300400
3	Medical Assistance	0.819310	0.808915	0.829200
4	Medicaid	0.804400	0.774700	0.802900
5	Other Medical Assistance	0.862400	0.908500	0.896600
6	CHAMPUS / TRICARE	0.727900	1.667400	1.054000
7	Uninsured (Included In Non-Government)	0.915800	0.929500	0.964600
8	Total Case Mix Index	1.038835	1.081703	1.089638
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	5,667	5,723	5,501
2	Emergency Room - Treated and Discharged	33,859	34,410	33,551
3	Total Emergency Room Visits	39,526	40,133	39,052

BRISTOL 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
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$0	\$279,518	\$279,518	0%
2	Inpatient Payments	\$0	\$96,469	\$96,469	0%
3	Outpatient Charges	\$0	\$374,380	\$374,380	0%
4	Outpatient Payments	\$0	\$94,011	\$94,011	0%
5	Discharges	0	17	17	0%
6	Patient Days	0	59	59	0%
7	Outpatient Visits (Excludes ED Visits)	0	122	122	0%
8	Emergency Department Outpatient Visits	0	21	21	0%
9	Emergency Department Inpatient Admissions	0	15	15	0%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$653,898	\$653,898	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$190,480	\$190,480	0%
B. CIGNA HEALTHCARE					
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%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$0	\$2,589,209	\$2,589,209	0%
2	Inpatient Payments	\$0	\$914,837	\$914,837	0%
3	Outpatient Charges	\$0	\$3,370,447	\$3,370,447	0%
4	Outpatient Payments	\$0	\$610,093	\$610,093	0%
5	Discharges	0	105	105	0%
6	Patient Days	0	537	537	0%
7	Outpatient Visits (Excludes ED Visits)	0	1,432	1,432	0%
8	Emergency Department Outpatient Visits	0	138	138	0%
9	Emergency Department Inpatient Admissions	0	91	91	0%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$5,959,656	\$5,959,656	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$1,524,930	\$1,524,930	0%
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$8,000,438	\$7,857,376	(\$143,062)	-2%
2	Inpatient Payments	\$2,785,680	\$2,766,924	(\$18,756)	-1%
3	Outpatient Charges	\$7,638,918	\$8,116,968	\$478,050	6%
4	Outpatient Payments	\$1,515,882	\$1,612,303	\$96,421	6%
5	Discharges	329	335	6	2%
6	Patient Days	1,667	1,707	40	2%
7	Outpatient Visits (Excludes ED Visits)	3,588	3,736	148	4%
8	Emergency Department Outpatient Visits	433	454	21	5%
9	Emergency Department Inpatient Admissions	286	276	(10)	-3%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$15,639,356	\$15,974,344	\$334,988	2%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,301,562	\$4,379,227	\$77,665	2%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$1,203,408	\$628,831	(\$574,577)	-48%
2	Inpatient Payments	\$665,898	\$173,268	(\$492,630)	-74%
3	Outpatient Charges	\$1,480,838	\$525,460	(\$955,378)	-65%
4	Outpatient Payments	\$390,643	\$96,627	(\$294,016)	-75%
5	Discharges	89	22	(67)	-75%
6	Patient Days	322	144	(178)	-55%
7	Outpatient Visits (Excludes ED Visits)	767	166	(601)	-78%
8	Emergency Department Outpatient Visits	186	47	(139)	-75%
9	Emergency Department Inpatient Admissions	70	18	(52)	-74%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$2,684,246	\$1,154,291	(\$1,529,955)	-57%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,056,541	\$269,895	(\$786,646)	-74%

BRISTOL 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
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$78,735	\$78,735	0%
2	Inpatient Payments	\$0	\$23,592	\$23,592	0%
3	Outpatient Charges	\$0	\$21,513	\$21,513	0%
4	Outpatient Payments	\$0	\$3,972	\$3,972	0%
5	Discharges	0	3	3	0%
6	Patient Days	0	11	11	0%
7	Outpatient Visits (Excludes ED Visits)	0	17	17	0%
8	Emergency Department Outpatient Visits	0	6	6	0%
9	Emergency Department Inpatient Admissions	0	2	2	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$100,248	\$100,248	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$27,564	\$27,564	0%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$254,671	\$493,474	\$238,803	94%
2	Inpatient Payments	\$103,689	\$125,527	\$21,838	21%
3	Outpatient Charges	\$272,379	\$426,670	\$154,291	57%
4	Outpatient Payments	\$65,895	\$78,878	\$12,983	20%
5	Discharges	18	21	3	17%
6	Patient Days	82	109	27	33%
7	Outpatient Visits (Excludes ED Visits)	187	275	88	47%
8	Emergency Department Outpatient Visits	76	97	21	28%
9	Emergency Department Inpatient Admissions	15	20	5	33%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$527,050	\$920,144	\$393,094	75%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$169,584	\$204,405	\$34,821	21%
I. AETNA					
1	Inpatient Charges	\$0	\$478,002	\$478,002	0%
2	Inpatient Payments	\$0	\$198,690	\$198,690	0%
3	Outpatient Charges	\$0	\$381,495	\$381,495	0%
4	Outpatient Payments	\$0	\$95,576	\$95,576	0%
5	Discharges	0	17	17	0%
6	Patient Days	0	112	112	0%
7	Outpatient Visits (Excludes ED Visits)	0	260	260	0%
8	Emergency Department Outpatient Visits	0	34	34	0%
9	Emergency Department Inpatient Admissions	0	15	15	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$859,497	\$859,497	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$294,266	\$294,266	0%
J. HUMANA					
1	Inpatient Charges	\$0	\$27,088	\$27,088	0%
2	Inpatient Payments	\$0	\$14,002	\$14,002	0%
3	Outpatient Charges	\$0	\$18,255	\$18,255	0%
4	Outpatient Payments	\$0	\$8,628	\$8,628	0%
5	Discharges	0	1	1	0%
6	Patient Days	0	3	3	0%
7	Outpatient Visits (Excludes ED Visits)	0	10	10	0%
8	Emergency Department Outpatient Visits	0	6	6	0%
9	Emergency Department Inpatient Admissions	0	1	1	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$45,343	\$45,343	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$22,630	\$22,630	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
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%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
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%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
M.	UNIVERSAL AMERICAN				
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%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$0	\$869,270	\$869,270	0%
2	Inpatient Payments	\$0	\$317,237	\$317,237	0%
3	Outpatient Charges	\$0	\$809,421	\$809,421	0%
4	Outpatient Payments	\$0	\$156,233	\$156,233	0%
5	Discharges	0	46	46	0%
6	Patient Days	0	213	213	0%
7	Outpatient Visits (Excludes ED Visits)	0	412	412	0%
8	Emergency Department Outpatient Visits	0	112	112	0%
9	Emergency Department Inpatient Admissions	0	46	46	0%
	TOTAL INPATIENT & OUTPATIENT CHARGE\$	\$0	\$1,678,691	\$1,678,691	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$473,470	\$473,470	0%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$9,458,517	\$13,301,503	\$3,842,986	41%
	TOTAL INPATIENT PAYMENTS	\$3,555,267	\$4,630,546	\$1,075,279	30%
	TOTAL OUTPATIENT CHARGES	\$9,392,135	\$14,044,609	\$4,652,474	50%
	TOTAL OUTPATIENT PAYMENTS	\$1,972,420	\$2,756,321	\$783,901	40%
	TOTAL DISCHARGES	436	567	131	30%
	TOTAL PATIENT DAYS	2,071	2,895	824	40%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	4,542	6,430	1,888	42%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	695	915	220	32%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	371	484	113	30%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$18,850,652	\$27,346,112	\$8,495,460	45%
	TOTAL INPATIENT & OUTPATIENT PAYMENT\$	\$5,527,687	\$7,386,867	\$1,859,180	34%

