	WATERBURY HOS	SPITAL					
	TWELVE MONTHS ACT	UAL FILING					
	FISCAL YEAR	2009					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION							
(1)	1) (2) (3) (4) (5)						
LINE	DESCRIPTION	FY 2008 <u>ACTUAL</u>	FY 2009 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE		
Ι.	<u>ASSETS</u>						
Α.	Current Assets:						
1	Cash and Cash Equivalents	\$10,440,801	\$14,657,330	\$4,216,529	40%		
2	Short Term Investments	\$0	\$0	\$0	0%		
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$33,654,146	\$30,390,471	(\$3,263,675)	-10%		
4	Current Assets Whose Use is Limited for Current Liabilities	\$2,737,177	\$573,887	(\$2,163,290)	-79%		
5	Due From Affiliates	\$0	\$902,115	\$902,115	0%		
6	Due From Third Party Payers	\$810,405	\$0	(\$810,405)	-100%		
7	Inventories of Supplies	\$608,211	\$584,339	(\$23,872)	-4%		
8	Prepaid Expenses	\$1,697,859	\$1,248,474	(\$449,385)	-26%		
9	Other Current Assets	\$1,047,194	\$1,208,850	\$161,656	15%		
	Total Current Assets	\$50,995,793	\$49,565,466	(\$1,430,327)	-3%		
В.	Noncurrent Assets Whose Use is Limited:						
1	Held by Trustee	\$38,548,695	\$37,864,978	(\$683,717)	-2%		
2	Board Designated for Capital Acquisition	\$0	\$2,673,155	\$2,673,155	0%		
3	Funds Held in Escrow	\$2,559,694	\$2,003,239	(\$556,455)	-22%		
4	Other Noncurrent Assets Whose Use is Limited	\$2,072,522	\$16,843	(\$2,055,679)	-99%		
	Total Noncurrent Assets Whose Use is Limited:	\$43,180,911	\$42,558,215	(\$622,696)	-1%		
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%		
6	Long Term Investments	\$12,658,774	\$9,558,064	(\$3,100,710)	-24%		
7	Other Noncurrent Assets	\$1,513,134	\$6,278,831	\$4,765,697	315%		
C.	Net Fixed Assets:						
1	Property, Plant and Equipment	\$238,997,802	\$240,623,424	\$1,625,622	1%		
2	Less: Accumulated Depreciation	\$188,689,241	\$197,380,797	\$8,691,556	5%		
	Property, Plant and Equipment, Net	\$50,308,561	\$43,242,627	(\$7,065,934)	-14%		
3	Construction in Progress	\$193,299	\$93,916	(\$99,383)	-51%		
	Total Net Fixed Assets	\$50,501,860	\$43,336,543	(\$7,165,317)	-14%		
	Total Assets	\$158,850,472	\$151,297,119	(\$7,553,353)	-5%		

	Y HOSPITAL										
TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION											
						(2) (3) (4) (5)					
							FY 2008	FY 2009		% DIFFERENCE	
DESCRIPTION	ACTOAL	ACTOAL	DIFFERENCE	DIFFERENCE							
LIABILITIES AND NET ASSETS											
Current Liabilities:											
	\$19,749,922	\$14,976,895	(\$4,773,027)	-24%							
				-12%							
Due To Third Party Payers	\$0	\$1,023,178	\$1,023,178	0%							
Due To Affiliates	\$705,541	\$0	(\$705,541)	-100%							
Current Portion of Long Term Debt	\$790,000	\$820,000	\$30,000	4%							
Current Portion of Notes Payable	\$1,011,316	\$83,754	(\$927,562)	-92%							
Other Current Liabilities	\$0	\$0	\$0	0%							
Total Current Liabilities	\$31,245,675	\$24,823,818	(\$6,421,857)	-21%							
Long Term Debt:											
	\$19.782.139	\$18.984.928	(\$797.211)	-4%							
				0%							
Total Long Term Debt	\$19,782,139	\$19,049,553	(\$732,586)	-4%							
Accrued Pension Liability	\$0	\$0	\$0	0%							
		\$14.365.164	\$6.538.806	84%							
Total Long Term Liabilities	\$27,608,497	\$33,414,717	\$5,806,220	21%							
Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%							
Net Assets:											
	\$47 953 352	\$44 636 663	(\$3 316 689)	-7%							
				-2%							
				-7%							
		<i>400,000,001</i>	(+0,001,110)								
Total Liabilities and Net Assets	\$158,850,472	\$151,297,119	(\$7,553,353)	-5%							
	FISCAL REPORT 100 - HOSPITAL BAI (2) DESCRIPTION LIABILITIES AND NET ASSETS Current Liabilities: Accounts Payable and Accrued Expenses Salaries, Wages and Payroll Taxes Due To Third Party Payers Due To Affiliates Current Portion of Long Term Debt Current Portion of Notes Payable Other Current Liabilities Total Current Liabilities Long Term Debt: Bonds Payable (Net of Current Portion) Notes Payable (Net of Current Portion) Notes Payable (Net of Current Portion) Notes Payable (Net of Current Portion) Total Long Term Debt Accrued Pension Liabilities Total Long Term Liabilities Interest in Net Assets of Affiliates or Joint Ventures Net Assets: Unrestricted Net Assets or Equity Temporarily Restricted Net Assets Permanently Restricted Net Assets Total Net Assets	FISCAL YEAR 2009 REPORT 100 - HOSPITAL BALANCE SHEET INFORM (3) (3) FY 2008 DESCRIPTION ACTUAL LIABILITIES AND NET ASSETS	FISCAL YEAR 2009 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION (2) (3) (4) (2) (3) (4) FY 2008 FY 2009 ACTUAL ACTUAL LIABILITIES AND NET ASSETS	FISCAL YEAR 2009 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION (2) (3) (4) (5) FY 2008 FY 2009 AMOUNT DESCRIPTION ACTUAL DIFFERENCE LIABILITIES AND NET ASSETS Current Liabilities: Current Liabilities: Accounts Payable and Accrued Expenses \$19,749,922 \$14,976,895 (\$4,773,027) Salaries, Wages and Payroll Taxes \$8,988,896 \$7,919,991 (\$1,068,905) Due To Third Party Payers \$0 \$1,023,178 \$11,023,178 \$11,023,178 \$10,088,900 \$30,000 Current Portion of Long Term Debt \$790,000 \$820,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$30,000 \$40 \$30,000 \$30,000 \$30,000 \$30 \$30							

