MIDDLESEX HOSPITAL

ANNUAL REPORTING

FISCAL YEAR 2009

REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP

AND CORPORATION RELATED TO THE HOSPITAL

(1) (2) (3)		(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
Α.	AFFILIATE NAME	MIDDLESEX HEALTH SYSTEM, INC.
		PARENT CORPORATION `TO SUPPORT, ENCOURAGE, PROMOTE AND ASSIST
		THE DEVELOPMENT OF COMPREHENSIVE, INTEGRATED HEALTH-CARE-
		RELATED SERVICES FOR THE ADVANCEMENT OF THE HEALTH AND WELL-
1	Affiliate Description	BEING OF THE COMMUNITY.
	Affiliate type of service	Parent Corporation
	Tax Status	Not for Profit
	Street Address	28 CRESCENT STREET
	Town	Middletown
6	State	Connecticut
7	Zip Code	06457 -
8	CEO Name	ROBERT G. KIELY
	CEO Title	PRESIDENT/CEO
	CT Agent Name	ROBERT G. KIELY
	CT Agent Company	Middlesex Hospital
		28 CRESCENT STREET
	CT Agent Town	Middletown
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06457 -
_		
В.	AFFILIATE NAME	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC
		JOINT VENTURE TO ENGAGE IN ACTIVITIES IN FURTHERANCE OF THE
		CHARITABLE PURPOSES OF HARTFORD AND MIDDLESEX HOSPITALS AND
	Affiliate Description	THEIR RESPECTIVE HEALTH SYSTEMS.
	Affiliate type of service	Affilate Support Services
-	Tax Status	For Profit
	Street Address	80 SEYMOUR STREET
-	Town	Hartford
	State Zip Code	Connecticut 06102 -
	CEO Name	ARTHUR MCDOWELL, M.D.
	CEO Title	ICHAIRMAN
	CT Agent Name	Joan Feldman, esq
11	CT Agent Company	SHIPMAN & GOODWIN LLP,
12		One Constitution Plaza
	CT Agent Town	Hartford
	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919
С.	AFFILIATE NAME	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA, L.L.C.
		MEDICAL MANAGEMENT, MARKETING, EDUCATION, COMMUNICATIONS AND
		MANAGED CARE CONTRACTING FOR THE BENEFIT OF COMMUNITY,
1	Affiliate Description	CUSTOMERS AND MEMBERS.
	Affiliate type of service	Other HealthCare Svcs(Specify)
	Tax Status	For Profit
	Street Address	28 CRESCENT STREET
5	Town	Middletown
	State	Connecticut
	Zip Code	06457 -
8		SUSAN L. MENICHETTI
	CEO Name	
9	CEO Title	CEO
9 10	CEO Title CT Agent Name	CEO ROBERT G. KIELY
9 10 11	CEO Title CT Agent Name CT Agent Company	CEO ROBERT G. KIELY Middlesex Hospital
9 10 11 12	CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address	CEO ROBERT G. KIELY Middlesex Hospital 28 CRESCENT STREET
9 10 11 12 13	CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	CEO ROBERT G. KIELY Middlesex Hospital 28 CRESCENT STREET Middletown
9 10 11 12 13 14	CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address	CEO ROBERT G. KIELY Middlesex Hospital 28 CRESCENT STREET

MIDDLESEX HOSPITAL

ANNUAL REPORTING

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP

AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
D.	AFFILIATE NAME	MHS PRIMARY CARE, INC.	
D.		PHYSICIANS SERVICES TO PROMOTE HEALTH BY ACQUIRING AND OPERATING	
		MEDICAL PRACTICES AND PARTICIPATING IN MANAGED CARE	
1	Affiliate Description	ARRANGEMENTS.	
2	Affiliate type of service	Medical Practices	
3	Tax Status	For Profit	
4	Street Address	28 CRESCENT STREET	
5 6	Town State	Middletown Connecticut	
-	Zip Code	06457 -	
	CEO Name	ROBERT G. KIELY	
	CEO Title	PRESIDENT/CEO	
	CT Agent Name	ROBERT G. KIELY	
11	CT Agent Company	Middlesex Hospital	
12	CT Agent Company Street Address		
13 14	CT Agent Town CT Agent State	Middletown Connecticut	
14	CT Agent Zip Code	06457 -	
Ε.	AFFILIATE NAME	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC SURGERY, LLC	
		A LIMITED LIABILTY CORPORATION OWNING AND OPERATING A FREE-	
	Affiliate Description	STANDING ORTHOPEDIC AMBULATORY SURGERY SERVICES.	
2	Affiliate type of service	Ambulatory/OP Surgery Center	
3	Tax Status Street Address	For Profit 510 Saybrook Rd.	
4 5	Town	Middletown	
-	State	Connecticut	
	Zip Code	06457 -	
	CEO Name	Anthony Valente	
	CEO Title	Administrator	
	CT Agent Name CT Agent Company	O'Malley, Deneen, Leary, Messina & Oswecki Michael Deneen	
		20 Maple Ave	
13	CT Agent Town	Windsor	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06095 -	
-			
F.	AFFILIATE NAME	MIDDLESEX HEALTH RESOURCES, INC. ENGAGE IN A REAL ESTATE BUSINESS FOR PURPOSES OF HOLDING REAL	
		ENGAGE IN A REAL ESTATE BUSINESS FOR PURPOSES OF HOLDING REAL ESTATE NOT DIRECTLY INVOLVED IN HEALTH CARE AND INVEST IN FOR-	
1	Affiliate Description	PROFIT HEALTH CARE RELATED VENTURES.	
	Affiliate type of service	Real Estate	
3	Tax Status	For Profit	
4	Street Address	28 CRESCENT STREET	
5	Town	Middletown	
6	State	Connecticut	
7	Zip Code CEO Name	06457 - ROBERT G. KIELY	
0 9	CEO Title	PRESIDENT/CEO	
	CT Agent Name	ROBERT G. KIELY	
	CT Agent Company	Middlesex Hospital	
	CT Agent Company Street Address	28 CRESCENT STREET	
-	CT Agent Town	Middletown	
14	CT Agent State	Connecticut 06457 -	
15	CT Agent Zip Code	UU4J7 -	

MIDDLESEX HOSPITAL

ANNUAL REPORTING

FISCAL YEAR 2009

REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP

AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
G.	AFFILIATE NAME	MIDDLESEX HEALTH SERVICES, INC.
_		ASSISTED LIVING FACILITY TO BENEFIT, ASSIST AND FURTHER THE PURPOSES OF THE MIDDLESEX HEALTH SYSTEM, MIDDLESEX HOSPITAL, & OTHER HEALTH CARE OR COMMUNITY SERVICE ORGANIZATIONS AS SHALL BE
1	Affiliate Description	CONTROLLED BY MIDDLESEX HEALTH SYSTEM.
2	Affiliate type of service	Care for the Aged
3	Tax Status	Not for Profit
4	Street Address	28 CRESCENT STREET
5	Town	Middletown
6	State	Connecticut
7	Zip Code	06457 -
8	CEO Name	ROBERT G. KIELY
9	CEO Title	PRESIDENT/CEO
10	CT Agent Name	ROBERT G. KIELY
11	CT Agent Company	Middlesex Hospital
12		28 CRESCENT STREET
13	CT Agent Town	Middletown
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06457 -