BRISTOL 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
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$4,291,239	\$1,355,456	(\$2,935,783)	-68%
2	Inpatient Payments	\$1,041,962	\$276,563	(\$765,399)	-73%
3	Outpatient Charges	\$11,509,542	\$3,222,670	(\$8,286,872)	-72%
4	Outpatient Payments	\$2,925,726	\$820,594	(\$2,105,132)	-72%
5	Discharges	468	112	(356)	-76%
6	Patient Days	1,143	321	(822)	-72%
7	Outpatient Visits (Excludes ED Visits)	5,414	1,423	(3,991)	-74%
8	Emergency Department Outpatient Visits	5,524	1,531	(3,993)	-72%
9	Emergency Department Inpatient Admissions	151	42	(109)	-72%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,800,781	\$4,578,126	(\$11,222,655)	-71%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,967,688	\$1,097,157	(\$2,870,531)	-72%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$861,259	\$3,849,665	\$2,988,406	347%
2	Inpatient Payments	\$208,650	\$934,795	\$726,145	348%
3	Outpatient Charges	\$1,614,792	\$10,182,839	\$8,568,047	531%
4	Outpatient Payments	\$371,019	\$2,461,682	\$2,090,663	563%
5	Discharges	95	393	298	314%
6	Patient Days	227	987	760	335%
7	Outpatient Visits (Excludes ED Visits)	662	4,647	3,985	602%
8	Emergency Department Outpatient Visits	974	4,432	3,458	355%
9	Emergency Department Inpatient Admissions	30	107	77	257%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,476,051	\$14,032,504	\$11,556,453	467%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$579,669	\$3,396,477	\$2,816,808	486%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$452,946	\$0	(\$452,946)	-100%
2	Inpatient Payments	\$136,280	\$0	(\$136,280)	-100%
3	Outpatient Charges	\$732,083	\$7,217	(\$724,866)	-99%
4	Outpatient Payments	\$191,940	\$1,458	(\$190,482)	-99%
5	Discharges	44	0	(44)	-100%
6	Patient Days	149	0	(149)	-100%
7	Outpatient Visits (Excludes ED Visits)	418	11	(407)	-97%
8	Emergency Department Outpatient Visits	355	2	(353)	-99%
9	Emergency Department Inpatient Admissions	11	0	(11)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,185,029	\$7,217	(\$1,177,812)	-99%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$328,220	\$1,458	(\$326,762)	-100%

BRISTOL 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
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$682,977	\$889,478	\$206,501	30%
2	Inpatient Payments	\$213,614	\$252,527	\$38,913	18%
3	Outpatient Charges	\$575,378	\$727,698	\$152,320	26%
4	Outpatient Payments	\$198,131	\$285,984	\$87,853	44%
5	Discharges	81	97	16	20%
6	Patient Days	322	382	60	19%
7	Outpatient Visits (Excludes ED Visits)	1,113	1,219	106	10%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	74	91	17	23%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,258,355	\$1,617,176	\$358,821	29%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$411,745	\$538,511	\$126,766	31%
E. WELLCARE OF CONNECTICUT					
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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$107,066	\$0	(\$107,066)	-100%
2	Inpatient Payments	\$26,316	\$0	(\$26,316)	-100%
3	Outpatient Charges	\$259,520	\$0	(\$259,520)	-100%
4	Outpatient Payments	\$59,982	\$0	(\$59,982)	-100%
5	Discharges	12	0	(12)	-100%
6	Patient Days	28	0	(28)	-100%
7	Outpatient Visits (Excludes ED Visits)	137	0	(137)	-100%
8	Emergency Department Outpatient Visits	148	0	(148)	-100%

BRISTOL 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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$366,586	\$0	(\$366,586)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$86,298	\$0	(\$86,298)	-100%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$268,960	\$268,960	0%
2	Inpatient Payments	\$0	\$72,467	\$72,467	0%
3	Outpatient Charges	\$0	\$664,267	\$664,267	0%
4	Outpatient Payments	\$0	\$164,451	\$164,451	0%
5	Discharges	0	28	28	0%
6	Patient Days	0	73	73	0%
7	Outpatient Visits (Excludes ED Visits)	0	137	137	0%
8	Emergency Department Outpatient Visits	0	436	436	0%
9	Emergency Department Inpatient Admissions	0	17	17	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$933,227	\$933,227	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$236,918	\$236,918	0%
H.	AETNA				
1	Inpatient Charges	\$0	\$537,956	\$537,956	0%
2	Inpatient Payments	\$0	\$132,974	\$132,974	0%
3	Outpatient Charges	\$0	\$1,817,019	\$1,817,019	0%
4	Outpatient Payments	\$0	\$452,680	\$452,680	0%
5	Discharges	0	57	57	0%
6	Patient Days	0	143	143	0%
7	Outpatient Visits (Excludes ED Visits)	0	465	465	0%
8	Emergency Department Outpatient Visits	0	1,208	1,208	0%
9	Emergency Department Inpatient Admissions	0	21	21	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$2,354,975	\$2,354,975	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$585,654	\$585,654	0%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$6,395,487	\$6,901,515	\$506,028	8%
	TOTAL INPATIENT PAYMENTS	\$1,626,822	\$1,669,326	\$42,504	3%
	TOTAL OUTPATIENT CHARGES	\$14,691,315	\$16,621,710	\$1,930,395	13%
	TOTAL OUTPATIENT PAYMENTS	\$3,746,798	\$4,186,849	\$440,051	12%
	TOTAL DISCHARGES	700	687	(13)	-2%
	TOTAL PATIENT DAYS	1,869	1,906	37	2%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	7,744	7,902	158	2%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	7,002	7,609	607	9%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	267	278	11	4%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$21,086,802	\$23,523,225	\$2,436,423	12%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,373,620	\$5,856,175	\$482,555	9%

**BRISTOL 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

BRISTOL HOSPITAL & HEALTH CARE GROUP, 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.	<u>ASSETS</u>				
A.	<u>Current Assets:</u>				
1	Cash and Cash Equivalents	\$6,161,025	\$9,448,477	\$3,287,452	53%
2	Short Term Investments	\$1,572,924	\$1,329,434	(\$243,490)	-15%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$20,231,304	\$19,948,367	(\$282,937)	-1%
4	Current Assets Whose Use is Limited for Current Liabilities	\$578,724	\$881,487	\$302,763	52%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,254,575	\$1,680,523	\$425,948	34%
8	Prepaid Expenses	\$1,433,389	\$1,370,429	(\$62,960)	-4%
9	Other Current Assets	\$1,701,640	\$2,020,583	\$318,943	19%
	Total Current Assets	\$32,933,581	\$36,679,300	\$3,745,719	11%
B.	<u>Noncurrent Assets Whose Use is Limited:</u>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$7,069,774	\$5,803,094	(\$1,266,680)	-18%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$5,721,634	\$15,884,754	\$10,163,120	178%
	Total Noncurrent Assets Whose Use is Limited:	\$12,791,408	\$21,687,848	\$8,896,440	70%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$7,954,202	\$5,552,518	(\$2,401,684)	-30%
7	Other Noncurrent Assets	\$7,497,550	\$3,079,683	(\$4,417,867)	-59%
C.	<u>Net Fixed Assets:</u>				
1	Property, Plant and Equipment	\$133,764,600	\$136,207,416	\$2,442,816	2%
2	Less: Accumulated Depreciation	\$92,072,391	\$97,781,638	\$5,709,247	\$0
	Property, Plant and Equipment, Net	\$41,692,209	\$38,425,778	(\$3,266,431)	-8%
3	Construction in Progress	\$450,118	\$807,258	\$357,140	79%
	Total Net Fixed Assets	\$42,142,327	\$39,233,036	(\$2,909,291)	-7%
	Total Assets	\$103,319,068	\$106,232,385	\$2,913,317	3%

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(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>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$9,279,548	\$8,832,722	(\$446,826)	-5%
2	Salaries, Wages and Payroll Taxes	\$6,930,113	\$6,367,472	(\$562,641)	-8%
3	Due To Third Party Payers	\$394,236	\$971,897	\$577,661	147%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,751,114	\$1,339,455	(\$411,659)	-24%
6	Current Portion of Notes Payable	\$6,410	\$6,738	\$328	5%
7	Other Current Liabilities	\$7,291,756	\$7,929,831	\$638,075	9%
	Total Current Liabilities	\$25,653,177	\$25,448,115	(\$205,062)	-1%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$34,118,769	\$32,787,601	(\$1,331,168)	-4%
2	Notes Payable (Net of Current Portion)	\$319,228	\$312,489	(\$6,739)	-2%
	Total Long Term Debt	\$34,437,997	\$33,100,090	(\$1,337,907)	-4%
3	Accrued Pension Liability	\$2,820,258	\$21,959,738	\$19,139,480	679%
4	Other Long Term Liabilities	\$12,016,031	\$17,013,627	\$4,997,596	42%
	Total Long Term Liabilities	\$49,274,286	\$72,073,455	\$22,799,169	46%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$20,022,942	\$1,045,617	(\$18,977,325)	-95%
2	Temporarily Restricted Net Assets	\$1,726,398	\$1,110,279	(\$616,119)	-36%
3	Permanently Restricted Net Assets	\$6,642,265	\$6,554,919	(\$87,346)	-1%
	Total Net Assets	\$28,391,605	\$8,710,815	(\$19,680,790)	-69%
	Total Liabilities and Net Assets	\$103,319,068	\$106,232,385	\$2,913,317	3%