	WATERBU	RY HOSPITAL			
	TWELVE MONT	HS ACTUAL FILING			
	FISCA	L YEAR 2009			
	REPORT 150 - HOSPITAL STATEM	ENT OF OPERATION	IS INFORMATION		
(1)	(2)	(3) FY 2008	(4) FY 2009	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$709,569,118	\$844,914,262	\$135,345,144	19%
2	Less: Allowances	\$484,171,065	\$601,712,067	\$117,541,002	24%
3	Less: Charity Care	\$3,956,734	\$3,273,671	(\$683,063)	-17%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$221,441,319	\$239,928,524	\$18,487,205	8%
5	Other Operating Revenue	\$6,863,890	\$3,509,420	(\$3,354,470)	-49%
6	Net Assets Released from Restrictions	\$4,742,105	\$5,108,393	\$366,288	8%
	Total Operating Revenue	\$233,047,314	\$248,546,337	\$15,499,023	7%
В.	Operating Expenses:				
1	Salaries and Wages	\$108,695,758	\$105,995,287	(\$2,700,471)	-2%
2	Fringe Benefits	\$28,966,526	\$30,095,663	\$1,129,137	4%
3	Physicians Fees	\$10,790,863	\$10,486,600	(\$304,263)	-3%
4	Supplies and Drugs	\$35,002,172	\$37,120,926	\$2,118,754	6%
5	Depreciation and Amortization	\$9,625,585	\$9,056,904	(\$568,681)	-6%
6	Bad Debts	\$17,717,523	\$14,319,487	(\$3,398,036)	-19%
7	Interest	\$1,414,401	\$1,281,962	(\$132,439)	-9%
8	Malpractice	\$5,111,822	\$4,566,483	(\$545,339)	-11%
9	Other Operating Expenses	\$28,082,769	\$40,609,282	\$12,526,513	45%
	Total Operating Expenses	\$245,407,419	\$253,532,594	\$8,125,175	3%
	Income/(Loss) From Operations	(\$12,360,105)	(\$4,986,257)	\$7,373,848	-60%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,849,308	\$1,617,478	(\$231,830)	-13%
2	Gifts, Contributions and Donations	\$120,447	\$434,411	\$313,964	261%
3	Other Non-Operating Gains/(Losses)	(\$94,433)	\$1,014,797	\$1,109,230	-1175%
	Total Non-Operating Revenue	\$1,875,322	\$3,066,686	\$1,191,364	64%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$10,484,783)	(\$1,919,571)	\$8,565,212	-82%
	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	(\$10,484,783)	(\$1,919,571)	\$8,565,212	-82%
	Principal Payments	\$0	\$1,162,266	\$1,162,266	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
ι.	GROSS REVENUE BY PAYER				
1.	GROSS REVENUE BI FATER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$228,024,505	\$267,926,170	\$39,901,665	17%
2	MEDICARE MANAGED CARE	\$24,542,725	\$38,759,660	\$14,216,935	58%
3	MEDICAID	\$28,573,694	\$34,349,834	\$5,776,140	20%
4	MEDICAID MANAGED CARE	\$22,255,598	\$21,928,723	(\$326,875)	-1%
5	CHAMPUS/TRICARE	\$274,994	\$803,012	\$528,018	192%
6	COMMERCIAL INSURANCE	\$60,605,852	\$69,311,069	\$8,705,217	14%
7	NON-GOVERNMENT MANAGED CARE	\$55,748,752	\$68,252,270	\$12,503,518	22%
8	WORKER'S COMPENSATION	\$4,250,423	\$4,609,867	\$359,444	8%
9	SELF- PAY/UNINSURED	\$9,188,200	\$8,867,028	(\$321,172)	-3%
10	SAGA	\$14,096,098	\$19,981,018	\$5,884,920	42%
11	OTHER TOTAL INPATIENT GROSS REVENUE	\$0 \$447,560,841	\$0 \$534,788,651	\$0 \$87,227,810	0% 19%
В.	OUTPATIENT GROSS REVENUE	\$447,300,041	\$ 034,700,001	۵ <i>۱</i> ,227,010	19%
<u>в.</u> 1	MEDICARE TRADITIONAL	\$71,423,454	\$83,849,883	\$12,426,429	17%
2	MEDICARE MANAGED CARE	\$8,747,218	\$14,191,150	\$5,443,932	62%
3	MEDICAID	\$15,771,384	\$18,014,339	\$2,242,955	14%
4	MEDICAID MANAGED CARE	\$26,964,415	\$33,242,687	\$6,278,272	23%
5	CHAMPUS/TRICARE	\$318,244	\$463,890	\$145,646	46%
6		\$54,585,266	\$62,842,967	\$8,257,701	15%
7	NON-GOVERNMENT MANAGED CARE	\$56,378,673	\$63,503,900	\$7,125,227	13%
8	WORKER'S COMPENSATION	\$5,559,445	\$6,845,324	\$1,285,879	23%
9	SELF- PAY/UNINSURED	\$10,405,866	\$11,129,535	\$723,669	7%
10	SAGA	\$11,854,312	\$16,041,941	\$4,187,629	35%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$262,008,277	\$310,125,616	\$48,117,339	18%
	TOTAL GROSS REVENUE				4-04
1		\$299,447,959	\$351,776,053	\$52,328,094	17%
2		\$33,289,943	\$52,950,810	\$19,660,867	59%
3		\$44,345,078	\$52,364,173	\$8,019,095	18%
4	MEDICAID MANAGED CARE CHAMPUS/TRICARE	\$49,220,013	\$55,171,410		12%
5 6		\$593,238 \$115,191,118	\$1,266,902 \$132,154,036	\$673,664 \$16,962,918	114% 15%
7	NON-GOVERNMENT MANAGED CARE	\$112,127,425	\$131,756,170	\$19,628,745	13%
8	WORKER'S COMPENSATION	\$9,809,868	\$11,455,191	\$1,645,323	17%
9	SELF- PAY/UNINSURED	\$19,594,066	\$19,996,563	\$402,497	2%
10		\$25,950,410	\$36,022,959	\$10,072,549	39%
11	OTHER	\$0	<u>\$00,022,000</u>	\$0	0%