* P.O. BOX IS UNACCEPTABLE WITHOUT A STREET ADDRESS FOR EACH AGENT COMPANY

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2) (3)			
		FUND DESCRIPTION /	BALANCE AS OF	
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2009	
	MIDDLESEX HOSPITAL	Linua etviete el	¢50.005.740	
1 2		Unrestricted Temporarily Restricted by Donor	\$53,695,742 \$6,606,192	
2		Temporarily Restricted by Board	\$71,220,207	
4		Permanently Restricted by Donor	\$6,587,843	
5		Intercompany Eliminations	\$0	
		Total:	\$138,109,984	
	MIDDLESEX HEALTH SYSTEM, INC.			
1		Unrestricted	\$14,591	
2		Temporarily Restricted by Donor	\$0	
3		Temporarily Restricted by Board	\$0	
4		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0	
5		Total:	\$14,591	
C.	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC			
1		Unrestricted	\$0	
2		Temporarily Restricted by Donor	\$0	
3		Temporarily Restricted by Board	\$0	
4		Permanently Restricted by Donor	\$0	
5		Intercompany Eliminations	\$0	
		Total:	\$0	
	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA,			
D.	L.L.C.			
1	2.2.0.	Unrestricted	\$0	
2		Temporarily Restricted by Donor	\$0	
3		Temporarily Restricted by Board	\$0	
4		Permanently Restricted by Donor	\$0	
5		Intercompany Eliminations	\$0	
		Total:	\$0	
	MHS PRIMARY CARE, INC.			
1		Unrestricted	\$828,901	
2		Temporarily Restricted by Donor	\$0	
3		Temporarily Restricted by Board	\$0	
4 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0	
5		Total:	\$828,901	
			<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	
	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC			
F.	SURGERY, LLC			
1		Unrestricted	\$0	
2		Temporarily Restricted by Donor	\$0	
3		Temporarily Restricted by Board	\$0	
4		Permanently Restricted by Donor	\$0	
5		Intercompany Eliminations	\$0	
		Total:	\$0	
G	MIDDLESEX HEALTH RESOURCES, INC.			
G. 1	INIDDLESEA NEALIN RESOURCES, INC.	Unrestricted	\$2,787,379	
2		Temporarily Restricted by Donor		
2		Temporarily Restricted by Board	\$0 \$0	
4		Permanently Restricted by Donor	\$0	
5		Intercompany Eliminations	\$0	
-		Total:	\$2,787,379	
		. • • • • • • • • • • • • • • • • • • •	ψ2,101,3	

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2009
Н.	MIDDLESEX HEALTH SERVICES, INC.		
1		Unrestricted	\$239,709
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$239,709
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$141,980,564
	Intercompany Eliminations		\$0
	Total of all Affiliates	Fund Balance:	\$141,980,564

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE		DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Α.	MIDDLESEX HEALTH SYSTEM, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$0
1		Capital Contribution	09/30/2009	\$1,960,000
2		Net Asset Transfer	09/30/2009	(\$1,960,000)
_		Ending Unconsolidated Intercompany Balance:	9/30/2009	(\\$1,000,000) \$0
В.	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2009	\$0
C.	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA, L.L.C	2		
-		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$0
-		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2009	\$0
D.	MHS PRIMARY CARE, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$17,706
1		Purchase of Goods & services	09/30/2009	\$937,782
2		Sale of Services	09/30/2009	(\$15,661)
3		Payment to Hospital	09/30/2009	(\$947,985)
		Ending Unconsolidated Intercompany Balance:	9/30/2009	(\$8,158)
E.	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC SURGER	RY, LLC		
		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2009	\$0
F.	MIDDLESEX HEALTH RESOURCES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$17,812
1		Purchase of Goods & services	09/30/2009	\$71,262
2		Payment to Hospital	09/28/2009	(\$85,439)
		Ending Unconsolidated Intercompany Balance:	9/30/2009	\$3,635
G.	MIDDLESEX HEALTH SERVICES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2008	\$7,678
1		CHEFA Bond Interest	09/30/2009	\$545,387

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
2		Purchase of Goods & services	09/30/2009	\$346,701
3		Payment to Hospital	09/30/2009	(\$894,519)
		Ending Unconsolidated Intercompany Balance:	9/30/2009	\$5,247
			Grand Total:	\$724

MIDDLESEX HOSPITAL ANNUAL REPORTING

FISCAL YEAR 2009 REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
				DATE	
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Beginning Unconsolidated Intercompany Balance	10/01/2008	\$3,851,222
Α.	MIDDLESEX HEALTH SYSTEM, INC.			10/01/2000	ψ 3,031,222
1		MHS PRIMARY CARE, INC.	Capital Contribution	09/30/2009	\$1,960,000
			Total:	9/30/2009	\$1,960,000
В.	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC				
			Nothing to Report		\$0
			Total:	9/30/2009	\$0
C.	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA, L.L.C.		Nothing to Deport		<u> </u>
			Nothing to Report Total:	0/20/2000	\$0 \$0
			l otai:	9/30/2009	\$0
D.	MHS PRIMARY CARE, INC.				
			Nothing to Report		\$0
			Total:	9/30/2009	\$0 \$0
					• -
E.	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC SURGERY, LLC				
			Nothing to Report		\$0
			Total:	9/30/2009	\$0
F.	MIDDLESEX HEALTH RESOURCES, INC.				÷
			Nothing to Report		\$0
			Total:	9/30/2009	\$0
G.	MIDDLESEX HEALTH SERVICES, INC.				
6.	INIDDLEGEN FILMET DERVICED, INC.		Nothing to Report		\$0
┣───			Total:	9/30/2009	\$0 \$0
			Total.	5/50/2009	0 0
			Ending Unconsolidated		
			Intercompany Balance	9/30/2009	\$5,811,222

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(1)	(2)	(3)	(4)
	AFFILIATE NAME &		
LINE	DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
_			
A .	MIDDLESEX HEALTH SYSTEM, INC.	\$0	
0	Nothing to Report Total:	\$0 \$0	9/30/2009
_	i otai.	\$0	9/30/2009
В.	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2009
C.	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA, L.L.C.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2009
D.	MHS PRIMARY CARE, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2009
E.	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC SURGERY, LLC	\$ 0	
0	Nothing to Report Total:	\$0 \$0	9/30/2009
	Total.	\$0	9/30/2009
F.	MIDDLESEX HEALTH RESOURCES, INC.		
г. 0	Nothing to Report	\$0	
ـــــــــــــــــــــــــــــــــــــ	Total:	\$0	9/30/2009
			5,55/2003
G.	MIDDLESEX HEALTH SERVICES, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2009
	Grand Total:	\$0	9/30/2009

MIDDLESEX HOSPITAL ANNUAL REPORTING

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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
A. 0	MIDDLESEX HEALTH SYSTEM, INC. Nothing to Report	\$0	0
0	Tota:	\$0 \$0	0
В.	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC		
0	Nothing to Report	\$0	0
	Tota:	\$0	
C .	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA, L.L.C. Nothing to Report	\$0	0
0	Total:	\$0 \$0	
D.	MHS PRIMARY CARE, INC.		
1	Guarantee Bank Promissory Note for the Fit out of new physician office in Durham, CT	\$300,000	5
	Total:	\$300,000	
Е.	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC SURGERY, LLC		
<u> </u>	Guarantee 50% of bank promissory notes for construction, equipment and revolving loans	\$3,975,000	20
	Total:	\$3,975,000	
F.	MIDDLESEX HEALTH RESOURCES, INC.		
0	Nothing to Report	\$0	0
	l otal:	\$0	
G.	MIDDLESEX HEALTH SERVICES, INC.		
	Guarantee of Connecticut Health & Educational Facilities Authority revenue Bonds, Middlesex		
	Health Services Issue, Series I for the construction of One MacDonough Place, Assisted Living		
1	Facility.	\$8,450,000	
	Total:	\$8,450,000	
	Grand Total:	\$12,725,000	

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR INDIGENT CARE AND FREE BEDS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
А.	Indigent Care				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
в.	Free Beds				
	Beginning Balance	\$1,936,725.00	\$1,686,473.72	(\$250,251.28)	-13%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$70,058.00	\$99,826.00	\$29,768.00	42%
3	Expenditures	\$61,475.28	\$105,729.00	\$44,253.72	72%
4	Unrealized Gains and Losses	(\$258,834.00)	(\$39,278.00)	\$219,556.00	-85%
	Ending Balance	\$1,686,473.72	\$1,641,292.72	(\$45,181.00)	-3%
5	Projected Interest Income	\$42,000.00	\$50,000.00	\$8,000.00	19%
C.	Other	_			
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