BRISTOL HOSPITAL & HEALTH CARE GROUP, 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
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$379,425,005	\$396,364,698	\$16,939,693	4%
2	Less: Allowances	\$234,654,378	\$244,638,266	\$9,983,888	4%
3	Less: Charity Care	\$929,468	\$558,883	(\$370,585)	-40%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$143,841,159	\$151,167,549	\$7,326,390	5%
5	Other Operating Revenue	\$6,370,703	\$6,200,797	(\$169,906)	-3%
6	Net Assets Released from Restrictions	\$1,642,038	\$0	(\$1,642,038)	-100%
	Total Operating Revenue	\$151,853,900	\$157,368,346	\$5,514,446	4%
B. Operating Expenses:					
1	Salaries and Wages	\$67,209,464	\$70,157,791	\$2,948,327	4%
2	Fringe Benefits	\$15,101,125	\$17,072,257	\$1,971,132	13%
3	Physicians Fees	\$3,061,314	\$4,436,306	\$1,374,992	45%
4	Supplies and Drugs	\$17,631,479	\$18,260,102	\$628,623	4%
5	Depreciation and Amortization	\$6,348,511	\$5,945,345	(\$403,166)	-6%
6	Bad Debts	\$12,100,127	\$10,609,543	(\$1,490,584)	-12%
7	Interest	\$2,403,002	\$2,235,998	(\$167,004)	-7%
8	Malpractice	\$1,744,369	\$1,935,697	\$191,328	11%
9	Other Operating Expenses	\$27,083,451	\$27,098,401	\$14,950	0%
	Total Operating Expenses	\$152,682,842	\$157,751,440	\$5,068,598	3%
	Income/(Loss) From Operations	(\$828,942)	(\$383,094)	\$445,848	-54%
C. Non-Operating Revenue:					
1	Income from Investments	\$619,847	\$311,763	(\$308,084)	-50%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$1,420,162)	\$79,102	\$1,499,264	-106%
	Total Non-Operating Revenue	(\$800,315)	\$390,865	\$1,191,180	-149%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$1,629,257)	\$7,771	\$1,637,028	-100%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$1,629,257)	\$7,771	\$1,637,028	-100%

BRISTOL HOSPITAL & HEALTH CARE GROUP, 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
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$135,099,011	\$143,841,159	\$151,167,549
2	Other Operating Revenue	4,936,257	8,012,741	6,200,797
3	Total Operating Revenue	\$140,035,268	\$151,853,900	\$157,368,346
4	Total Operating Expenses	143,760,621	152,682,842	157,751,440
5	Income/(Loss) From Operations	(\$3,725,353)	(\$828,942)	(\$383,094)
6	Total Non-Operating Revenue	11,184,854	(800,315)	390,865
7	Excess/(Deficiency) of Revenue Over Expenses	\$7,459,501	(\$1,629,257)	\$7,771
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-2.46%	-0.55%	-0.24%
2	Parent Corporation Non-Operating Margin	7.40%	-0.53%	0.25%
3	Parent Corporation Total Margin	4.93%	-1.08%	0.00%
4	Income/(Loss) From Operations	(\$3,725,353)	(\$828,942)	(\$383,094)
5	Total Operating Revenue	\$140,035,268	\$151,853,900	\$157,368,346
6	Total Non-Operating Revenue	\$11,184,854	(\$800,315)	\$390,865
7	Total Revenue	\$151,220,122	\$151,053,585	\$157,759,211
8	Excess/(Deficiency) of Revenue Over Expenses	\$7,459,501	(\$1,629,257)	\$7,771
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$34,845,027	\$20,022,942	\$1,045,617
2	Parent Corporation Total Net Assets	\$43,927,164	\$28,391,605	\$8,710,815
3	Parent Corporation Change in Total Net Assets	\$43,927,164	(\$15,535,559)	(\$19,680,790)
4	Parent Corporation Change in Total Net Assets %	0.0%	-35.4%	-69.3%

BRISTOL HOSPITAL & HEALTH CARE GROUP, 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
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.21	1.28	1.44
2	Total Current Assets	\$32,574,554	\$32,933,581	\$36,679,300
3	Total Current Liabilities	\$26,851,719	\$25,653,177	\$25,448,115
4	<u>Days Cash on Hand</u>	17	19	26
5	Cash and Cash Equivalents	\$4,312,716	\$6,161,025	\$9,448,477
6	Short Term Investments	2,085,307	1,572,924	1,329,434
7	Total Cash and Short Term Investments	\$6,398,023	\$7,733,949	\$10,777,911
8	Total Operating Expenses	\$143,760,621	\$152,682,842	\$157,751,440
9	Depreciation Expense	\$6,547,257	\$6,348,511	\$5,945,345
10	Operating Expenses less Depreciation Expense	\$137,213,364	\$146,334,331	\$151,806,095
11	<u>Days Revenue in Patient Accounts Receivable</u>	53	50	46
12	Net Patient Accounts Receivable	\$ 20,907,311	\$ 20,231,304	\$ 19,948,367
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,472,532	\$394,236	\$971,897
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 19,434,779	\$ 19,837,068	\$ 18,976,470
16	Total Net Patient Revenue	\$135,099,011	\$143,841,159	\$151,167,549
17	<u>Average Payment Period</u>	71	64	61
18	Total Current Liabilities	\$26,851,719	\$25,653,177	\$25,448,115
19	Total Operating Expenses	\$143,760,621	\$152,682,842	\$157,751,440
20	Depreciation Expense	\$6,547,257	\$6,348,511	\$5,945,345
21	Total Operating Expenses less Depreciation Expense	\$137,213,364	\$146,334,331	\$151,806,095

BRISTOL HOSPITAL & HEALTH CARE GROUP, 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
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	37.7	27.5	8.2
2	Total Net Assets	\$43,927,164	\$28,391,605	\$8,710,815
3	Total Assets	\$116,446,129	\$103,319,068	\$106,232,385
4	<u>Cash Flow to Total Debt Ratio</u>	22.2	7.9	10.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$7,459,501	(\$1,629,257)	\$7,771
6	Depreciation Expense	\$6,547,257	\$6,348,511	\$5,945,345
7	Excess of Revenues Over Expenses and Depreciation Expense	\$14,006,758	\$4,719,254	\$5,953,116
8	Total Current Liabilities	\$26,851,719	\$25,653,177	\$25,448,115
9	Total Long Term Debt	\$36,184,172	\$34,437,997	\$33,100,090
10	Total Current Liabilities and Total Long Term Debt	\$63,035,891	\$60,091,174	\$58,548,205
11	<u>Long Term Debt to Capitalization Ratio</u>	45.2	54.8	79.2
12	Total Long Term Debt	\$36,184,172	\$34,437,997	\$33,100,090
13	Total Net Assets	\$43,927,164	\$28,391,605	\$8,710,815
14	Total Long Term Debt and Total Net Assets	\$80,111,336	\$62,829,602	\$41,810,905

BRISTOL 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	22,739	78	86	79.9%	72.4%
2	ICU/CCU (Excludes Neonatal ICU)	3,089	14	14	60.5%	60.5%
3	Psychiatric: Ages 0 to 17	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,410	14	16	86.3%	75.5%
	TOTAL PSYCHIATRIC	4,410	14	16	86.3%	75.5%
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	1,608	15	15	29.4%	29.4%
7	Newborn	1,518	8	20	52.0%	20.8%
8	Neonatal ICU	0	0	0	0.0%	0.0%
9	Pediatric	294	3	3	26.8%	26.8%
10	Other	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	32,140	124	134	71.0%	65.7%
	TOTAL INPATIENT BED UTILIZATION	33,658	132	154	69.9%	59.9%
	TOTAL INPATIENT REPORTED YEAR	33,658	132	154	69.9%	59.9%
	TOTAL INPATIENT PRIOR YEAR	33,258	115	154	79.2%	59.2%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	400	17	0	-9.4%	0.7%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	1%	15%	0%	-12%	1%
	Total Licensed Beds and Bassinets	154				
(A) This number may not exceed the number of available beds for each department or in total.						