	TOTAL GROSS REVENUE	\$709,569,118	\$844,914,267	\$135,345,149	19%
11.	NET REVENUE BY PAYER				
A.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$70,445,411	\$75,908,323	\$5,462,912	8%
2	MEDICARE MANAGED CARE	\$6,751,473	\$9,408,169	\$2,656,696	39%
3	MEDICAID	\$6,610,884	\$7,306,089	\$695,205	11%
	MEDICAID MANAGED CARE	\$5,157,678	\$4,792,305	(\$365,373)	

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
_		* 07.000	* 400.070	<u> </u>	570/
5	CHAMPUS/TRICARE	\$67,936	\$106,979	\$39,043	57%
6	COMMERCIAL INSURANCE	\$24,589,820	\$25,656,703	\$1,066,883	4%
7	NON-GOVERNMENT MANAGED CARE	\$18,458,866	\$21,528,178	\$3,069,312	17%
8	WORKER'S COMPENSATION	\$3,364,140	\$3,409,742	\$45,602	1%
9	SELF- PAY/UNINSURED	\$332,477	\$1,031,285	\$698,808	210%
10	SAGA	\$1,149,646	\$1,538,371	\$388,725	34%
11	OTHER	\$0	\$0	\$0	0%
		\$136,928,331	\$150,686,144	\$13,757,813	10%
		¢45.044.040	¢47,400,004	¢4.000.075	100/
1		\$15,841,019	\$17,480,294	\$1,639,275	10%
2	MEDICARE MANAGED CARE	\$1,890,059	\$2,625,239	\$735,180	39%
3		\$2,172,394	\$3,009,672	\$837,278	<u>39%</u> 16%
4 5		\$5,621,303	\$6,515,498	\$894,195	
		\$89,373	\$137,976	\$48,603	54%
6 7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$19,391,702	\$18,989,146 \$14,213,260	(\$402,556) (\$1,012,963)	-2% -7%
8		\$15,226,223			-7%
		\$4,495,450	\$5,047,020	\$551,570	
9	SELF- PAY/UNINSURED	\$728,411	\$3,642,339	\$2,913,928	400%
10 11	SAGA OTHER	\$1,101,379	\$1,401,067	\$299,688	27% 0%
	TOTAL OUTPATIENT NET REVENUE	\$0 \$66,557,313	\$0 \$73,061,511	\$0 \$6,504,198	10%
	TOTAL OUTPATIENT NET REVENUE	\$00,557,515	\$73,001,311	\$0,504,196	10%
c.	TOTAL NET REVENUE				
	MEDICARE TRADITIONAL	\$86,286,430	\$93,388,617	\$7,102,187	8%
	MEDICARE MANAGED CARE	\$8,641,532	\$12,033,408	\$3,391,876	39%
3	MEDICAID	\$8,783,278	\$10,315,761	\$1,532,483	17%
4	MEDICAID MANAGED CARE	\$10,778,981	\$11,307,803	\$528,822	5%
5	CHAMPUS/TRICARE	\$157,309	\$244,955	\$87,646	56%
6	COMMERCIAL INSURANCE	\$43,981,522	\$44,645,849	\$664,327	2%
7	NON-GOVERNMENT MANAGED CARE	\$33,685,089	\$35,741,438	\$2,056,349	6%
8	WORKER'S COMPENSATION	\$7,859,590	\$8,456,762	\$597,172	8%
	SELF- PAY/UNINSURED	\$1,060,888	\$4,673,624	\$3,612,736	341%
10	SAGA	\$2,251,025	\$2,939,438	\$688,413	31%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$203,485,644	\$223,747,655	\$20,262,011	10%
		+_00,000,000	<i> </i>	<i> </i>	
ш.	STATISTICS BY PAYER				
	<u> </u>				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	5,952	5,681	(271)	-5%
2	MEDICARE MANAGED CARE	614	815	201	33%
3	MEDICAID	985	950	(35)	
4	MEDICAID MANAGED CARE	1,745	1,413	(332)	
5	CHAMPUS/TRICARE	12	15	3	25%
6	COMMERCIAL INSURANCE	2,391	2,030	(361)	
7	NON-GOVERNMENT MANAGED CARE	2,121	2,145	24	1%
8	WORKER'S COMPENSATION	95	84	(11)	
9	SELF- PAY/UNINSURED	335	265	(70)	
10	SAGA	486	518	32	7%
11	OTHER	0	0	0	0%
\vdash	TOTAL DISCHARGES	14,736	13,916	(820)	

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
	PATIENT DAYS				
1	MEDICARE TRADITIONAL	36,082	34,165	(1,917)	-5%
2	MEDICARE MANAGED CARE	3,470	4,462	992	29%
3	MEDICAID	5,659	5,578	(81)	-1%
4	MEDICAID MANAGED CARE	5,485	4,365	(1,120)	-20%
5	CHAMPUS/TRICARE	38	119	81	213%
6	COMMERCIAL INSURANCE	8,506	7,600	(906)	-11%
7	NON-GOVERNMENT MANAGED CARE	7,526	7,356	(170)	-2%
8	WORKER'S COMPENSATION	310	266	(44)	-14%
9	SELF- PAY/UNINSURED	1,410	1,146	(264)	-19%
10	SAGA	2,511	2,625	114	5%
11	OTHER	0	0	0	0%
-	TOTAL PATIENT DAYS	70,997	67,682	(3,315)	-5%
	OUTPATIENT VISITS			(
1	MEDICARE TRADITIONAL	60,524	58,701	(1,823)	-3%
2	MEDICARE MANAGED CARE	6,585	8,770	2,185	33%
3	MEDICAID	13,650	13,781	131	1%
4	MEDICAID MANAGED CARE	24,775	26,960	2,185	9%
5	CHAMPUS/TRICARE	0	30	30	0%
6		39,626	38,202	(1,424)	-4%
7	NON-GOVERNMENT MANAGED CARE	40,181	37,634	(2,547)	-6%
8	WORKER'S COMPENSATION	1,937	1,902	(35)	-2%
9	SELF- PAY/UNINSURED	7,874	7,118	(756)	-10%
10	SAGA	9,576	11,225	1,649	17%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	204,728	204,323	(405)	0%
N/	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
10.	EMERGENCI DEFARIMENT OUTFATIENT BI FATER				
Α.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVE				
1	MEDICARE TRADITIONAL	\$18,285,196	\$23,790,989	\$5,505,793	30%
2	MEDICARE MANAGED CARE	\$2,029,182	\$3,333,507	\$1,304,325	64%
3	MEDICAID	\$6,664,707	\$8,755,784	\$2,091,077	31%
4	MEDICAID MANAGED CARE	\$12,848,076	\$16,793,801	\$3,945,725	31%
5	CHAMPUS/TRICARE	\$0	\$0	\$0	0%
6	COMMERCIAL INSURANCE	\$14,274,605	\$17,471,139	\$3,196,534	22%
7	NON-GOVERNMENT MANAGED CARE	\$14,677,495	\$16,697,204	\$2,019,709	14%
8	WORKER'S COMPENSATION	\$1,494,962	\$1,560,561	\$65,599	4%
9	SELF- PAY/UNINSURED	\$7,396,967	\$8,457,957	\$1,060,990	14%
10	SAGA	\$5,758,405	\$8,003,175	\$2,244,770	39%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	\$ 0	÷3		0.10