	MIDDLESEX HOSPITAL				
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REPORT 17	- HOSPITAL BED FUNDS HELD OR ADMINISTERI	ED BY THE HOSPITAL			
A Detiont Activity					
A. Patient Activity (1)	(2)	(3)			
	Name of Hospital Bed Fund (FULL NAME)	Amount			
Patient	·				
1.Number of Applications for He 2. A. Number of Patients receiv	•	2,867 603			
	nount provided to all patients from Hospital Bed F				
2. B. The Actual Total Dollar Al	nount provided to an patients from hospital bed h	φ103,723. 11			
1	BENNETT, HANNAH R.	\$2,700.17			
2	BENNETT, HANNAH R.	\$270.34			
3	BRAINERD, FLORIOLA H.	\$300.00			
4	BRAINERD, FLORIOLA H.	\$18.00			
5	BRAINERD, FLORIOLA H.	\$232.28			
6	BRAINERD, FLORIOLA H.	\$12.50			
7	BRAINERD, FLORIOLA H.	\$93.83			
8	BRAINERD, FLORIOLA H.	\$24.75			
9	BRAINERD, FLORIOLA H.	\$100.00			
10	BRAINERD, FLORIOLA H.	\$126.15			
11	BRAINERD, FLORIOLA H.	\$300.00			
12	BRAINERD, FLORIOLA H.	\$315.90			
13 14	BRAINERD, FLORIOLA H.	\$55.25			
15	BRAINERD, FLORIOLA H. BRAINERD, FLORIOLA H.	\$500.00			
16	BRAINERD, FLORIOLA H.	\$554.40			
17	BRAINERD, FLORIOLA H.	\$72.10 \$44.01			
18	BRAINERD, FLORIOLA H.	\$44.01			
19	BRAINERD, FLORIOLA H.	\$114.00			
20	BRAINERD, FLORIOLA H.	\$48.30			
21	BRAINERD, FLORIOLA H.	\$225.00			
22	BRAINERD, FLORIOLA H.	\$102.28			
23	CASEY, WILLIAM B.	\$7.53			
24	CASEY, WILLIAM B.	\$302.43			
25	CASEY, WILLIAM B.	\$250.00			
26	CASEY, WILLIAM B.	\$38.60			
27	CASEY, WILLIAM B.	\$124.41			
28	CASEY, WILLIAM B.	\$117.44			
29	CASEY, WILLIAM B.	\$101.00			
30	CASEY, WILLIAM B.	\$161.55			
31	CASEY, WILLIAM B.	\$33.75			
32	CASEY, WILLIAM B.	\$60.29			
33	CASEY, WILLIAM B.	\$41.97			
34 35	CHAPMAN, CHARLES & DENCY CHAPMAN, CHARLES & DENCY	\$852.75			
36	CHAPMAN, CHARLES & DENCT	\$954.00			
	UNAFINAN, UNARLES & DENUT	\$3,833.91			
37	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$22.50			
38	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$300.00			
39	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$290.71			
40	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$321.55			
41	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT				
		\$100.35			
42	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$314.03			
43	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$224.10			
44	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$124.20			
45	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$1,717.20			

	MIDDLESEX HOSPITAL	
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	REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY T	HE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
	ations for Hospital Bed Funds	2,867
	tients receiving Hospital Bed Fund Grants	603
	tal Dollar Amount provided to all patients from Hospital Bed F	\$105,729.44
46	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$91.32
47	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$66.29
- <i>'</i>		\$00.29
48	CHAMPLIN, HENRY LAY & LOUISE MCKNIGHT	\$93.00
49	CHENEY, GEORGE A.	\$72.21
50	CHENEY, GEORGE A.	\$31.95
51	CHENEY, GEORGE A.	\$78.75
52	CHENEY, GEORGE A.	\$292.73
53	CHENEY, GEORGE A.	\$355.33
54	CHENEY, GEORGE A.	\$97.57
55	CHENEY, GEORGE A.	\$29.70
56	CHENEY, GEORGE A.	\$76.50
57	CHENEY, GEORGE A.	\$150.00
58	CHENEY, GEORGE A.	\$45.00
59	CHENEY, GEORGE A.	\$42.75
60	CHENEY, GEORGE A.	\$225.00
61	CHENEY, GEORGE A.	\$47.25
62	CHENEY, GEORGE A.	\$57.63
63 64		\$242.00
64 65		\$246.62
66		\$35.88
67	CHENEY, GEORGE A. CHENEY, GEORGE A.	\$330.87
68	CHENEY, GEORGE A.	\$270.68 \$17.57
69	CHENEY, GEORGE A.	\$17.57
70	CHENEY, GEORGE A.	\$102.23
71	CHENEY, GEORGE A.	\$159.91
72	CHENEY, GEORGE A.	\$37.50
73	CHENEY, GEORGE A.	\$200.20
74	CHENEY, GEORGE A.	\$511.11
75	CHENEY, GEORGE A.	\$67.50
76	CHENEY, GEORGE A.	\$500.00
77	CHENEY, GEORGE A.	\$129.97
78	CHENEY, GEORGE A.	\$398.41
79	CHENEY, GEORGE A.	\$108.00
80	CHENEY, GEORGE A.	\$57.98
81	CHENEY, GEORGE A.	\$38.25
82	CLARK, ELWYN T.	\$13.50
83	CLARK, ELWYN T.	\$30.56
84 85	CLARK, ELWYN T.	\$33.75
85 86	CLARK, ELWYN T. CLARK, ELWYN T.	\$33.31
86 87	CLARK, ELWYN T.	\$90.00
88	CLARK, ELWYN T.	\$22.10 \$92.70
89	CLARK, ELWYN T.	\$92.70
90	CLARK, ELWYN T.	\$59.65 \$10.12
91	CLARK, ELWIN T.	\$10.12
92	CLARK, ELWYN T.	\$33.00
93	CHRISTIAN ENDEAVOR	\$33.75
94	CHRISTIAN ENDEAVOR	\$135.00
95	CHRISTIAN ENDEAVOR	\$53.59
	CHRISTIAN ENDEAVOR	\$62.25

	MIDDLESEX HOSPITAL	
	ANNUAL REPORTING	
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REP	ORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED B	Y THE HOSPITAL
A Detient Activity		
A. Patient Activity (1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applications	· · · · · · · · · · · · · · · · · · ·	2.867
	receiving Hospital Bed Fund Grants	603
	bilar Amount provided to all patients from Hospital Bed Fi	\$105,729.44
97	COMSTOCK & TIFFANY	\$272.35
98	COMSTOCK & TIFFANY	\$200.00
99	COMSTOCK & TIFFANY	\$85.50
100	COMSTOCK & TIFFANY	\$250.00
101		\$23.60
102	COMSTOCK & TIFFANY	\$203.40
103 104	COMSTOCK & TIFFANY COMSTOCK & TIFFANY	\$56.85
104	COMSTOCK & TIFFANY	\$300.00 \$128.70
105	COMSTOCK & TIFFANY	\$128.70
107	COMSTOCK & TIFFANY	\$340.20
108	COMSTOCK & TIFFANY	\$10.75
109	COMSTOCK & TIFFANY	\$446.94
110	COMSTOCK & TIFFANY	\$63.49
111	COMSTOCK & TIFFANY	\$101.22
112	COMSTOCK & TIFFANY	\$53.46
113	COMSTOCK & TIFFANY	\$29.15
114	COMSTOCK & TIFFANY	\$91.33
115	COMSTOCK & TIFFANY	\$67.08
116	COMSTOCK & TIFFANY	\$25.00
117		\$54.05
118		\$128.52
119 120	COOPER, SARAH E. COOPER, SARAH E.	\$25.00
120	COOPER, SARAH E.	\$22.80 \$13.50
122	COOPER, SARAH E.	\$13.50
123	COOPER, SARAH E.	\$30.25
124	COOPER, SARAH E.	\$15.46
125	COOPER, SARAH E.	\$51.85
126	COOPER, SARAH E.	\$10.78
127	COOPER, SARAH E.	\$30.35
128	EDGERTON, FRANCIS D.	\$63.39
129	EDGERTON, FRANCIS D.	\$46.35
130	EDGERTON, FRANCIS D.	\$356.85
131	EDGERTON, FRANCIS D.	\$126.75
132	EDGERTON, FRANCIS D.	\$84.00
133	EDGERTON, FRANCIS D.	\$60.00
134 135	EDGERTON, FRANCIS D. EDGERTON, FRANCIS D.	\$27.00
135	EDGERTON, FRANCIS D.	\$40.50 \$66.00
130	EDGERTON, FRANCIS D.	\$66.00 \$22.50
138	EDGERTON, FRANCIS D.	\$22.50
139	EDGERTON, FRANCIS D.	\$15.81
140	EDGERTON, FRANCIS D.	\$27.00
141	EDGERTON, FRANCIS D.	\$100.80
142	EDGERTON, FRANCIS D.	\$16.50
143	EDGERTON, FRANCIS D.	\$208.35
144	EDGERTON, FRANCIS D.	\$33.75
145	EDGERTON, FRANCIS D.	\$92.25
146	EDGERTON, FRANCIS D.	\$23.28
147	EDGERTON, FRANCIS D.	\$63.15
148	EDGERTON, FRANCIS D.	\$38.25
149	EDGERTON, FRANCIS D.	\$500.00
150	EDGERTON, FRANCIS D.	\$500.00