BRISTOL 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
A. CT Scans (A)					
1	Inpatient Scans	3,992	3,998	6	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	5,173	5,228	55	1%
3	Emergency Department Scans	4,999	5,450	451	9%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	14,164	14,676	512	4%
B. MRI Scans (A)					
1	Inpatient Scans	476	394	-82	-17%
2	Outpatient Scans (Excluding Emergency Department Scans)	2,912	3,049	137	5%
3	Emergency Department Scans	117	108	-9	-8%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	3,505	3,551	46	1%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	545	363	-182	-33%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	545	363	-182	-33%
D. PET/CT Scans (A)					
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%
	Total PET/CT Scans	0	0	0	0%
(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.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	1,468	1,536	68	5%
2	Outpatient Surgical Procedures	4,454	3,969	-485	-11%
	Total Surgical Procedures	5,922	5,505	-417	-7%

BRISTOL 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
J.	<u>Endoscopy Procedures</u>				
1	Inpatient Endoscopy Procedures	552	576	24	4%
2	Outpatient Endoscopy Procedures	2,065	1,878	-187	-9%
	Total Endoscopy Procedures	2,617	2,454	-163	-6%
K.	<u>Hospital Emergency Room Visits</u>				
1	Emergency Room Visits: Treated and Admitted	5,723	5,501	-222	-4%
2	Emergency Room Visits: Treated and Discharged	34,410	33,551	-859	-2%
	Total Emergency Room Visits	40,133	39,052	-1,081	-3%
L.	<u>Hospital Clinic Visits</u>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	23,855	25,328	1,473	6%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	0	0	0	0%
	Total Hospital Clinic Visits	23,855	25,328	1,473	6%
M.	<u>Other Hospital Outpatient Visits</u>				
1	Rehabilitation (PT/OT/ST)	72,723	85,587	12,864	18%
2	Cardiology	3,070	3,048	-22	-1%
3	Chemotherapy	5,395	8,675	3,280	61%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	3,273	3,864	591	18%
	Total Other Hospital Outpatient Visits	84,461	101,174	16,713	20%
N.	<u>Hospital Full Time Equivalent Employees</u>				
1	Total Nursing FTEs	276.2	285.8	9.6	3%
2	Total Physician FTEs	3.7	2.6	-1.1	-30%
3	Total Non-Nursing and Non-Physician FTEs	625.2	611.0	-14.2	-2%
	Total Hospital Full Time Equivalent Employees	905.1	899.4	-5.7	-1%

BRISTOL 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
A. Outpatient Surgical Procedures					
1	Bristol Hospital Campus	4,454	3,969	-485	-11%
	Total Outpatient Surgical Procedures(A)	4,454	3,969	-485	-11%
B. Outpatient Endoscopy Procedures					
1	Bristol Hospital Campus	2,065	1,878	-187	-9%
	Total Outpatient Endoscopy Procedures(B)	2,065	1,878	-187	-9%
C. Outpatient Hospital Emergency Room Visits					
1	Bristol Hospital Campus	34,410	33,551	-859	-2%
	Total Outpatient Hospital Emergency Room Visits(C)	34,410	33,551	-859	-2%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