	GROSS REVENUE	\$83,429,595	\$104,864,117	\$21,434,522	26%
В.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU	E			
1	MEDICARE TRADITIONAL	\$3,930,365	\$4,653,002	\$722,637	18%
2	MEDICARE MANAGED CARE	\$449,617	\$586,439	\$136,822	30%
3	MEDICAID	\$1,200,387	\$1,459,713	\$259,326	22%
4	MEDICAID MANAGED CARE	\$2,671,354	\$3,334,909	\$663,555	25%
5	CHAMPUS/TRICARE	\$0	\$0	\$0	0%
		¢1 000 017	\$4,534,927	\$454,010	11%
6	COMMERCIAL INSURANCE	\$4,080,917	φ 4 ,554,927	\$454,010	1170

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
8	WORKER'S COMPENSATION	\$872,081	\$957,809	\$85,728	10%
9	SELF- PAY/UNINSURED	\$269,684	\$270,627	\$943	0%
10	SAGA	\$633,201	\$651,351	\$18,150	3%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$18,378,493	\$21,185,851	\$2,807,358	15%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	7,437	8,039	602	8%
2	MEDICARE MANAGED CARE	806	1,100	294	36%
3	MEDICAID	3,740	4,213	473	13%
4	MEDICAID MANAGED CARE	9,593	11,075	1,482	15%
5	CHAMPUS/TRICARE	0	0	0	0%
6	COMMERCIAL INSURANCE	4,865	7,775	2,910	60%
7	NON-GOVERNMENT MANAGED CARE	7,408	7,186	(222)	-3%
8	WORKER'S COMPENSATION	1,036	1,059	23	2%
9	SELF- PAY/UNINSURED	4,567	4,616	49	1%
10	SAGA	3,370	4,174	804	24%
11	OTHER	2,344	0	(2,344)	-100%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	45,166	49,237	4,071	9%

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

DESCRIPTION	FY 2008 ACTUAL	FY 2009	AMOUNT	%
DESCRIPTION	<u>AC</u> TUAL			
		<u>ACTUAL</u>	DIFFERENCE	<u>DIFFERENCE</u>
OPERATING EXPENSE BY CATEGORY				
OPERATING EXPENSE BY CATEGORY				
Salaries & Wages:				
Nursing Salaries	\$33,893,598	\$33,017,306	(\$876,292)	-3%
Physician Salaries	\$14,395,769	\$14,446,788	\$51,019	0%
Non-Nursing, Non-Physician Salaries	\$60,406,391	\$58,531,193	(\$1,875,198)	-3%
Total Salaries & Wages	\$108,695,758	\$105,995,287	(\$2,700,471)	-2%
			(**********	
				-3%
				3%
				8% 4%
Total Fringe Benefits	\$20,900,J20	\$30,095,005	φ1,123,137	4 /0
Contractual Labor Fees:				
	\$207,164	\$582.277	\$375.113	181%
Physician Fees	\$10,790,863	\$10,486,600	(\$304,263)	-3%
Non-Nursing, Non-Physician Fees	\$760,637	\$360,266	(\$400,371)	-53%
Total Contractual Labor Fees	\$11,758,664	\$11,429,143	(\$329,521)	-3%
	*	* ~~~~~~	<u> </u>	
				7%
				1% 6%
Total Medical Supplies and Pharmaceutical Cost	\$35,002,172	\$37,120,926	\$2,118,754	6%
Depreciation and Amortization:				
	\$3.070.264	\$3.080.296	\$10.032	0%
				-10%
Amortization	\$112,473	\$152,256	\$39,783	35%
Total Depreciation and Amortization	\$9,625,585	\$9,056,904	(\$568,681)	-6%
	017 717 500	* 44.040.40 7	(\$0.000.000)	100/
Bad Debts	\$17,717,523	\$14,319,48 <i>1</i>	(\$3,398,036)	-19%
Interest Expense:				
	\$1 414 401	\$1 281 962	(\$132,430)	-9%
	ψι,τιτ,τοι	ψ1,201,002	(\$152,455)	570
Malpractice Insurance Cost:				
Malpractice Insurance Cost	\$5,111,822	\$4,566,483	(\$545,339)	-11%
Utilities:				
Water				9%
			, ,	-7%
				-85%
				-2% -6%
	, ,			-0%
				-7%
	+=,===,===	+-,,	(+,,	
Business Expenses:				
Accounting Fees	\$172,284	\$173,012	\$728	0%
Legal Fees	\$445,256	\$828,971	\$383,715	86%
Consulting Fees	\$971,803	\$12,874,775	\$11,902,972	1225%
				-3%
				25%
				18%
Repairs and Maintenance Insurance	\$2,144,483 \$317,293	\$2,151,235 \$340,579	\$6,752 \$23,286	0% 7%
	Total Salaries & Wages Fringe Benefits: Nursing Fringe Benefits Non-Nursing, Non-Physician Fringe Benefits Total Fringe Benefits Non-Nursing, Non-Physician Fringe Benefits Total Fringe Benefits Nursing Fees Physician Fees Non-Nursing, Non-Physician Fees Total Contractual Labor Fees: Non-Nursing, Non-Physician Fees Medical Supplies and Pharmaceutical Cost: Medical Supplies Pharmaceutical Costs Total Medical Supplies and Pharmaceutical Cost Depreciation and Amortization: Depreciation-Equipment Amortization Total Depreciation and Amortization Bad Debts: Bad Debts: Malpractice Insurance Cost: Malpractice Insurance Cost: Malpractice Insurance Cost: Water Natural Gas Oil Electricity Total Utilities Total Utilities Total Utilities Total Utilities Deprese Business Expenses: Accounting Fees <t< td=""><td>Total Salaries & Wages\$108,695,758Fringe Benefits\$9,032,365Physician Fringe Benefits\$3,836,354Non-Nursing, Non-Physician Fringe Benefits\$16,097,807Total Fringe Benefits\$28,966,526Contractual Labor Fees:\$207,164Nursing Fees\$207,164Physician Fees\$10,790,863Non-Nursing, Non-Physician Fees\$10,790,863Non-Nursing, Non-Physician Fees\$10,790,863Non-Nursing, Non-Physician Fees\$11,758,664Medical Supplies and Pharmaceutical Cost:\$7,388,745Total Medical Supplies and Pharmaceutical Cost\$7,388,745Total Medical Supplies and Pharmaceutical Cost\$3,070,264Depreciation-Building\$3,070,264Depreciation-Building\$3,070,264Depreciation-Equipment\$6,442,848Amortization\$112,473Total