	MIDDLESEX HOSPITAL	
	ANNUAL REPORTING	
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REF	PORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED B	Y THE HOSPITAL
A Detient Activity		
A. Patient Activity (1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
	is for Hospital Bed Funds	2,867
	s receiving Hospital Bed Fund Grants	603
	ollar Amount provided to all patients from Hospital Bed F	\$105,729.44
151	EDGERTON, FRANCIS D.	\$198.90
152	EDGERTON, FRANCIS D.	\$101.17
153	EDGERTON, FRANCIS D.	\$42.46
154	EDGERTON, FRANCIS D.	\$186.30
155 156	EDGERTON, FRANCIS D. FISHER, WILLIAM	\$183.06
157	FISHER, WILLIAM	\$181.95 \$121.50
158	FISHER, WILLIAM	\$121.50
159	FISHER, WILLIAM	\$139.31
160	FISHER, WILLIAM	\$53.40
161	FISHER, WILLIAM	\$324.90
162	FISHER, WILLIAM	\$120.09
163	FISHER, WILLIAM	\$33.75
164	GOFFE, PRATT	\$1,071.90
165	GOFFE, PRATT	\$1,381.84
166	GOFFE, PRATT	\$900.00
167	GRANNISS, JOHN H.	\$400.00
168	GRANNISS, JOHN H.	\$129.25
169 170	GRANNISS, JOHN H. GRANNISS, JOHN H.	\$77.83
170	GRANNISS, JOHN H.	\$93.42
172	GRANNISS, JOHN H.	\$215.66 \$70.14
173	GRANNISS, JOHN H.	\$40.50
174	GRANNISS, JOHN H.	\$11.25
175	GRANNISS, JOHN H.	\$64.95
176	GRANNISS, JOHN H.	\$21.60
177	GRANNISS, JOHN H.	\$45.10
178	GRANNISS, JOHN H.	\$300.00
179	GRANNISS, JOHN H.	\$13.50
180	GRANNISS, JOHN H.	\$34.88
181	GRANNISS, JOHN H.	\$15.03
182 183	GRANNISS, JOHN H.	\$11.05
183	GRANNISS, JOHN H. GRANNISS, JOHN H.	\$49.50
185	GRANNISS, JOHN H.	\$29.58 \$63.15
186	HAZEN, DR. MINOR C.	\$99.60
187	HAZEN, DR. MINOR C.	\$99.50
188	HAZEN, DR. MINOR C.	\$145.56
189	HAZEN, DR. MINOR C.	\$25.70
190	HAZEN, DR. MINOR C.	\$72.30
191	HAZEN, DR. MINOR C.	\$18.00
192	HAZEN, DR. MINOR C.	\$67.50
193	HAZEN, DR. MINOR C.	\$246.53
194	HAZEN, DR. MINOR C.	\$100.27
195	HAZEN, DR. MINOR C.	\$25.00
196 197	HAZEN, DR. MINOR C. HAZEN, DR. MINOR C.	\$148.50
197	HAZEN, DR. MINOR C.	\$45.00 \$149.02
198	HAZEN, DR. MINOR C.	\$149.02 \$265.76
200	HAZEN, DR. MINOR C.	\$205.70 \$196.38
200	HUBBARD, MARGARET S.	\$196.36
202	HUBBARD, MARGARET S.	\$183.75
203	HUBBARD, MARGARET S.	\$16.50

	MIDDLESEX HOSPITAL	
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REPO	RT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY	THE HOSPITAL
A. Patient Activity		(2)
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applications f		2,867
	eceiving Hospital Bed Fund Grants	603
2. B. The Actual Total Doll	ar Amount provided to all patients from Hospital Bed F	\$105,729.44
0.05		
205	HUBBARD, MARGARET S.	\$213.75
206	HUBBARD, MARGARET S.	\$22.50
207 208	HUBBARD, MARGARET S. HUBBARD, MARGARET S.	\$232.20
208	HUBBARD, MARGARET S.	\$111.90
209	HUBBARD, MARGARET S.	\$99.45
210	HUBBARD, MARGARET S.	\$12.50 \$67.50
212	HUBBARD, MARGARET S.	\$67.50
212	HUBBARD, MARGARET S.	\$142.20
213	HUBBARD, MARGARET S.	\$92.25 \$268.00
215	HUBBARD, MARGARET S.	\$200.00
216	HUBBARD, MARGARET S.	\$101.25
217	HUBBARD, MARGARET S.	\$168.75
218	HUBBARD, MARGARET S.	\$143.55
219	HUBBARD, MARGARET S.	\$45.00
220	HUBBARD, MARGARET S.	\$36.85
221	HUBBARD, MARGARET S.	\$30.65
222	HUBBARD, MARGARET S	\$109.56
223	HUBBARD, MARGARET S	\$189.45
224	MIDDLESEX HOSPITAL	\$13.50
225	MIDDLESEX HOSPITAL	\$22.50
226	MIDDLESEX HOSPITAL	\$152.34
227	MIDDLESEX HOSPITAL	\$15.00
228	MIDDLESEX HOSPITAL	\$54.29
229	MIDDLESEX HOSPITAL	\$13.26
230	MIDDLESEX HOSPITAL	\$65.43
231	MIDDLESEX HOSPITAL	\$182.15
232	MIDDLESEX HOSPITAL	\$180.00
233	MIDDLESEX HOSPITAL	\$96.15
234	MIDDLESEX HOSPITAL	\$97.75
235	MIDDLESEX HOSPITAL	\$27.87
236	MIDDLESEX HOSPITAL	\$131.40
237	MIDDLESEX HOSPITAL	\$81.00
238	MIDDLESEX HOSPITAL	\$300.00
239		\$300.00
240		\$321.19
241		\$275.00
242		\$168.75
243		\$101.25
244		\$205.00
245 246	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$220.34
246 247	MIDDLESEX HOSPITAL	\$300.00
247	MIDDLESEX HOSPITAL	\$23.61 \$29.60
249	MIDDLESEX HOSPITAL	\$29.60 \$133.80
250	MIDDLESEX HOSPITAL	\$133.80 \$300.00
251	MIDDLESEX HOSPITAL	\$300.00
252	MIDDLESEX HOSPITAL	\$300.00 \$218.13
253	MIDDLESEX HOSPITAL	\$210.13
254	MIDDLESEX HOSPITAL	\$300.00
255	MIDDLESEX HOSPITAL	\$300.00
256	MIDDLESEX HOSPITAL	\$300.00
	MIDDLESEX HOSPITAL	
257	WIDDLESEX RUSPITAL	\$300.00