BRISTOL 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
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$81,897,226	\$86,691,351	\$4,794,125	6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$28,542,377	\$29,232,376	\$689,999	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	34.85%	33.72%	-1.13%	-3%
4	DISCHARGES	3,640	3,597	(43)	-1%
5	CASE MIX INDEX (CMI)	1.28020	1.30040	0.02020	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,659.92800	4,677.53880	17.61080	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,125.07	\$6,249.52	\$124.45	2%
8	PATIENT DAYS	18,360	19,311	951	5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,554.60	\$1,513.77	(\$40.83)	-3%
10	AVERAGE LENGTH OF STAY	5.0	5.4	0.3	6%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$64,592,841	\$71,274,877	\$6,682,036	10%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,985,705	\$16,688,591	\$1,702,886	11%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.20%	23.41%	0.21%	1%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	78.87%	82.22%	3.35%	4%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,870.89017	2,957.33922	86.44905	3%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,219.88	\$5,643.11	\$423.23	8%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$146,490,067	\$157,966,228	\$11,476,161	8%
18	TOTAL ACCRUED PAYMENTS	\$43,528,082	\$45,920,967	\$2,392,885	5%
19	TOTAL ALLOWANCES	\$102,961,985	\$112,045,261	\$9,083,276	9%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$46,697,522	\$45,764,991	(\$932,531)	-2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$17,924,045	\$19,574,604	\$1,650,559	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	38.38%	42.77%	4.39%	11%
4	DISCHARGES	2,879	2,731	(148)	-5%
5	CASE MIX INDEX (CMI)	0.96930	0.95590	(0.01340)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,790.61470	2,610.56290	(180.05180)	-6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,422.97	\$7,498.23	\$1,075.26	17%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$297.91)	(\$1,248.71)	(\$950.80)	319%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$831,340)	(\$3,259,837)	(\$2,428,497)	292%
10	PATIENT DAYS	9,701	8,932	(769)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,847.65	\$2,191.51	\$343.86	19%
12	AVERAGE LENGTH OF STAY	3.4	3.3	(0.1)	-3%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$104,869,473	\$104,148,378	(\$721,095)	-1%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$38,044,904	\$41,085,749	\$3,040,845	8%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	36.28%	39.45%	3.17%	9%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	224.57%	227.57%	3.00%	1%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,465,42257	6,214,99566	(250,42691)	-4%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,884.36	\$6,610.74	\$726.38	12%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$664.48)	(\$967.63)	(\$303.15)	46%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$4,296,168)	(\$6,013,844)	(\$1,717,676)	40%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$151,566,995	\$149,913,369	(\$1,653,626)	-1%
22	TOTAL ACCRUED PAYMENTS	\$55,968,949	\$60,660,353	\$4,691,404	8%
23	TOTAL ALLOWANCES	\$95,598,046	\$89,253,016	(\$6,345,030)	-7%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,127,507)	(\$9,273,681)	(\$4,146,174)	81%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$126,486,016	\$131,777,027	\$5,291,011	4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$46,594,740	\$55,788,426	\$9,193,686	20%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$79,891,276	\$75,988,601	(\$3,902,675)	-5%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	63.16%	57.66%	-5.50%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$1,777,507	\$905,666	(\$871,841)	-49%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$33,584	\$24,036	(\$9,548)	-28%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.89%	2.65%	0.76%	40%
4	DISCHARGES	80	43	(37)	-46%
5	CASE MIX INDEX (CMI)	0.92950	0.96460	0.03510	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	74.36000	41.47780	(32.88220)	-44%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$451.64	\$579.49	\$127.85	28%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$5,971.33	\$6,918.74	\$947.41	16%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$5,673.43	\$5,670.03	(\$3.40)	0%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$421,876	\$235,180	(\$186,696)	-44%
11	PATIENT DAYS	370	205	(165)	-45%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$90.77	\$117.25	\$26.48	29%
13	AVERAGE LENGTH OF STAY	4.6	4.8	0.1	3%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,917,877	\$5,537,635	(\$380,242)	-6%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$327,905	\$267,683	(\$60,222)	-18%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	5.54%	4.83%	-0.71%	-13%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	332.93%	611.44%	278.51%	84%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	266.34503	262.92066	(3.42437)	-1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,231.13	\$1,018.11	(\$213.02)	-17%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$4,653.24	\$5,592.63	\$939.40	20%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,988.75	\$4,625.00	\$636.24	16%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,062,384	\$1,216,007	\$153,623	14%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$7,695,384	\$6,443,301	(\$1,252,083)	-16%
24	TOTAL ACCRUED PAYMENTS	\$361,489	\$291,719	(\$69,770)	-19%
25	TOTAL ALLOWANCES	\$7,333,895	\$6,151,582	(\$1,182,313)	-16%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,484,260	\$1,451,188	(\$33,073)	-2%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$12,712,162	\$13,394,264	\$682,102	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$3,679,252	\$3,598,923	(\$80,329)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	28.94%	26.87%	-2.07%	-7%
4	DISCHARGES	1,106	1,084	(22)	-2%
5	CASE MIX INDEX (CMI)	0.77470	0.80290	0.02820	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	856.81820	870.34360	13.52540	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,294.09	\$4,135.06	(\$159.03)	-4%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,128.89	\$3,363.17	\$1,234.28	58%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,830.98	\$2,114.46	\$283.48	15%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,568,818	\$1,840,307	\$271,489	17%
11	PATIENT DAYS	3,633	3,662	29	1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,012.73	\$982.78	(\$29.96)	-3%
13	AVERAGE LENGTH OF STAY	3.3	3.4	0.1	3%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$21,541,218	\$23,673,877	\$2,132,659	10%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$5,741,056	\$6,268,516	\$527,460	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.65%	26.48%	-0.17%	-1%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	169.45%	176.75%	7.29%	4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,874.15698	1,915.93078	41.77380	2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,063.27	\$3,271.79	\$208.51	7%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$2,821.09	\$3,338.96	\$517.87	18%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,156.61	\$2,371.32	\$214.72	10%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,041,820	\$4,543,292	\$501,472	12%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$34,253,380	\$37,068,141	\$2,814,761	8%
24	TOTAL ACCRUED PAYMENTS	\$9,420,308	\$9,867,439	\$447,131	5%
25	TOTAL ALLOWANCES	\$24,833,072	\$27,200,702	\$2,367,630	10%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,610,638	\$6,383,600	\$772,962	14%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$4,791,002	\$6,259,298	\$1,468,296	31%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$998,573	\$955,724	(\$42,849)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	20.84%	15.27%	-5.57%	-27%
4	DISCHARGES	380	423	43	11%
5	CASE MIX INDEX (CMI)	0.90850	0.89660	(0.01190)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	345.23000	379.26180	34.03180	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,892.49	\$2,519.96	(\$372.53)	-13%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$3,530.49	\$4,978.27	\$1,447.79	41%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$3,232.58	\$3,729.56	\$496.98	15%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,115,984	\$1,414,481	\$298,496	27%
11	PATIENT DAYS	1,524	1,708	184	12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$655.23	\$559.56	(\$95.67)	-15%
13	AVERAGE LENGTH OF STAY	4.0	4.0	0.0	1%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$6,323,409	\$7,258,401	\$934,992	15%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,272,450	\$870,976	(\$401,474)	-32%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.12%	12.00%	-8.12%	-40%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	131.99%	115.96%	-16.02%	-12%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	501.54340	490.51884	(11.02455)	-2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,537.07	\$1,775.62	(\$761.45)	-30%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$3,347.30	\$4,835.12	\$1,487.83	44%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,682.81	\$3,867.49	\$1,184.68	44%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,345,547	\$1,897,076	\$551,529	41%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$11,114,411	\$13,517,699	\$2,403,288	22%
24	TOTAL ACCRUED PAYMENTS	\$2,271,023	\$1,826,700	(\$444,323)	-20%
25	TOTAL ALLOWANCES	\$8,843,388	\$11,690,999	\$2,847,611	32%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$2,461,531	\$3,311,556	\$850,025	35%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)				
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$17,503,164	\$19,653,562	\$2,150,398	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,677,825	\$4,554,647	(\$123,178)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.73%	23.17%	-3.55%	-13%
4	DISCHARGES	1,486	1,507	21	1%
5	CASE MIX INDEX (CMI)	0.80892	0.82920	0.02029	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,202.04820	1,249.60540	47.55720	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,891.55	\$3,644.87	(\$246.68)	-6%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,531.43	\$3,853.36	\$1,321.93	52%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,233.52	\$2,604.65	\$371.13	17%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,684,802	\$3,254,788	\$569,986	21%
11	PATIENT DAYS	5,157	5,370	213	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$907.08	\$848.17	(\$58.92)	-6%
13	AVERAGE LENGTH OF STAY	3.5	3.6	0.1	3%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$27,864,627	\$30,932,278	\$3,067,651	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,013,506	\$7,139,492	\$125,986	2%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.17%	23.08%	-2.09%	-8%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	159.20%	157.39%	-1.81%	-1%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,375.70037	2,406.44962	30.74925	1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,952.18	\$2,966.82	\$14.63	0%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,932.18	\$3,643.93	\$711.75	24%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,267.70	\$2,676.29	\$408.60	18%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,387,367	\$6,440,368	\$1,053,001	20%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$45,367,791	\$50,585,840	\$5,218,049	12%
24	TOTAL ACCRUED PAYMENTS	\$11,691,331	\$11,694,139	\$2,808	0%
25	TOTAL ALLOWANCES	\$33,676,460	\$38,891,701	\$5,215,241	15%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$310,557	\$200,630	(\$109,927)	-35%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$95,359	\$74,488	(\$20,871)	-22%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.71%	37.13%	6.42%	21%
4	DISCHARGES	11	11	0	0%
5	CASE MIX INDEX (CMI)	1.66740	1.05400	(0.61340)	-37%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	18.34140	11.59400	(6.74740)	-37%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,199.11	\$6,424.70	\$1,225.59	24%
8	PATIENT DAYS	40	45	5	13%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,383.98	\$1,655.29	(\$728.69)	-31%
10	AVERAGE LENGTH OF STAY	3.6	4.1	0.5	13%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$735,885	\$426,014	(\$309,871)	-42%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$162,320	\$96,511	(\$65,809)	-41%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$1,046,442	\$626,644	(\$419,798)	-40%
14	TOTAL ACCRUED PAYMENTS	\$257,679	\$170,999	(\$86,680)	-34%
15	TOTAL ALLOWANCES	\$788,763	\$455,645	(\$333,118)	-42%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$5,949,098	\$4,093,007	(\$1,856,091)	-31%
2	TOTAL OPERATING EXPENSES	\$114,761,390	\$129,657,399	\$14,896,009	13%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$643,415	\$624,350	(\$19,065)	-3%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$929,468	\$558,883	(\$370,585)	-40%
5	BAD DEBTS (CHARGES)	\$10,951,622	\$9,166,346	(\$1,785,276)	-16%
6	UNCOMPENSATED CARE (CHARGES)	\$11,881,090	\$9,725,229	(\$2,155,861)	-18%
7	COST OF UNCOMPENSATED CARE	\$3,866,055	\$3,224,774	(\$641,281)	-17%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$45,367,791	\$50,585,840	\$5,218,049	12%
9	TOTAL ACCRUED PAYMENTS	\$11,691,331	\$11,694,139	\$2,808	0%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$14,762,481	\$16,773,683	\$2,011,202	14%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$3,071,150	\$5,079,544	\$2,008,394	65%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$146,408,469	\$152,310,534	\$5,902,065	4%
2	TOTAL INPATIENT PAYMENTS	\$51,239,606	\$53,436,115	\$2,196,509	4%
3	TOTAL INPATIENT PAYMENTS / CHARGES	35.00%	35.08%	0.09%	0%
4	TOTAL DISCHARGES	8,016	7,846	(170)	-2%
5	TOTAL CASE MIX INDEX	1.08170	1.08964	0.00794	1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	8,670.93230	8,549.30110	(121.63120)	-1%
7	TOTAL OUTPATIENT CHARGES	\$198,062,826	\$206,781,547	\$8,718,721	4%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	135.28%	135.76%	0.48%	0%
9	TOTAL OUTPATIENT PAYMENTS	\$60,206,435	\$65,010,343	\$4,803,908	8%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.40%	31.44%	1.04%	3%
11	TOTAL CHARGES	\$344,471,295	\$359,092,081	\$14,620,786	4%
12	TOTAL PAYMENTS	\$111,446,041	\$118,446,458	\$7,000,417	6%
13	TOTAL PAYMENTS / TOTAL CHARGES	32.35%	32.98%	0.63%	2%
14	PATIENT DAYS	33,258	33,658	400	1%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$99,710,947	\$106,545,543	\$6,834,596	7%
2	INPATIENT PAYMENTS	\$33,315,561	\$33,861,511	\$545,950	2%
3	GOVT. INPATIENT PAYMENTS / CHARGES	33.41%	31.78%	-1.63%	-5%
4	DISCHARGES	5,137	5,115	(22)	0%
5	CASE MIX INDEX	1.14470	1.16104	0.01634	1%
6	CASE MIX ADJUSTED DISCHARGES	5,880.31760	5,938.73820	58.42060	1%
7	OUTPATIENT CHARGES	\$93,193,353	\$102,633,169	\$9,439,816	10%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	93.46%	96.33%	2.86%	3%
9	OUTPATIENT PAYMENTS	\$22,161,531	\$23,924,594	\$1,763,063	8%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.78%	23.31%	-0.47%	-2%
11	TOTAL CHARGES	\$192,904,300	\$209,178,712	\$16,274,412	8%
12	TOTAL PAYMENTS	\$55,477,092	\$57,786,105	\$2,309,013	4%
13	TOTAL PAYMENTS / CHARGES	28.76%	27.63%	-1.13%	-4%
14	PATIENT DAYS	23,557	24,726	1,169	5%
15	TOTAL GOVERNMENT DEDUCTIONS	\$137,427,208	\$151,392,607	\$13,965,399	10%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	5.0	5.4	0.3	6%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.1)	-3%
3	UNINSURED	4.6	4.8	0.1	3%
4	MEDICAID	3.3	3.4	0.1	3%
5	OTHER MEDICAL ASSISTANCE	4.0	4.0	0.0	1%
6	CHAMPUS / TRICARE	3.6	4.1	0.5	13%
7	TOTAL AVERAGE LENGTH OF STAY	4.1	4.3	0.1	3%

BRISTOL 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
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$344,471,295	\$359,092,081	\$14,620,786	4%
2	TOTAL GOVERNMENT DEDUCTIONS	\$137,427,208	\$151,392,607	\$13,965,399	10%
3	UNCOMPENSATED CARE	\$11,881,090	\$9,725,229	(\$2,155,861)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$79,891,276	\$75,988,601	(\$3,902,675)	-5%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$3,825,681	\$3,539,186	(\$286,495)	-7%
6	TOTAL ADJUSTMENTS	\$233,025,255	\$240,645,623	\$7,620,368	3%
7	TOTAL ACCRUED PAYMENTS	\$111,446,040	\$118,446,458	\$7,000,418	6%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$643,415	\$624,350	(\$19,065)	-3%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$112,089,455	\$119,070,808	\$6,981,353	6%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3253956327	0.3315885097	0.0061928770	2%
11	COST OF UNCOMPENSATED CARE	\$3,866,055	\$3,224,774	(\$641,281)	-17%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$3,071,150	\$5,079,544	\$2,008,394	65%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$6,937,205	\$8,304,318	\$1,367,114	20%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$4,041,820	\$4,543,292	\$501,472	12%
2	OTHER MEDICAL ASSISTANCE	\$2,461,531	\$3,311,556	\$850,025	35%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,484,260	\$1,451,188	(\$33,073)	-2%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,987,612	\$9,306,036	\$1,318,425	17%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$5,874,584	\$5,032,151	(\$842,433)	-14.34%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$7,844,153	\$6,543,376	(\$1,300,777)	-16.58%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$119,933,611	\$125,614,183	\$5,680,572	4.74%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$344,471,279	\$359,092,081	\$14,620,802	4.24%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$11,881,090	\$9,725,229	(\$2,155,861)	-18.15%