Depreciation and Amortization\$9,625,585Bad Debts:\$17,717,523Bad Debts:\$17,717,523Malpractice Insurance Cost:\$1,414,401Malpractice Insurance Cost:\$1,414,401Malpractice Insurance Cost:\$3,90,485Total Utilities\$00Total Utilities\$00Matural Gas\$1,437,893Oil\$1,51,060Business Expense:\$3,921,520Leephone\$278,867Other Utilities\$0Total Utilities\$0Total Utilities\$0Total Utilities\$13,921,520Depreciation-Equipment\$1,457,633Business</td><td>Total Salaries & Wages \$108,695,758 \$105,995,287 Fringe Benefits \$9,032,365 \$8,798,841 Physician Fringe Benefits \$3,836,354 \$3,948,037 Non-Nursing, Non-Physician Fringe Benefits \$16,097,807 \$17,348,785 Total Fringe Benefits \$28,966,526 \$30,095,663 Contractual Labor Fees: \$20,7164 \$552,277 Physician Fees \$10,470,083 \$10,486,600 Non-Nursing, Non-Physician Fees \$17,348,745 \$7,386,744 Physician Fees \$11,758,664 \$11,429,143 Medical Supplies and Pharmaceutical Cost: \$227,613,427 \$29,649,204 Pharmaceutical Costs \$7,388,745 \$7,471,722 Total Medical Supplies and Pharmaceutical Cost \$33,070,264 \$33,080,295 Depreciation and Amortization: \$112,473 \$152,256 Total Depreciation and Amortization \$112,473 \$152,256 Total Depreciation and Amortization \$112,473 \$152,256 Total Depreciation and Amortization \$12,473 \$14,319,487 Interest Expense: \$11,414,401 \$12,28,483 <!--</td--><td>Total Salaries & Wages \$108,695,758 \$105,995,287 (\$2,700,471) Fringe Benefits \$9,032,365 \$8,798,841 (\$233,524) Nursing Fringe Benefits \$3,836,354 \$3,948,037 \$111,683 Non-Nursing, Non-Physician Fringe Benefits \$16,097,807 \$17,348,785 \$1,250,978 Contractual Labor Fees: \$207,164 \$582,277 \$375,113 Prysician Fringe Benefits \$10,790,663 \$10,466,600 (\$30,495,603 \$13,229,978 Total Contractual Labor Fees \$10,790,663 \$11,429,143 (\$329,521) \$10,486,600,771) Mon-Nursing, Non-Physician Fees \$27,613,427 \$29,649,204 \$2,337,777 Total Contractual Labor Fees \$11,758,664 \$11,429,143 (\$329,521) Medical Supplies and Pharmaceutical Cost \$7,388,745 \$7,471,722 \$82,977 Total Medical Supplies and Pharmaceutical Cost \$33,000,266 \$10,032 Depreciation-Building \$3,070,264 \$3,080,296 \$10,032 Depreciation-Equipment \$6,442,464 \$5,624,352 (\$61,496) Amortization \$11,2473</td></td></t<>	Total Salaries & Wages\$108,695,758Fringe Benefits\$9,032,365Physician Fringe Benefits\$3,836,354Non-Nursing, Non-Physician Fringe Benefits\$16,097,807Total Fringe Benefits\$28,966,526Contractual Labor Fees:\$207,164Nursing Fees\$207,164Physician Fees\$10,790,863Non-Nursing, Non-Physician Fees\$10,790,863Non-Nursing, Non-Physician Fees\$10,790,863Non-Nursing, Non-Physician Fees\$11,758,664Medical Supplies and Pharmaceutical Cost:\$7,388,745Total Medical Supplies and Pharmaceutical Cost\$7,388,745Total Medical Supplies and Pharmaceutical Cost\$3,070,264Depreciation-Building\$3,070,264Depreciation-Building\$3,070,264Depreciation-Equipment\$6,442,848Amortization\$112,473Total Depreciation and Amortization\$9,625,585Bad Debts:\$17,717,523Bad Debts:\$17,717,523Malpractice Insurance Cost:\$1,414,401Malpractice Insurance Cost:\$1,414,401Malpractice Insurance Cost:\$3,90,485Total Utilities\$00Total Utilities\$00Matural Gas\$1,437,893Oil\$1,51,060Business Expense:\$3,921,520Leephone\$278,867Other Utilities\$0Total Utilities\$0Total Utilities\$0Total Utilities\$13,921,520Depreciation-Equipment\$1,457,633Business	Total Salaries & Wages \$108,695,758 \$105,995,287 Fringe Benefits \$9,032,365 \$8,798,841 Physician Fringe Benefits \$3,836,354 \$3,948,037 Non-Nursing, Non-Physician Fringe Benefits \$16,097,807 \$17,348,785 Total Fringe Benefits \$28,966,526 \$30,095,663 Contractual Labor Fees: \$20,7164 \$552,277 Physician Fees \$10,470,083 \$10,486,600 Non-Nursing, Non-Physician Fees \$17,348,745 \$7,386,744 Physician Fees \$11,758,664 \$11,429,143 Medical Supplies and Pharmaceutical Cost: \$227,613,427 \$29,649,204 Pharmaceutical Costs \$7,388,745 \$7,471,722 Total Medical Supplies and Pharmaceutical Cost \$33,070,264 \$33,080,295 Depreciation and Amortization: \$112,473 \$152,256 Total Depreciation and Amortization \$112,473 \$152,256 Total Depreciation and Amortization \$112,473 \$152,256 Total Depreciation and Amortization \$12,473 \$14,319,487 Interest Expense: \$11,414,401 \$12,28,483 </td <td>Total Salaries & Wages \$108,695,758 \$105,995,287 (\$2,700,471) Fringe Benefits \$9,032,365 \$8,798,841 (\$233,524) Nursing Fringe Benefits \$3,836,354 \$3,948,037 \$111,683 Non-Nursing, Non-Physician Fringe Benefits \$16,097,807 \$17,348,785 \$1,250,978 Contractual Labor Fees: \$207,164 \$582,277 \$375,113 Prysician Fringe Benefits \$10,790,663 \$10,466,600 (\$30,495,603 \$13,229,978 Total Contractual Labor Fees \$10,790,663 \$11,429,143 (\$329,521) \$10,486,600,771) Mon-Nursing, Non-Physician Fees \$27,613,427 \$29,649,204 \$2,337,777 Total Contractual Labor Fees \$11,758,664 \$11,429,143 (\$329,521) Medical Supplies and Pharmaceutical Cost \$7,388,745 \$7,471,722 \$82,977 Total Medical Supplies and Pharmaceutical Cost \$33,000,266 \$10,032 Depreciation-Building \$3,070,264 \$3,080,296 \$10,032 Depreciation-Equipment \$6,442,464 \$5,624,352 (\$61,496) Amortization \$11,2473</td>	Total Salaries & Wages \$108,695,758 \$105,995,287 (\$2,700,471) Fringe Benefits \$9,032,365 \$8,798,841 (\$233,524) Nursing Fringe Benefits \$3,836,354 \$3,948,037 \$111,683 Non-Nursing, Non-Physician Fringe Benefits \$16,097,807 \$17,348,785 \$1,250,978 Contractual Labor Fees: \$207,164 \$582,277 \$375,113 Prysician Fringe Benefits \$10,790,663 \$10,466,600 (\$30,495,603 \$13,229,978 Total Contractual Labor Fees \$10,790,663 \$11,429,143 (\$329,521) \$10,486,600,771) Mon-Nursing, Non-Physician Fees \$27,613,427 \$29,649,204 \$2,337,777 Total Contractual Labor Fees \$11,758,664 \$11,429,143 (\$329,521) Medical Supplies and Pharmaceutical Cost \$7,388,745 \$7,471,722 \$82,977 Total Medical Supplies and Pharmaceutical Cost \$33,000,266 \$10,032 Depreciation-Building \$3,070,264 \$3,080,296 \$10,032 Depreciation-Equipment \$6,442,464 \$5,624,352 (\$61,496) Amortization \$11,2473

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	Travel	\$183,292	\$109,108	(\$74,184)	-40%
10	Conferences	\$286,456	\$214,267	(\$72,189)	-25%
11	Property Tax	\$221,754	\$34,662	(\$187,092)	-84%
12	General Supplies	\$3,368,772	\$3,120,359	(\$248,413)	-7%
13	Licenses and Subscriptions	\$0	\$0	\$0	0%
14	Postage and Shipping	\$150,038	\$146,773	(\$3,265)	-2%
15	Advertising	\$600,698	\$377,173	(\$223,525)	-37%
16	Other Business Expenses	\$10,549,387	\$11,415,513	\$866,126	8%
	Total Business Expenses	\$21,938,217	\$34,782,569	\$12,844,352	59%
К.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$1,255,231	\$1,220,777	(\$34,454)	-3%
	Total Operating Expenses - All Expense Categories*	\$245,407,419	\$253,532,594	\$8,125,175	3%
	*A K. The total operating expenses amount above	e must agree with	the total operating	g expenses amour	nt on Report 150.
		_	-		
II.	OPERATING EXPENSE BY DEPARTMENT				
A	Compared Sometimeses				
A.	General Services:	¢20 557 502	¢06 601 540	(\$2,055,054)	100/
1	General Administration	\$30,557,503	\$26,601,549	(\$3,955,954)	-13%
2	General Accounting	\$1,396,373	\$1,252,116	(\$144,257)	-10%
3	Patient Billing & Collection	\$1,419,424	\$1,419,935	\$511	0%
4	Admitting / Registration Office	\$1,788,424	\$1,764,369	(\$24,055)	-1%
5	Data Processing	\$7,444,333	\$7,098,420	<u>(\$345,913)</u> \$0	-5% 0%
<u>6</u> 7	Communications Personnel	\$0 \$2,289,073	\$0 \$1,581,672	(\$707,401)	
8	Public Relations	\$2,289,073 \$683,197	\$1,581,672	(\$707,401) (\$300,058)	-31%
9	Public Relations	. ,			-44% -2%
10	Dietary and Cafeteria	\$1,000,613 \$3,453,418	\$980,869 \$3,237,703	<u>(\$19,744)</u> (\$215,715)	-2%
10	Housekeeping	\$4,557,084	\$4,407,098	(\$149,986)	-3%
12	Laundry & Linen	\$1,169,536	\$1,148,497	(\$21,039)	-3%
12	Operation of Plant	\$5,439,283	\$5,504,218	(\$21,039) \$64,935	-2%
13	Security	\$1,286,650	\$1,210,130	(\$76,520)	-6%
14	Repairs and Maintenance	\$958,191	\$989,170	\$30,979	-0%
16	Central Sterile Supply	\$1,228,265	\$1,236,563	\$8,298	1%
17	Pharmacy Department	\$9,382,217	\$9,427,206	\$44,989	0%
17	Other General Services	\$37,644,839	\$51,104,986	\$13,460,147	36%
10	Total General Services	\$111,698,423	\$119,347,640	\$7,649,217	7%
	Destand Operation				
B.	Professional Services:	<u>Фо гоо оос</u>	00.050.40 4	10404 501	001
1	Medical Care Administration	\$9,539,682	\$9,358,161	(\$181,521)	-2%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$2,112,775	\$2,009,841	(\$102,934)	-5%
4	Medical Records	\$1,810,522 \$1,190,445	\$1,764,930	(\$45,592)	-3%
5	Social Service		\$1,208,585	\$18,140 (\$280,862)	2%
6	Other Professional Services Total Professional Services	\$7,550,454 \$22,203,878	\$7,269,592 \$21,611,109	(\$280,862) (\$592,769)	-4% -3%
		¥22,203,010	ψ 21,011,10 9	(4532,709)	-3%
C.	Special Services:				
1	Operating Room	\$21,680,694	\$23,272,821	\$1,592,127	7%
2	Recovery Room	\$1,624,874	\$1,013,230	(\$611,644)	-38%
3	Anesthesiology	\$720,619	\$635,732	(\$84,887)	-12%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$3,919,059	\$3,632,236	(\$286,823)	-7%
6	Diagnostic Ultrasound	\$430,736	\$436,719	\$5,983	1%
7	Radiation Therapy	\$24,190	\$68,290	\$44,100	182%

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
0	De disienter en	¢770.004	M 740 770		00/
8	Radioisotopes	\$779,284	\$710,770	(\$68,514)	-9%