	MIDDLESEX HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2009	
REPO	ORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED E	BY THE HOSPITAL
A Detient Activity		
A. Patient Activity (1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applications	· · · · · · · · · · · · · · · · · · ·	2,867
	receiving Hospital Bed Fund Grants	603
	ollar Amount provided to all patients from Hospital Bed F	\$105,729.44
	· · · ·	
259	MIDDLESEX HOSPITAL	\$333.88
260	MIDDLESEX HOSPITAL	\$200.00
261	MIDDLESEX HOSPITAL	\$300.00
262	MIDDLESEX HOSPITAL	\$316.80
263		\$400.00
264 265	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$200.00
265	MIDDLESEX HOSPITAL	\$198.67
267	MIDDLESEX HOSPITAL	\$666.08 \$300.00
268	MIDDLESEX HOSPITAL	\$500.00
269	MIDDLESEX HOSPITAL	\$500.00
270	MIDDLESEX HOSPITAL	\$34.97
271	MIDDLESEX HOSPITAL	\$114.25
272	MIDDLESEX HOSPITAL	\$33.75
273	MIDDLESEX HOSPITAL	\$400.00
274	MIDDLESEX HOSPITAL	\$46.79
275	MIDDLESEX HOSPITAL	\$88.20
276	MIDDLESEX HOSPITAL	\$300.00
277		\$500.00
278		\$22.68
279 280	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$43.86
281	MIDDLESEX HOSPITAL	\$40.50 \$500.00
282	MIDDLESEX HOSPITAL	\$300.00
283	MIDDLESEX HOSPITAL	\$191.37
284	MIDDLESEX HOSPITAL	\$410.62
285	MIDDLESEX HOSPITAL	\$500.00
286	MIDDLESEX HOSPITAL	\$1,242.90
287	MIDDLESEX HOSPITAL	\$300.00
288	MIDDLESEX HOSPITAL	\$586.85
289	MIDDLESEX HOSPITAL	\$14.02
290	MIDDLESEX HOSPITAL	\$72.10
291		\$343.06
292 293	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$33.75
293	MIDDLESEX HOSPITAL	\$253.97 \$212.75
295	MIDDLESEX HOSPITAL	\$313.75 \$388.86
296	MIDDLESEX HOSPITAL	\$300.00 \$268.11
297	MIDDLESEX HOSPITAL	\$200.11
298	MIDDLESEX HOSPITAL	\$351.00
299	MIDDLESEX HOSPITAL	\$500.00
300	MIDDLESEX HOSPITAL	\$49.50
301	MIDDLESEX HOSPITAL	\$328.01
302	MIDDLESEX HOSPITAL	\$245.18
303	MIDDLESEX HOSPITAL	\$131.40
304		\$242.55
305		\$500.00
306		\$300.00
307 308	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$324.44
308	MIDDLESEX HOSPITAL	\$100.00 \$200.00
310	MIDDLESEX HOSPITAL	\$200.00 \$200.00
311	MIDDLESEX HOSPITAL	\$200.00 \$172.89
312	MIDDLESEX HOSPITAL	\$172.03
-		φ-100.00

	MIDDLESEX HOSPITAL ANNUAL REPORTING	
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RFF	PORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED B	
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
	s for Hospital Bed Funds	2,867
	s receiving Hospital Bed Fund Grants	603
	ollar Amount provided to all patients from Hospital Bed F	\$105,729.44
	· · · ·	
313	MIDDLESEX HOSPITAL	\$276.43
314	MIDDLESEX HOSPITAL	\$300.00
315	MIDDLESEX HOSPITAL	\$100.00
316	MIDDLESEX HOSPITAL	\$50.00
317	MIDDLESEX HOSPITAL	\$111.69
318	MIDDLESEX HOSPITAL	\$501.41
319	MIDDLESEX HOSPITAL	\$367.20
320	MIDDLESEX HOSPITAL	\$500.00
321	MIDDLESEX HOSPITAL	\$45.00
322	MIDDLESEX HOSPITAL	\$38.32
323	MIDDLESEX HOSPITAL	\$62.98
324	MIDDLESEX HOSPITAL	\$166.05
325		\$67.50
326		\$290.67
327		\$21.37
328		\$500.00
329		\$500.00
330		\$23.10
331		\$256.73
332 333	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$27.00
334	MIDDLESEX HOSPITAL	\$165.00
335	MIDDLESEX HOSPITAL	\$87.02
336	MIDDLESEX HOSPITAL	\$295.29
337	MIDDLESEX HOSPITAL	\$371.68 \$25.11
338	MIDDLESEX HOSPITAL	\$238.63
339	MIDDLESEX HOSPITAL	\$230.03
340	MIDDLESEX HOSPITAL	\$92.73
341	MIDDLESEX HOSPITAL	\$500.00
342	MIDDLESEX HOSPITAL	\$675.00
343	MIDDLESEX HOSPITAL	\$60.75
344	MIDDLESEX HOSPITAL	\$27.00
345	MIDDLESEX HOSPITAL	\$54.40
346	MIDDLESEX HOSPITAL	\$160.26
347	MIDDLESEX HOSPITAL	\$862.20
348	MIDDLESEX HOSPITAL	\$96.30
349	MIDDLESEX HOSPITAL	\$56.10
350	MIDDLESEX HOSPITAL	\$356.80
351	MIDDLESEX HOSPITAL	\$203.40
352	MIDDLESEX HOSPITAL	\$500.00
353	MIDDLESEX HOSPITAL	\$709.65
354	MIDDLESEX HOSPITAL	\$450.00
355	MIDDLESEX HOSPITAL	\$1,000.00
356		\$304.35
357		\$310.95
358		\$153.79
359		\$96.24
360		\$52.49
361		\$245.64
362		\$67.05
363		\$59.31
364		\$215.24
365 366	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$159.90
		\$552.90

	MIDDLESEX HOSPITAL ANNUAL REPORTING	
	FISCAL YEAR 2009	
RF	PORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED B	
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
	ns for Hospital Bed Funds	2,867
	ts receiving Hospital Bed Fund Grants	603
	Dollar Amount provided to all patients from Hospital Bed F	\$105,729.44
	· · · ·	
367	MIDDLESEX HOSPITAL	\$287.15
368	MIDDLESEX HOSPITAL	\$22.50
369	MIDDLESEX HOSPITAL	\$515.12
370	MIDDLESEX HOSPITAL	\$219.65
371	MIDDLESEX HOSPITAL	\$64.25
372	MIDDLESEX HOSPITAL	\$700.00
373	MIDDLESEX HOSPITAL	\$101.25
374	MIDDLESEX HOSPITAL	\$500.00
375	MIDDLESEX HOSPITAL	\$54.82
376	MIDDLESEX HOSPITAL	\$222.61
377	MIDDLESEX HOSPITAL	\$100.00
378	MIDDLESEX HOSPITAL	\$250.00
379	MIDDLESEX HOSPITAL	\$483.91
380	MIDDLESEX HOSPITAL	\$341.10
381		\$150.00
382		\$410.13
383		\$500.00
384		\$259.75
385		\$469.00
386 387	MIDDLESEX HOSPITAL MIDDLESEX HOSPITAL	\$138.51
388	MIDDLESEX HOSPITAL	\$400.00 \$400.00
389	MIDDLESEX HOSPITAL	\$400.00
390	MIDDLESEX HOSPITAL	\$438.29
391	NEFF, CHARLES H.	\$11.20
392	NEFF, CHARLES H.	\$35.44
393	NEFF, CHARLES H.	\$19.11
394	NEFF, CHARLES H.	\$67.50
395	NEFF, CHARLES H.	\$40.80
396	NEFF, CHARLES H.	\$60.75
397	NEFF, CHARLES H.	\$135.00
398	NEFF, CHARLES H.	\$18.00
399	NEFF, CHARLES H.	\$106.25
400	NEFF, CHARLES H.	\$19.55
401	NEFF, CHARLES H.	\$54.60
402	NEFF, CHARLES H.	\$58.46
403	NEFF, CHARLES H.	\$44.06
404	NEFF, CHARLES H.	\$8.00
405	NEFF, CHARLES H.	\$50.40
406	NEFF, CHARLES H.	\$48.12
407		\$179.55
408		\$68.43
409	NETTLETON, JOSEPHINE NETTLETON, JOSEPHINE	\$143.98
410 411	NETTLETON, JOSEPHINE	\$290.25
411	NETTLETON, JOSEPHINE	\$174.63 \$11.27
412	NETTLETON, JOSEPHINE	\$11.27 \$16.34
413	NETTLETON, JOSEPHINE	\$10.34 \$15.30
415	NETTLETON, JOSEPHINE	\$15.30
416	NETTLETON, JOSEPHINE	\$30.74
417	NETTLETON, JOSEPHINE	\$22.30
418	NETTLETON, JOSEPHINE	\$122.40
419	NETTLETON, JOSEPHINE	\$102.00
		ψ102.00