BRISTOL 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
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$46,697,522	\$45,764,991	(\$932,531)
2	MEDICARE	\$81,897,226	86,691,351	\$4,794,125
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$17,503,164	19,653,562	\$2,150,398
4	MEDICAID	\$12,712,162	13,394,264	\$682,102
5	OTHER MEDICAL ASSISTANCE	\$4,791,002	6,259,298	\$1,468,296
6	CHAMPUS / TRICARE	\$310,557	200,630	(\$109,927)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,777,507	905,666	(\$871,841)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$99,710,947	\$106,545,543	\$6,834,596
	TOTAL INPATIENT CHARGES	\$146,408,469	\$152,310,534	\$5,902,065
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$104,869,473	\$104,148,378	(\$721,095)
2	MEDICARE	\$64,592,841	71,274,877	\$6,682,036
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$27,864,627	30,932,278	\$3,067,651
4	MEDICAID	\$21,541,218	23,673,877	\$2,132,659
5	OTHER MEDICAL ASSISTANCE	\$6,323,409	7,258,401	\$934,992
6	CHAMPUS / TRICARE	\$735,885	426,014	(\$309,871)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,917,877	5,537,635	(\$380,242)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$93,193,353	\$102,633,169	\$9,439,816
	TOTAL OUTPATIENT CHARGES	\$198,062,826	\$206,781,547	\$8,718,721
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$151,566,995	\$149,913,369	(\$1,653,626)
2	TOTAL MEDICARE	\$146,490,067	\$157,966,228	\$11,476,161
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$45,367,791	\$50,585,840	\$5,218,049
4	TOTAL MEDICAID	\$34,253,380	\$37,068,141	\$2,814,761
5	TOTAL OTHER MEDICAL ASSISTANCE	\$11,114,411	\$13,517,699	\$2,403,288
6	TOTAL CHAMPUS / TRICARE	\$1,046,442	\$626,644	(\$419,798)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,695,384	\$6,443,301	(\$1,252,083)
	TOTAL GOVERNMENT CHARGES	\$192,904,300	\$209,178,712	\$16,274,412
	TOTAL CHARGES	\$344,471,295	\$359,092,081	\$14,620,786
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$17,924,045	\$19,574,604	\$1,650,559
2	MEDICARE	\$28,542,377	29,232,376	\$689,999
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,677,825	4,554,647	(\$123,178)
4	MEDICAID	\$3,679,252	3,598,923	(\$80,329)
5	OTHER MEDICAL ASSISTANCE	\$998,573	955,724	(\$42,849)
6	CHAMPUS / TRICARE	\$95,359	74,488	(\$20,871)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$33,584	24,036	(\$9,548)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$33,315,561	\$33,861,511	\$545,950
	TOTAL INPATIENT PAYMENTS	\$51,239,606	\$53,436,115	\$2,196,509
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$38,044,904	\$41,085,749	\$3,040,845
2	MEDICARE	\$14,985,705	16,688,591	\$1,702,886
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,013,506	7,139,492	\$125,986
4	MEDICAID	\$5,741,056	6,268,516	\$527,460
5	OTHER MEDICAL ASSISTANCE	\$1,272,450	870,976	(\$401,474)
6	CHAMPUS / TRICARE	\$162,320	96,511	(\$65,809)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$327,905	267,683	(\$60,222)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$22,161,531	\$23,924,594	\$1,763,063
	TOTAL OUTPATIENT PAYMENTS	\$60,206,435	\$65,010,343	\$4,803,908
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$55,968,949	\$60,660,353	\$4,691,404
2	TOTAL MEDICARE	\$43,528,082	\$45,920,967	\$2,392,885
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,691,331	\$11,694,139	\$2,808
4	TOTAL MEDICAID	\$9,420,308	\$9,867,439	\$447,131
5	TOTAL OTHER MEDICAL ASSISTANCE	\$2,271,023	\$1,826,700	(\$444,323)
6	TOTAL CHAMPUS / TRICARE	\$257,679	\$170,999	(\$86,680)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$361,489	\$291,719	(\$69,770)
	TOTAL GOVERNMENT PAYMENTS	\$55,477,092	\$57,786,105	\$2,309,013
	TOTAL PAYMENTS	\$111,446,041	\$118,446,458	\$7,000,417

BRISTOL 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
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.56%	12.74%	-0.81%
2	MEDICARE	23.77%	24.14%	0.37%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.08%	5.47%	0.39%
4	MEDICAID	3.69%	3.73%	0.04%
5	OTHER MEDICAL ASSISTANCE	1.39%	1.74%	0.35%
6	CHAMPUS / TRICARE	0.09%	0.06%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.52%	0.25%	-0.26%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	28.95%	29.67%	0.72%
	TOTAL INPATIENT PAYER MIX	42.50%	42.42%	-0.09%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.44%	29.00%	-1.44%
2	MEDICARE	18.75%	19.85%	1.10%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.09%	8.61%	0.52%
4	MEDICAID	6.25%	6.59%	0.34%
5	OTHER MEDICAL ASSISTANCE	1.84%	2.02%	0.19%
6	CHAMPUS / TRICARE	0.21%	0.12%	-0.09%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.72%	1.54%	-0.18%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	27.05%	28.58%	1.53%
	TOTAL OUTPATIENT PAYER MIX	57.50%	57.58%	0.09%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16.08%	16.53%	0.44%
2	MEDICARE	25.61%	24.68%	-0.93%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.20%	3.85%	-0.35%
4	MEDICAID	3.30%	3.04%	-0.26%
5	OTHER MEDICAL ASSISTANCE	0.90%	0.81%	-0.09%
6	CHAMPUS / TRICARE	0.09%	0.06%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.03%	0.02%	-0.01%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	29.89%	28.59%	-1.31%
	TOTAL INPATIENT PAYER MIX	45.98%	45.11%	-0.86%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.14%	34.69%	0.55%
2	MEDICARE	13.45%	14.09%	0.64%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.29%	6.03%	-0.27%
4	MEDICAID	5.15%	5.29%	0.14%
5	OTHER MEDICAL ASSISTANCE	1.14%	0.74%	-0.41%
6	CHAMPUS / TRICARE	0.15%	0.08%	-0.06%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.29%	0.23%	-0.07%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.89%	20.20%	0.31%
	TOTAL OUTPATIENT PAYER MIX	54.02%	54.89%	0.86%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

BRISTOL 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
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,879	2,731	(148)
2	MEDICARE	3,640	3,597	(43)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,486	1,507	21
4	MEDICAID	1,106	1,084	(22)
5	OTHER MEDICAL ASSISTANCE	380	423	43
6	CHAMPUS / TRICARE	11	11	-
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	80	43	(37)
	TOTAL GOVERNMENT DISCHARGES	5,137	5,115	(22)
	TOTAL DISCHARGES	8,016	7,846	(170)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,701	8,932	(769)
2	MEDICARE	18,360	19,311	951
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,157	5,370	213
4	MEDICAID	3,633	3,662	29
5	OTHER MEDICAL ASSISTANCE	1,524	1,708	184
6	CHAMPUS / TRICARE	40	45	5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	370	205	(165)
	TOTAL GOVERNMENT PATIENT DAYS	23,557	24,726	1,169
	TOTAL PATIENT DAYS	33,258	33,658	400
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.4	3.3	(0.1)
2	MEDICARE	5.0	5.4	0.3
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.5	3.6	0.1
4	MEDICAID	3.3	3.4	0.1
5	OTHER MEDICAL ASSISTANCE	4.0	4.0	0.0
6	CHAMPUS / TRICARE	3.6	4.1	0.5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.6	4.8	0.1
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.6	4.8	0.2
	TOTAL AVERAGE LENGTH OF STAY	4.1	4.3	0.1
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96930	0.95590	(0.01340)
2	MEDICARE	1.28020	1.30040	0.02020
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.80892	0.82920	0.02029
4	MEDICAID	0.77470	0.80290	0.02820
5	OTHER MEDICAL ASSISTANCE	0.90850	0.89660	(0.01190)
6	CHAMPUS / TRICARE	1.66740	1.05400	(0.61340)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.92950	0.96460	0.03510
	TOTAL GOVERNMENT CASE MIX INDEX	1.14470	1.16104	0.01634
	TOTAL CASE MIX INDEX	1.08170	1.08964	0.00794
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$126,486,016	\$131,777,027	\$5,291,011
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$46,594,740	\$55,788,426	\$9,193,686
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$79,891,276	\$75,988,601	(\$3,902,675)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	63.16%	57.66%	-5.50%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$5,874,584	\$5,032,151	(\$842,433)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$3,825,681	\$3,539,186	(\$286,495)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT)	\$643,415	\$624,350	(\$19,065)
8	CHARITY CARE	\$929,468	\$558,883	(\$370,585)
9	BAD DEBTS	\$10,951,622	\$9,166,346	(\$1,785,276)
10	TOTAL UNCOMPENSATED CARE	\$11,881,090	\$9,725,229	(\$2,155,861)
11	TOTAL OTHER OPERATING REVENUE	\$126,486,016	\$131,777,027	\$5,291,011
12	TOTAL OPERATING EXPENSES	\$114,761,390	\$129,657,399	\$14,896,009