9	CT Scan	\$992,953	\$963,311	(\$29,642)	-3%
10 11	Laboratory Blood Storing/Processing	\$8,741,925 \$2,235,821	\$8,475,864	(\$266,061)	-3% 7%
12	Cardiology	\$4,828,083	\$2,388,006 \$5,422,357	\$152,185 \$594,274	12%
12	Electrocardiology	\$4,828,083	\$0,422,337	<u>\$094,274</u> \$0	0%
13	Electroencephalography	\$639,041	\$592,986	(\$46,055)	-7%
14	Occupational Therapy	\$039,041	\$0 <u>32,300</u> \$0	(\$40,033) \$0	0%
16	Speech Pathology	\$5,475	\$14,666	\$9,191	168%
17	Audiology	\$0	\$0	<u>\$0</u>	0%
18	Respiratory Therapy	\$1,567,560	\$1,525,700	(\$41,860)	-3%
19	Pulmonary Function	\$21,141	\$18,226	(\$2,915)	-14%
20	Intravenous Therapy	\$0	\$0	(<u>\$2,610)</u> \$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$6,966,855	\$6,702,635	(\$264,220)	-4%
23	Renal Dialysis	\$642,030	\$528,164	(\$113,866)	-18%
24	Emergency Room	\$11,830,024	\$11,714,122	(\$115,902)	-1%
25	MRI	\$1,167,800	\$1,257,500	\$89,700	8%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,168,666	\$1,165,963	(\$2,703)	0%
29	Sleep Center	\$768,544	\$947,632	\$179,088	23%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$344,851	\$259,610	(\$85,241)	-25%
32	Occupational Therapy / Physical Therapy	\$1,243,448	\$1,213,362	(\$30,086)	-2%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$470,966	\$463,336	(\$7,630)	-2%
	Total Special Services	\$72,814,639	\$73,423,238	\$608,599	1%
D.	Routine Services:				
		¢47 774 047	¢40,440,077	¢000.000	40/
1 2	Medical & Surgical Units Intensive Care Unit	\$17,774,647 \$5,844,554	\$18,443,277 \$5,484,044	\$668,630 (\$360,510)	4% -6%
3	Coronary Care Unit	\$1,814,395	\$1,877,629	\$63,234	-0%
4	Psychiatric Unit	\$3,349,824	\$3,305,549	(\$44,275)	-1%
5	Pediatric Unit	\$1,005,193	\$238,525	(\$766,668)	-76%
6	Maternity Unit	\$4,120,450	\$4,028,858	(\$91,592)	-2%
7	Newborn Nursery Unit	\$1,340,939	\$1,348,051	\$7,112	1%
8	Neonatal ICU	\$0	\$0	<u>ψ/,112</u> \$0	0%
9	Rehabilitation Unit	\$0	\$0 \$0	\$0 \$0	0%
10	Ambulatory Surgery	\$1,637,496	\$2,021,307	\$383,811	23%
10	Home Care	\$0	φ <u>2,021,007</u> \$0	\$000,011 \$0	0%
12	Outpatient Clinics	\$0	\$0 \$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
-	Total Routine Services	\$36,887,498	\$36,747,240	(\$140,258)	0%
		. , - ,		(, -, -, -, -, -, -, -, -, -, -, -, -, -,	
E.	Other Departments:				
1	Miscellaneous Other Departments	\$1,802,981	\$2,403,367	\$600,386	33%
	Total Operating Expenses - All Departments*	\$245,407,419	\$253,532,594	\$8,125,175	3%
	*A 0. The total operating expenses amount ab	ove must agree with	the total operating	g expenses amoun	t on Report 150.

		RBURY HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2007	<u>FY 2008</u>	FY 2009					
Α.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$222,219,540 \$	221,441,319	\$239,928,524					
2	Other Operating Revenue	9,187,087	11,605,995	8,617,813					
3	Total Operating Revenue	\$231,406,627	\$233,047,314	\$248,546,337					
4	Total Operating Expenses	240,315,931	245,407,419	253,532,594					
5	Income/(Loss) From Operations	(\$8,909,304)	(\$12,360,105)	(\$4,986,257)					
6	Total Non-Operating Revenue	2,069,251	1,875,322	3,066,686					
7	Excess/(Deficiency) of Revenue Over Expenses	(\$6,840,053)	(\$10,484,783)	(\$1,919,571)					
В.	Profitability Summary								
1	Hospital Operating Margin	-3.82%	-5.26%	-1.98%					
2	Hospital Non Operating Margin	0.89%	0.80%	1.22%					
3	Hospital Total Margin	-2.93%	-4.46%	-0.76%					
4	Income/(Loss) From Operations	(\$8,909,304)	(\$12,360,105)	(\$4,986,257)					
5	Total Operating Revenue	\$231,406,627	\$233,047,314	\$248,546,337					
6	Total Non-Operating Revenue	\$2,069,251	\$1,875,322	\$3,066,686					
7	Total Revenue	\$233,475,878	\$234,922,636	\$251,613,023					
8	Excess/(Deficiency) of Revenue Over Expenses	(\$6,840,053)	(\$10,484,783)	(\$1,919,571					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$58,964,722	\$47,953,352	\$44,636,663					
2	Hospital Total Net Assets	\$122,516,497	\$99,996,300	\$93,058,584					
3	Hospital Change in Total Net Assets	\$122,516,497	(\$22,520,197)	(\$6,937,716					
4	Hospital Change in Total Net Assets %	0.0%	-18.4%	-6.9%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.32	0.31	0.30					
2	Total Operating Expenses	\$218,509,451	\$227,689,900	\$253,532,594					
3	Total Gross Revenue	\$661,400,373	\$709,569,118	\$844,914,267					
4	Total Other Operating Revenue	\$15,074,771	\$13,967,320	\$13,073,722					
5	Private Payment to Cost Ratio	1.13	1.15	1.09					
6	Total Non-Government Payments	\$87,083,832	\$86,587,089	\$93,517,673					

	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	<u> </u>	FY 2008	FY 2009				
7	Total Uninsured Payments	\$858,474	\$1,060,888	\$4,673,624				