	MIDDLESEX HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2009	
REPO	ORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED E	BY THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applications	s for Hospital Bed Funds	2,867
	receiving Hospital Bed Fund Grants	603
2. B. The Actual Total Do	Ilar Amount provided to all patients from Hospital Bed F	\$105,729.44
421	NETTLETON, JOSEPHINE	\$17.20
422		\$30.45
423 424	NETTLETON, JOSEPHINE NETTLETON, JOSEPHINE	\$123.35
425	PALMER, ISAAC E.	\$78.60 \$140.85
426	PALMER, ISAAC E.	\$140.85
427	PALMER, ISAAC E.	\$106.95
428	PALMER, ISAAC E.	\$39.75
429	PALMER, ISAAC E.	\$159.32
430	PALMER, ISAAC E.	\$33.22
431	PALMER, ISAAC E.	\$500.00
432	PALMER, ISAAC E.	\$152.61
433	PALMER, ISAAC E.	\$292.00
434	PALMER, ISAAC E.	\$258.95
435	PALMER, ISAAC E.	\$300.00
436 437	PALMER, ISAAC E.	\$300.00
437	PALMER, ISAAC E. PALMER, ISAAC E.	\$33.71
439	PALMER, ISAAC E.	\$127.80 \$61.84
440	PALMER, ISAAC E.	\$27.00
441	PALMER, ISAAC E.	\$27.00
442	PALMER, ISAAC E.	\$30.13
443	PALMER, ISAAC E.	\$36.00
444	PALMER, ISAAC E.	\$258.75
445	PALMER, ISAAC E.	\$124.64
446	PIKE, CHARLES J.	\$56.65
447	PIKE, CHARLES J.	\$45.00
448	PIKE, CHARLES J.	\$54.00
449	PIKE, CHARLES J.	\$33.75
450 451	PIKE, CHARLES J. PIKE, CHARLES J.	\$265.06
452	PIKE, CHARLES J.	\$13.15 \$301.05
453	PIKE, CHARLES J.	\$14.31
454	PIKE, CHARLES J.	\$35.49
455	PIKE, CHARLES J.	\$54.07
456	PIKE, CHARLES J.	\$14.71
457	PIKE, CHARLES J.	\$122.05
458	PIKE, ELIZABETH E.	\$34.39
459	PIKE, ELIZABETH E.	\$62.50
460	PIKE, ELIZABETH E.	\$33.75
461		\$33.75
462 463		\$59.85
464	PIKE, ELIZABETH E. PIKE, ELIZABETH E.	\$55.25 \$189.45
465	PIKE, ELIZABETH E.	\$189.45
466	PIKE, ELIZABETH E.	\$30.00
467	PIKE, ELIZABETH E.	\$75.15
468	PIKE, ELIZABETH E.	\$60.45
469	PIKE, ELIZABETH E.	\$15.78
470	PIKE, ELIZABETH E.	\$16.87
471	PIKE, ELIZABETH E.	\$67.50
472	PIKE, ELIZABETH E.	\$63.15
473		\$23.65
474	PIKE, ELIZABETH E.	\$21.64

	MIDDLESEX HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2009	
REI	PORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED B	Y THE HOSPITAL
A. Patient Activity		
A. Patient Activity (1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
	ns for Hospital Bed Funds	2,867
	s receiving Hospital Bed Fund Grants	603
	Dollar Amount provided to all patients from Hospital Bed Fi	\$105,729.44
475	PIKE, ELIZABETH E.	\$95.94
476	PIKE, GORDON	\$324.90
477	PIKE, GORDON	\$75.00
478	PIKE, GORDON	\$305.19
479	PIKE, GORDON	\$118.13
480 481	PIKE, GORDON PIKE, GORDON	\$21.30
482	PIKE, GORDON	\$18.45 \$55.90
483	PIKE, GORDON	\$55.90 \$80.87
484	PIKE, GORDON	\$346.36
485	PIKE, GORDON	\$16.50
486	PIKE, GORDON	\$225.00
487	PIKE, GORDON	\$50.60
488	PIKE, GORDON	\$27.00
489	PIKE, GORDON	\$12.60
490	PIKE, GORDON	\$32.51
491	PIKE, GORDON	\$58.74
492	PIKE, GORDON	\$66.16
493	PIKE, GRACE	\$103.94
494	PIKE, GRACE	\$250.00
495	PIKE, GRACE	\$237.15
496	PIKE, GRACE	\$63.15
497	PIKE, GRACE	\$30.82
498 499	PIKE, GRACE	\$36.00
499 500	PIKE, GRACE PIKE, GRACE	\$300.00 \$136.08
501	PIKE, GRACE	\$130.08 \$143.32
502	PIKE, GRACE	\$145.52
503	PIKE, GRACE	\$5.50
504	PIKE, GRACE	\$29.21
505	PIKE, GRACE	\$45.97
506	PIKE, GRACE	\$105.57
507	PIKE, ROBERT G.	\$180.67
508	PIKE, ROBERT G.	\$49.50
509	PIKE, ROBERT G.	\$105.05
510	PIKE, ROBERT G.	\$40.43
511	PIKE, ROBERT G.	\$45.00
512	PIKE, ROBERT G.	\$297.00
513	PIKE, ROBERT G.	\$18.04
514	PIKE, ROBERT G.	\$135.42
515 516		\$90.02
516 517	PRATT, LUCY CAROLINE PRATT, LUCY CAROLINE	\$14.08
518	PRATT, LUCY CAROLINE	\$38.25
519	PRATT, LUCY CAROLINE	\$22.50 \$15.38
520	PRATT, LUCY CAROLINE	\$15.36
521	PRATT, LUCY CAROLINE	\$23.20
522	PRATT, LUCY CAROLINE	\$28.80
523	PRATT, LUCY CAROLINE	\$40.50
524	PRATT, LUCY CAROLINE	\$42.02
525	PRATT, LUCY CAROLINE	\$20.82
526	PRATT, LUCY CAROLINE	\$4.71
527	PRATT, LUCY CAROLINE	\$23.85
528	PRATT, LUCY CAROLINE	\$30.33

	MIDDLESEX HOSPITAL ANNUAL REPORTING	
RI	FISCAL YEAR 2009 EPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED B	Y THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Application	ons for Hospital Bed Funds	2,867
	nts receiving Hospital Bed Fund Grants	603
	Dollar Amount provided to all patients from Hospital Bed F	\$105,729.44
529	PRATT, LUCY CAROLINE	\$4.33
530	PRATT, LUCY CAROLINE	\$16.64
531	TOWNSEND	\$30.74
532	TOWNSEND	\$3.32
533	TOWNSEND	\$40.50
534	TOWNSEND	\$33.75
535	TOWNSEND	\$27.00
536	TOWNSEND	\$200.00
537	TOWNSEND	\$123.59
538	TOWNSEND	\$300.00
539	TOWNSEND	\$271.35
540	TOWNSEND	\$163.80
541	TOWNSEND	\$225.00
542	TOWNSEND	\$138.08
543	TOWNSEND	\$162.90
544	TOWNSEND	\$247.05
545	TOWNSEND	\$333.62
546	TOWNSEND	\$72.09
547	TOWNSEND	\$172.50
548	TOWNSEND	\$802.30
549	TOWNSEND	\$116.01
550	TOWNSEND	\$10.08
551	TOWNSEND	\$33.75
552	TOWNSEND	\$22.10
553	TOWNSEND	\$46.49
554	TOWNSEND	\$102.67
555	TOWNSEND	\$37.52
556	TOWNSEND	\$265.97
557	TOWNSEND	\$11.02
558	VINAL, AMELIA H.	\$31.02
559	VINAL, AMELIA H.	\$85.50
560	VINAL, AMELIA H.	\$24.30
561	VINAL, AMELIA H.	\$292.50
562	VINAL, AMELIA H.	\$22.50
563	VINAL, AMELIA H.	\$20.25
564	VINAL, AMELIA H.	\$53.99
565	VINAL, AMELIA H.	\$14.06
566	VINAL, AMELIA H.	\$10.80
567	VINAL, AMELIA H.	\$54.12
568	VINAL, AMELIA H.	\$33.75
569	VINAL, AMELIA H.	\$257.40
570	VINAL, AMELIA H.	\$38.25
571	VINAL, AMELIA H.	\$126.12
572	VINAL, AMELIA H.	\$120.12
573	VINAL, AMELIA H.	\$38.25
574	VINAL, AMELIA H.	\$30.23
575	WILLIAMS, EZRA H. & MARY DICKINSON	\$389.86
576	WILLIAMS, EZRA H. & MARY DICKINSON	\$369.66 \$26.80
577	WILLIAMS, EZRA H. & MARY DICKINSON	\$20.00
578	WILLIAMS, EZRA H. & MARY DICKINSON	\$702.50
579	WILLIAMS, EZRA H. & MARY DICKINSON	\$675.00
580	WILLIAMS, EZRA H. & MARY DICKINSON	\$55.35 \$1,350.00
580	WILLIAMS, EZRA H. & MARY DICKINSON	\$1,350.00 \$210.60
582	WILLIAMS, EZRA H. & MARY DICKINSON	\$210.60