BRISTOL 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)
<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>

BRISTOL 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
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,790.61470	2,610.56290	(180.05180)
2	MEDICARE	4,659.92800	4,677.53880	17.61080
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,202.04820	1,249.60540	47.55720
4	MEDICAID	856.81820	870.34360	13.52540
5	OTHER MEDICAL ASSISTANCE	345.23000	379.26180	34.03180
6	CHAMPUS / TRICARE	18.34140	11.59400	(6.74740)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	74.36000	41.47780	(32.88220)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	5,880.31760	5,938.73820	58.42060
	TOTAL CASE MIX ADJUSTED DISCHARGES	8,670.93230	8,549.30110	(121.63120)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,465.42257	6,214.99566	-250.42691
2	MEDICARE	2,870.89017	2,957.33922	86.44905
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,375.70037	2,406.44962	30.74925
4	MEDICAID	1,874.15698	1,915.93078	41.77380
5	OTHER MEDICAL ASSISTANCE	501.54340	490.51884	-11.02455
6	CHAMPUS / TRICARE	26.06522	23.35719	-2.70802
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	266.34503	262.92066	-3.42437
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	5,272.65576	5,387.14604	114.49028
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	11,738.07833	11,602.14170	-135.93663
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,422.97	\$7,498.23	\$1,075.26
2	MEDICARE	\$6,125.07	\$6,249.52	\$124.45
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,891.55	\$3,644.87	(\$246.68)
4	MEDICAID	\$4,294.09	\$4,135.06	(\$159.03)
5	OTHER MEDICAL ASSISTANCE	\$2,892.49	\$2,519.96	(\$372.53)
6	CHAMPUS / TRICARE	\$5,199.11	\$6,424.70	\$1,225.59
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$451.64	\$579.49	\$127.85
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$5,665.61	\$5,701.80	\$36.20
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$5,909.35	\$6,250.35	\$341.00
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,884.36	\$6,610.74	\$726.38
2	MEDICARE	\$5,219.88	\$5,643.11	\$423.23
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,952.18	\$2,966.82	\$14.63
4	MEDICAID	\$3,063.27	\$3,271.79	\$208.51
5	OTHER MEDICAL ASSISTANCE	\$2,537.07	\$1,775.62	(\$761.45)
6	CHAMPUS / TRICARE	\$6,227.46	\$4,131.96	(\$2,095.50)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,231.13	\$1,018.11	(\$213.02)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,203.11	\$4,441.05	\$237.95
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,129.16	\$5,603.31	\$474.15

BRISTOL 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
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$4,041,820	\$4,543,292	\$501,472
2	OTHER MEDICAL ASSISTANCE	\$2,461,531	\$3,311,556	\$850,025
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,484,260	\$1,451,188	(\$33,073)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,987,612	\$9,306,036	\$1,318,425
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$344,471,295	\$359,092,081	\$14,620,786
2	TOTAL GOVERNMENT DEDUCTIONS	\$137,427,208	\$151,392,607	\$13,965,399
3	UNCOMPENSATED CARE	\$11,881,090	\$9,725,229	(\$2,155,861)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$79,891,276	\$75,988,601	(\$3,902,675)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$3,825,681	\$3,539,186	(\$286,495)
6	TOTAL ADJUSTMENTS	\$233,025,255	\$240,645,623	\$7,620,368
7	TOTAL ACCRUED PAYMENTS	\$111,446,040	\$118,446,458	\$7,000,418
8	UCP DSH PAYMENTS (OHCA INPUT)	\$643,415	\$624,350	(\$19,065)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$112,089,455	\$119,070,808	\$6,981,353
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3253956327	0.3315885097	0.0061928770
11	COST OF UNCOMPENSATED CARE	\$3,866,055	\$3,224,774	(\$641,281)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$3,071,150	\$5,079,544	\$2,008,394
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$6,937,205	\$8,304,318	\$1,367,114
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	38.38%	42.77%	4.39%
2	MEDICARE	34.85%	33.72%	-1.13%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26.73%	23.17%	-3.55%
4	MEDICAID	28.94%	26.87%	-2.07%
5	OTHER MEDICAL ASSISTANCE	20.84%	15.27%	-5.57%
6	CHAMPUS / TRICARE	30.71%	37.13%	6.42%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.89%	2.65%	0.76%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	33.41%	31.78%	-1.63%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	35.00%	35.08%	0.09%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.28%	39.45%	3.17%
2	MEDICARE	23.20%	23.41%	0.21%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.17%	23.08%	-2.09%
4	MEDICAID	26.65%	26.48%	-0.17%
5	OTHER MEDICAL ASSISTANCE	20.12%	12.00%	-8.12%
6	CHAMPUS / TRICARE	22.06%	22.65%	0.60%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5.54%	4.83%	-0.71%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	23.78%	23.31%	-0.47%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	30.40%	31.44%	1.04%

BRISTOL 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
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$111,446,041	\$118,446,458	\$7,000,417
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$643,415	\$624,350	(\$19,065)
	OHCA DEFINED NET REVENUE	\$112,089,456	\$119,070,808	\$6,981,352
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$7,844,153	\$6,543,376	(\$1,300,777)
4	CALCULATED NET REVENUE	\$132,934,134	\$125,614,184	(\$7,319,950)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$119,933,611	\$125,614,183	\$5,680,572
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$13,000,523	\$1	(\$13,000,522)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$344,471,295	\$359,092,081	\$14,620,786
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$344,471,295	\$359,092,081	\$14,620,786
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$344,471,279	\$359,092,081	\$14,620,802
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$16	\$0	(\$16)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$11,881,090	\$9,725,229	(\$2,155,861)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$11,881,090	\$9,725,229	(\$2,155,861)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$11,881,090	\$9,725,229	(\$2,155,861)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

BRISTOL 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
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$45,764,991
2	MEDICARE	86,691,351
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,653,562
4	MEDICAID	13,394,264
5	OTHER MEDICAL ASSISTANCE	6,259,298
6	CHAMPUS / TRICARE	200,630
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	905,666
	TOTAL INPATIENT GOVERNMENT CHARGES	\$106,545,543
	TOTAL INPATIENT CHARGES	\$152,310,534
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$104,148,378
2	MEDICARE	71,274,877
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	30,932,278
4	MEDICAID	23,673,877
5	OTHER MEDICAL ASSISTANCE	7,258,401
6	CHAMPUS / TRICARE	426,014
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,537,635
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$102,633,169
	TOTAL OUTPATIENT CHARGES	\$206,781,547
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$149,913,369
2	TOTAL GOVERNMENT ACCRUED CHARGES	209,178,712
	TOTAL ACCRUED CHARGES	\$359,092,081
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$19,574,604
2	MEDICARE	29,232,376
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,554,647
4	MEDICAID	3,598,923
5	OTHER MEDICAL ASSISTANCE	955,724
6	CHAMPUS / TRICARE	74,488
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	24,036
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$33,861,511
	TOTAL INPATIENT PAYMENTS	\$53,436,115
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$41,085,749
2	MEDICARE	16,688,591
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,139,492
4	MEDICAID	6,268,516
5	OTHER MEDICAL ASSISTANCE	870,976
6	CHAMPUS / TRICARE	96,511
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	267,683
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$23,924,594
	TOTAL OUTPATIENT PAYMENTS	\$65,010,343
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$60,660,353
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	57,786,105
	TOTAL ACCRUED PAYMENTS	\$118,446,458

BRISTOL 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
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,731
2	MEDICARE	3,597
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,507
4	MEDICAID	1,084
5	OTHER MEDICAL ASSISTANCE	423
6	CHAMPUS / TRICARE	11
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	43
	TOTAL GOVERNMENT DISCHARGES	5,115
	TOTAL DISCHARGES	7,846
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.95590
2	MEDICARE	1.30040
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.82920
4	MEDICAID	0.80290
5	OTHER MEDICAL ASSISTANCE	0.89660
6	CHAMPUS / TRICARE	1.05400
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.96460
	TOTAL GOVERNMENT CASE MIX INDEX	1.16104
	TOTAL CASE MIX INDEX	1.08964
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$131,777,027
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$55,788,426
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$75,988,601
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	57.66%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$5,032,151
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$3,539,186
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$624,350
8	CHARITY CARE	\$558,883
9	BAD DEBTS	\$9,166,346
10	TOTAL UNCOMPENSATED CARE	\$9,725,229
11	TOTAL OTHER OPERATING REVENUE	\$4,093,007
12	TOTAL OPERATING EXPENSES	\$129,657,399

BRISTOL 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)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$118,446,458
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$624,350
	OHCA DEFINED NET REVENUE	\$119,070,808
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$6,543,376
	CALCULATED NET REVENUE	\$125,614,184
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$125,614,183
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$359,092,081
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$359,092,081
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$359,092,081
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$9,725,229
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$9,725,229
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$9,725,229
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

BRISTOL 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
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	274	310	36	13%
2	Number of Approved Applicants	262	271	9	3%
3	Total Charges (A)	\$929,468	\$558,883	(\$370,585)	-40%
4	Average Charges	\$3,548	\$2,062	(\$1,485)	-42%
5	Ratio of Cost to Charges (RCC)	0.333691	0.327496	(0.006195)	-2%
6	Total Cost	\$310,155	\$183,032	(\$127,123)	-41%
7	Average Cost	\$1,184	\$675	(\$508)	-43%
8	Charity Care - Inpatient Charges	\$302,760	\$311,902	\$9,142	3%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	503,643	148,746	(354,897)	-70%
10	Charity Care - Emergency Department Charges	123,065	98,235	(24,830)	-20%
11	Total Charges (A)	\$929,468	\$558,883	(\$370,585)	-40%
12	Charity Care - Number of Patient Days	108	64	(44)	-41%
13	Charity Care - Number of Discharges	57	14	(43)	-75%
14	Charity Care - Number of Outpatient ED Visits	119	97	(22)	-18%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	351	251	(100)	-28%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$3,357,783	\$2,656,979	(\$700,804)	-21%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	6,352,293	5,506,317	(845,976)	-13%
3	Bad Debts - Emergency Department	1,241,546	1,003,050	(238,496)	-19%
4	Total Bad Debts (A)	\$10,951,622	\$9,166,346	(\$1,785,276)	-16%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$929,468	\$558,883	(\$370,585)	-40%
2	Bad Debts (A)	10,951,622	9,166,346	(1,785,276)	-16%
3	Total Uncompensated Care (A)	\$11,881,090	\$9,725,229	(\$2,155,861)	-18%
4	Uncompensated Care - Inpatient Services	\$3,660,543	\$2,968,881	(\$691,662)	-19%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	6,855,936	5,655,063	(1,200,873)	-18%
6	Uncompensated Care - Emergency Department	1,364,611	1,101,285	(263,326)	-19%
7	Total Uncompensated Care (A)	\$11,881,090	\$9,725,229	(\$2,155,861)	-18%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009		
		<u>ACTUAL TOTAL</u>	<u>ACTUAL TOTAL</u>	<u>AMOUNT</u>	<u>%</u>
<u>LINE</u>	<u>DESCRIPTION</u>	<u>NON-GOVERNMENT</u>	<u>NON-GOVERNMENT</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<u>COMMERCIAL - ALL PAYERS</u>					
1	Total Gross Revenue	\$126,486,016	\$131,777,027	\$5,291,011	4%
2	Total Contractual Allowances	\$79,891,276	\$75,988,601	(\$3,902,675)	-5%
	Total Accrued Payments (A)	\$46,594,740	\$55,788,426	\$9,193,686	20%
	Total Discount Percentage	63.16%	57.66%	-5.50%	-9%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

BRISTOL 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
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$139,401,359	\$146,408,469	\$152,310,534
2	Outpatient Gross Revenue	\$190,285,408	\$198,062,826	\$206,781,547
3	Total Gross Patient Revenue	\$329,686,767	\$344,471,295	\$359,092,081
4	Net Patient Revenue	\$114,164,519	\$119,290,195	\$124,989,832
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$122,064,635	\$125,713,012	\$129,657,399
C. <u>Utilization Statistics</u>				
1	Patient Days	33,663	33,258	33,658
2	Discharges	8,064	8,016	7,846
3	Average Length of Stay	4.2	4.1	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	79,614	78,250	79,353
0	Equivalent (Adjusted) Discharges (ED)	19,072	18,860	18,498
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.03884	1.08170	1.08964
2	Case Mix Adjusted Patient Days (CMAPD)	34,970	35,975	36,675
3	Case Mix Adjusted Discharges (CMAD)	8,377	8,671	8,549
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	82,705	84,643	86,466
5	Case Mix Adjusted Equivalent Discharges (CMAED)	19,812	20,401	20,156
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$9,794	\$10,358	\$10,669
2	Total Gross Revenue per Discharge	\$40,884	\$42,973	\$45,768
3	Total Gross Revenue per EPD	\$4,141	\$4,402	\$4,525
4	Total Gross Revenue per ED	\$17,287	\$18,265	\$19,413
5	Total Gross Revenue per CMAEPD	\$3,986	\$4,070	\$4,153
6	Total Gross Revenue per CMAED	\$16,641	\$16,885	\$17,816
7	Inpatient Gross Revenue per EPD	\$1,751	\$1,871	\$1,919
8	Inpatient Gross Revenue per ED	\$7,309	\$7,763	\$8,234

BRISTOL 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
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$3,391	\$3,587	\$3,714
2	Net Patient Revenue per Discharge	\$14,157	\$14,882	\$15,930
3	Net Patient Revenue per EPD	\$1,434	\$1,524	\$1,575
4	Net Patient Revenue per ED	\$5,986	\$6,325	\$6,757
5	Net Patient Revenue per CMAEPD	\$1,380	\$1,409	\$1,446
6	Net Patient Revenue per CMAED	\$5,762	\$5,847	\$6,201
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$3,626	\$3,780	\$3,852
2	Total Operating Expense per Discharge	\$15,137	\$15,683	\$16,525
3	Total Operating Expense per EPD	\$1,533	\$1,607	\$1,634
4	Total Operating Expense per ED	\$6,400	\$6,666	\$7,009
5	Total Operating Expense per CMAEPD	\$1,476	\$1,485	\$1,500
6	Total Operating Expense per CMAED	\$6,161	\$6,162	\$6,433
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$18,953,515	\$19,832,509	\$21,080,745
2	Nursing Fringe Benefits Expense	\$5,058,484	\$4,792,505	\$5,421,117
3	Total Nursing Salary and Fringe Benefits Expense	\$24,011,999	\$24,625,014	\$26,501,862
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$814,995	\$724,920	\$539,198
2	Physician Fringe Benefits Expense	\$217,513	\$175,176	\$138,660
3	Total Physician Salary and Fringe Benefits Expense	\$1,032,508	\$900,096	\$677,858
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$29,759,319	\$31,278,113	\$32,074,903
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$7,942,434	\$7,652,934	\$8,248,371
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$37,701,753	\$38,931,047	\$40,323,274
K.	<u>Total Salary and Fringe Benefits Expense</u>			
1	Total Salary Expense	\$49,527,829	\$51,835,542	\$53,694,846
2	Total Fringe Benefits Expense	\$13,218,431	\$12,620,615	\$13,808,148
3	Total Salary and Fringe Benefits Expense	\$62,746,260	\$64,456,157	\$67,502,994

BRISTOL 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
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	272.4	276.2	285.8
2	Total Physician FTEs	4.0	3.7	2.6
3	Total Non-Nursing, Non-Physician FTEs	600.1	625.2	611.0
4	Total Full Time Equivalent Employees (FTEs)	876.5	905.1	899.4
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$69,580	\$71,805	\$73,760
2	Nursing Fringe Benefits Expense per FTE	\$18,570	\$17,352	\$18,968
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$88,150	\$89,156	\$92,729
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$203,749	\$195,924	\$207,384
2	Physician Fringe Benefits Expense per FTE	\$54,378	\$47,345	\$53,331
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$258,127	\$243,269	\$260,715
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$49,591	\$50,029	\$52,496
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$13,235	\$12,241	\$13,500
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$62,826	\$62,270	\$65,996
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$56,506	\$57,271	\$59,701
2	Total Fringe Benefits Expense per FTE	\$15,081	\$13,944	\$15,353
3	Total Salary and Fringe Benefits Expense per FTE	\$71,587	\$71,214	\$75,053
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,864	\$1,938	\$2,006
2	Total Salary and Fringe Benefits Expense per Discharge	\$7,781	\$8,041	\$8,603
3	Total Salary and Fringe Benefits Expense per EPD	\$788	\$824	\$851
4	Total Salary and Fringe Benefits Expense per ED	\$3,290	\$3,418	\$3,649
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$759	\$762	\$781
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,167	\$3,159	\$3,349