	MIDDLESEX HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2009	
	REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERE	D BY THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applica	tions for Hospital Bed Funds	2,867
2. A. Number of Pat	ients receiving Hospital Bed Fund Grants	603
2. B. The Actual Tot	al Dollar Amount provided to all patients from Hospital Bed F	\$105,729.44
583	WILLIAMS, EZRA H. & MARY DICKINSON	\$296.07
584	WILLIAMS, NETHANIEL A.	\$113.40
585	WILLIAMS, NETHANIEL A.	\$406.02
586	WILLIAMS, NETHANIEL A.	\$29.24
587	WILLIAMS, NETHANIEL A.	\$102.25
588	WILLIAMS, NETHANIEL A.	\$72.28
589	WILLIAMS, NETHANIEL A.	\$54.00
590	WILLIAMS, NETHANIEL A.	\$72.90
591	WILLIAMS, NETHANIEL A.	\$79.83
592	WILLIAMS, NETHANIEL A.	\$300.00
593	WILLIAMS, NETHANIEL A.	\$20.33
594	WILLIAMS, NETHANIEL A.	\$281.86
595	WILLIAMS, NETHANIEL A.	\$40.50
596	WILLIAMS, NETHANIEL A.	\$40.50
597	WILLIAMS, NETHANIEL A.	\$18.00
598	WILLIAMS, NETHANIEL A.	\$106.65
599	WILLIAMS, NETHANIEL A.	\$22.26
600	WILLIAMS, NETHANIEL A.	\$114.36
601	WILLIAMS, NETHANIEL A.	\$64.37
602	WILLIAMS, NETHANIEL A.	\$11.05
603	WILLIAMS, NETHANIEL A.	\$31.95
	Grand Total	\$105,729.44

		MIDDLESEX HO	OSPITAL		
		ANNUAL REPO			
		FISCAL YEAR			
	REPORT 17 - HOSPITAL			Y THE HOSPITAL	
. BE	ED FUND ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)
. ,		FMV of Principal	Actual Earnings	Earnings	Earnings
ine	Name of Hospital Bed Fund		Ŭ	Reinvested	Available
(3)	Fair Market Value of the Principal of ea	ach individual Hospit	al Bed Fund, or the P	rincipal attributable	to each Hospit
(4)	Total Actual Earnings for each Hospita	al Bed Fund or the Ea	arnings attributable to	o each Hospital Bed	Fund.
(5)	Actual Dollar Amount of Earnings rein	vested as Principal, i	f any.		
(6)	Actual Dollar Amount of Earnings avai	lable for Patient Care	Э.		
		1			
	Hannah R. Bennett	\$41,828.00	\$3,459.00	\$0.00	\$3,459.0
	Floriola Hull Branerd	\$48,472.00	\$580.00	\$0.00	\$580.0
	Ellen & Nehemiah Burr Memorial	\$8,236.00	\$1,945.00	\$0.00	\$1,945.0
	William B. Casey	\$18,525.00	\$222.00	\$0.00	\$222.0
	Henry Lay Champlin & Louise				
	McKnight Champlin	\$61,370.00	\$1,244.00	\$0.00	\$1,244.0
	Charles & Dency Chapman	\$56,891.00	\$30,910.00	\$0.00	\$30,910.0
	Elwin T. Clark	\$6,989.00	\$84.00	\$0.00	\$84.0
	Sarah A. Cooper	\$3,917.00	\$47.00	\$0.00	\$47.
	Francis D. Edgerton	\$47,669.00	\$571.00	\$0.00	\$571.
	Christian Endeavor	\$7,321.00	\$88.00	\$0.00	\$88.
	William C. Fisher	\$16,524.00	\$198.00	\$0.00	\$198.0
	Pratt Goffe	\$19,028.00	\$410.00	\$0.00	\$410.0
	John H. Granniss	\$21,721.00	\$260.00	\$0.00	\$260.
	Dr. Minor Comstock Hazen	\$24,232.00	\$290.00	\$0.00	\$290.
	Margaret S. Hubbard	\$38,590.00	\$462.00	\$0.00	\$462.
	Charles H. Neff	\$12,134.00	\$145.00	\$0.00	\$145.
	Josephine Nettleton	\$26,063.00	\$312.00	\$0.00	\$312.
	Isaac Emerson Palmer	\$44,993.00	\$539.00	\$0.00	\$539.
	Charles J. Pike	\$13,466.00	\$105.00	\$0.00	\$105.
	Elizabeth E. Pike	\$16,036.00	\$192.00	\$0.00	\$192.
	Gordon Pike	\$27,288.00	\$327.00	\$0.00	\$327.
	Grace S. Pike	\$22,428.00	\$268.00	\$0.00	\$268.
	Robert G. Pike	\$13,405.00	\$161.00	\$0.00	\$161.
	Lucy Caroline Gratt	\$6,672.00	\$80.00	\$0.00	\$80.
	Henry P. Ryan & Bertha I. Ryan	\$11,730.00	\$1,057.00	\$707.00	\$350.
	Comstock & Tiffany	\$47,232.00	\$566.00	\$0.00	\$566.
	Townsend	\$58,237.00	\$697.00	\$0.00	\$697.
	M. Amelia H. Vinal	\$17,911.00	\$214.00	\$0.00	\$214.
	Nethaniel A. Williams	\$28,616.00	\$343.00	\$0.00	\$343.
	Ezra H. Williams & Mary Dickinson				
	Williams	\$54,569.00	\$4,138.00	\$0.00	\$4,138.
	George A. Cheney	\$101,282.00	\$2,897.00	\$1,684.00	\$1,213.
	Middlesex Hospital Free Bed Fund	\$659,598.00	\$7,899.00	\$0.00	\$7,899.
	Total Bed Funds :	\$1,582,973.00	\$60,710.00	\$2,391.00	\$58,319.

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)		
LINE	DESCRIPTION	COLLECTION INFORMATION		
I.	GENERAL COLLECTION PROCESSES AND PROCEDURES			
Α.	Hospital's processes and policies for assigning a debt to a Collection Agent			
		Refer to collection agent description. The hospital uses one collection agency (Policy A) and one attorneys group (Policy B).		
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered			
		Refer to individual collection agent description.		
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	17.60%		
П.	SPECIFIC COLLECTION AGENT INFORMATION			
	Collection Agent			
1	Collection Agent Name	MEDCONN COLLECTION AGENCY LLC		
2	Collection Agent Type	Collection Agency		
3	Related / Not Related Entity	Not Related		
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.			
		Refer to Hardcopy Submission		
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.			
		Refer to Hardcopy Submission		

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to	
	Collection Agent.	14.26%
	Collection Agent	
1	Collection Agent Name	TCORS
2	Collection Agent Type	Attorney
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	
		Refer to Hardcopy Submission
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	
		Refer to Hardcopy Submission
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to	
	Collection Agent.	27.00%

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL POSITIONS

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	President/CEO	\$561,083	\$816,483	\$1,377,566
2.	Sr VP/ COO	\$341,926	\$241,347	\$583,273
3.	VP, Nursing	\$227,313	\$227,795	\$455,108
4.	Vp, Clinical Affairs	\$309,080	\$115,995	\$425,075
5.	Chairman, Emergency Medicine	\$345,892	\$68,622	\$414,514
6.	Chief, Dept of Medicine	\$329,670	\$53,880	\$383,550
7.	Clinical Director of Infectious Disease	\$320,932	\$52,857	\$373,789
8.	VP, Finance/CFO	\$266,937	\$99,897	\$366,834
9.	Physician, Emergency Dept	\$313,594	\$46,339	\$359,933
10.	Medical Director, Emergency Dept	\$304,970	\$49,850	\$354,820
	Grand Total:	\$3,321,397	\$1,773,065	\$5,094,462

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
			FRINGE BENEFITS ^A	
		SALARIES (Directly		
LINE	DESCRIPTION	or Indirectly) ^C	Indirectly) ^C	TOTAL
		_		
Α.	MIDDLESEX HEALTH SYSTEM, INC.	^	A 0	^
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Β.	HARTFORD-MIDDLESEX CLINICAL SYSTEM, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
4		ψυ	ψυ	ψυ
С.	INTEGRATED RESOURCES FOR THE MIDDLESEX AREA, L.L.C.	7		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
D .	MHS PRIMARY CARE, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
		_		
Ε.	MIDDLESEX CENTER FOR ADVANCED ORTHOPEDIC SURGERY, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
		_		
F. 1	MIDDLESEX HEALTH RESOURCES, INC.	* 0	* 0	¢0
•	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
G.	MIDDLESEX HEALTH SERVICES, INC.			
<u> </u>	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
		φυ	φυ	φυ

For each entity listed on Report 20, complete Report 21.

A - Fringe benefits shall represent the value of all forms of compensation as described in Section 19a-643-206-(b)(21), including the fair market value where appropriate.

B - A hospital employee is anyone who provides a service which incurs an expense for the hospital.

C - Indirect payments include but are not limited to payments made to related entities.

MIDDLESEX HOSPITAL ANNUAL REPORTING FISCAL YEAR 2009 REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2009
A	Transfer of Assets or Operations	
	Name of the Person or Entity Organized or Operated For Profit involved in each	
1.	Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

ANNUAL REPORTING

		'EAR 2009			
	REPORT 23 - CHARITY CARE AND REDUCED				
	KEI OKT 23 - CHARTT GARE AND REDUCED				
(1)	(2)	(2)	(4)	(5)	(6)
(1)	(2)	(3) FY 2008	(4) FY 2009	(5) AMOUNT	(6)
LINE	DESCRIPTION	<u>AMOUNT</u>	<u>AMOUNT</u>	DIFFERENCE	DIFFERENCE
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial St	atement Notes)			
1.	Number of Applicants	7,765	2,867	(4,898)	-639
2.	Number of Approved Applicants	1,384	1,906	522	389
		,	,		
3.	Total Charges (A)	\$4,682,373	\$7,535,167	\$2,852,794	619
	Average Charges	\$3,383	\$3,953	\$570	179
4.	Ratio of Cost to Charges (RCC)	0.422356	0.389797	(0.032559)	-89
	Total Cost	\$1,977,628	\$2,937,185	\$959,557	49
	Average Cost	\$1,429	\$1,541	\$112	8
5	Charity Care, Innotiant Charges	¢4 004 005	\$2,481,924	¢4.050.000	102
5. 6.	Charity Care - Inpatient Charges Charity Care - Outpatient Emergency Department Charges	\$1,221,985 1,300,384	2,031,778	\$1,259,939 731,394	103 [.] 56 [.]
<u>о.</u> 7.	Charity Care - Outpatient Emergency Department Charges Charity Care - Outpatient Charges (Excludes ED Charges)	2,160,004		861,461	<u> </u>
1.	Total Charges (A)	, ,	3,021,465	,	
	Total Charges (A)	\$4,682,373	\$7,535,167	\$2,852,794	61
8.	Charity Care - Number of Patient Days	255	406	151	59
9.	Charity Care - Number of Discharges	67	114	47	70
10.	Charity Care - Number of Outpatient ED Visits	903	1,165	262	29
	Charity Care - Number of Outpatient Visits (Excludes ED		.,		
11.	Visits)	1,658	1,860	202	12
	e total amount must agree with the total amount listed in t	P			
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - Re	eport 17)			
1.	Number of Applicants				
		7 765	2 867	(4 898)	-63
2	Number of Approved Applicants	7,765	2,867 603	(4,898)	-63 153
2.	Number of Approved Applicants	7,765 238	2,867 603	(4,898) 365	
2. 3.	Number of Approved Applicants Total Charges (B)		1	,	-63 1 53 72
		238	603	365	153 72
3.	Total Charges (B) Average Charges	238 \$61,475 \$258	603 \$105,729 \$175	365 \$44,254 (\$83)	153 72 -32
	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC)	238 \$61,475 \$258 0.422356	603 \$105,729 \$175 0.389797	365 \$44,254 (\$83) (0.032559)	153 72 -32 -8
3.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost	238 \$61,475 \$258 0.422356 \$25,964	603 \$105,729 \$175 0.389797 \$41,213	365 \$44,254 (\$83) (0.032559) \$15,249	153 72 -32 -8 59
3.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC)	238 \$61,475 \$258 0.422356	603 \$105,729 \$175 0.389797	365 \$44,254 (\$83) (0.032559)	153 72 -32 -8 59
3.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost	238 \$61,475 \$258 0.422356 \$25,964	603 \$105,729 \$175 0.389797 \$41,213	365 \$44,254 (\$83) (0.032559) \$15,249	153 72 -32 -8 59 -37
3.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost	238 \$61,475 \$258 0.422356 \$25,964 \$109	603 \$105,729 \$175 0.389797 \$41,213 \$68	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41)	153 72 -32 -8 59 -37 103
3. 4. 5.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444	153 72 -32 -8 59 -37 -37 103 55
3. 4. 5. 6.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798	153 72 -32 -8 59 -37 -37 -37 -37 -37 -37 -37 -37 -37 -37
3. 4. 5. 6. 7.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B)	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379 32,837 \$61,475	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177 57,849 \$105,729	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798 25,012 \$44,254	153 72 -32 -8 59 -37 103 55 76 72
3. 4. 5. 6. 7. 8.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379 32,837 \$61,475 2	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177 57,849 \$105,729 4	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798 25,012 \$44,254 2	153 72 -32 -8 59 -37 103 55 76 72 100
3. 4. 5. 6. 7. 8. 9.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379 32,837 \$61,475 2 2 1	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177 57,849 \$105,729 4 2	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798 25,012 \$44,254 2 2 1	153 72 -32 -8 59 -37 103 55 76 72 100 100
3. 4. 5. 6. 7. 8.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379 32,837 \$61,475 2	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177 57,849 \$105,729 4	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798 25,012 \$44,254 2	153 72 -32 -8 59 -37 103 55 76 72 100 100
3. 4. 5. 6. 7. 8. 9. 10.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits Bed Funds - Number of Outpatient ED Visits	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379 32,837 \$61,475 2 2 1 1 18	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177 57,849 \$105,729 \$105,729 4 27	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798 25,012 \$44,254 2 2 1 9	153 72 -32 -8 59 -37 -37 -37 -37 -37 -37 -37 -37 -37 -37
3. 4. 5. 6. 7. 8. 9.	Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits	238 \$61,475 \$258 0.422356 \$25,964 \$109 \$7,259 21,379 32,837 \$61,475 2 2 1	603 \$105,729 \$175 0.389797 \$41,213 \$68 \$14,703 33,177 57,849 \$105,729 4 2	365 \$44,254 (\$83) (0.032559) \$15,249 (\$41) \$7,444 11,798 25,012 \$44,254 2 2 1	153 72 -32 -55 55 -37 103 55 76 72 100 100