8	Total Non-Government Charges	\$252,760,969	\$256,722,477	\$295,361,960				
9	Total Uninsured Charges	\$15,947,527	\$19,594,066	\$19,996,563				
10	Medicare Payment to Cost Ratio	0.92	0.91	0.88				
11	Total Medicare Payments	\$88,993,730	\$94,927,962	\$105,422,025				
12	Total Medicare Charges	\$298,416,528	\$332,737,902	\$404,726,863				
13	Medicaid Payment to Cost Ratio	0.73	0.66	0.68				
14	Total Medicaid Payments	\$19,767,250	\$19,562,259	\$21,623,564				
15	Total Medicaid Charges	\$83,335,823	\$93,565,091	\$107,535,583				
16	Uncompensated Care Cost	\$7,696,214	\$6,390,261	\$4,766,186				
17	Charity Care	\$2,019,940	\$2,588,984	\$1,809,921				
18	Bad Debts	\$21,806,478	\$17,717,523	\$14,319,487				
19	Total Uncompensated Care	\$23,826,418	\$20,306,507	\$16,129,408				
20	Uncompensated Care % of Total Expenses	3.5%	2.8%	1.9%				
21	Total Operating Expenses	\$218,509,451	\$227,689,900	\$253,532,594				
E.	Liquidity Measures Summary							
1	Current Ratio	1.74	1.63	2.00				
2	Total Current Assets	\$47,705,472	\$50,995,793	\$49,565,466				
3	Total Current Liabilities	\$27,477,071	\$31,245,675	\$24,823,818				
4	Days Cash on Hand	6	16	22				
5	Cash and Cash Equivalents	\$3,983,257	\$10,440,801	\$14,657,330				
6	Short Term Investments	0	0	0				
7	Total Cash and Short Term Investments	\$3,983,257	\$10,440,801	\$14,657,330				
8	Total Operating Expenses	\$240,315,931	\$245,407,419	\$253,532,594				
9	Depreciation Expense	\$10,338,261	\$9,625,585	\$9,056,904				
10	Operating Expenses less Depreciation Expense	\$229,977,670	\$235,781,834	\$244,475,690				
11	Days Revenue in Patient Accounts Receivable	51.03	56.81	44.68				

	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	<u>FY 2007</u>	<u>FY 2008</u>	<u>FY 2009</u>					
12	Net Patient Accounts Receivable	\$ 33,420,866	\$ 33,654,146	\$ 30,390,471					
13	Due From Third Party Payers	\$0	\$810,405	\$0					
14	Due To Third Party Payers	\$2,350,453	\$0	\$1,023,178					
	Total Net Patient Accounts Receivable and Third Party Payer	+ ,,							
15	Activity	\$ 31,070,413	\$ 34,464,551	\$ 29,367,293					
16	Total Net Patient Revenue	\$222,219,540	\$ 221,441,319	\$ 239,928,524					
17	Average Payment Period	43.61	48.37	37.06					
18	Total Current Liabilities	\$27,477,071	\$31,245,675	\$24,823,818					
19	Total Operating Expenses	\$240,315,931	\$245,407,419	\$253,532,594					
20	Depreciation Expense	\$10,338,261	\$9,625,585	\$9,056,904					
21	Total Operating Expenses less Depreciation Expense	\$229,977,670	\$235,781,834	\$244,475,690					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	67.9	62.9	61.5					
2	Total Net Assets	\$122,516,497	\$99,996,300	\$93,058,584					
3	Total Assets	\$180,491,034	\$158,850,472	\$151,297,119					
4	Cash Flow to Total Debt Ratio	7.1	(1.7)	16.3					
5	Excess/(Deficiency) of Revenues Over Expenses	(\$6,840,053)	(\$10,484,783)	(\$1,919,571					
6	Depreciation Expense	\$10,338,261	\$9,625,585	\$9,056,904					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$3,498,208	(\$859,198)	\$7,137,333					
8	Total Current Liabilities	\$27,477,071	\$31,245,675	\$24,823,818					
9	Total Long Term Debt	\$21,560,665	\$19,782,139						
10	Total Current Liabilities and Total Long Term Debt	\$49,037,736	\$51,027,814	\$43,873,371					
11	Long Term Debt to Capitalization Ratio	15.0	16.5	17.0					
12	Total Long Term Debt	\$21,560,665	\$19,782,139	\$19,049,553					
13	Total Net Assets	\$122,516,497	\$99,996,300	\$93,058,584					
14	Total Long Term Debt and Total Net Assets	\$144,077,162	\$119,778,439	\$112,108,137					
15	Debt Service Coverage Ratio	3.6	0.4	3.4					
16	Excess Revenues over Expenses	(\$6,840,053)	(\$10,484,783)	(\$1,919,571					
17	Interest Expense	\$1,360,801	\$1,414,401	\$1,281,962					
18	Depreciation and Amortization Expense	\$10,338,261	\$9,625,585	\$9,056,904					

	WATERBURY 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	<u> </u>	<u>FY 2008</u>	FY 2009					
19	Principal Payments	\$0	\$0	\$1,162,266					
G.	Other Financial Ratios								
20	Average Age of Plant	17.3	19.6	21.8					
21	Accumulated Depreciation	\$179,321,783	\$188,689,241	\$197,380,797					
22	Depreciation and Amortization Expense	\$10,338,261	\$9,625,585	\$9,056,904					
Н.	Utilization Measures Summary								
1	Patient Days	71,532	70,997	67,682					
				· · · · · · · · · · · · · · · · · · ·					
2	Discharges	14,584	14,736	13,916					
3	ALOS	4.9	4.8	4.9					
4	Staffed Beds	235	238	214					
5	Available Beds	-	-	292					
6	Licensed Beds	393	292	393					
6	Occupancy of Staffed Beds	83.4%	81.7%	86.6%					
7	Occupancy of Available Beds	49.9%	66.6%	63.5%					
8	Full Time Equivalent Employees	1,647.9	1,625.0	1,589.2					
l.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	35.8%	33.4%	32.6%					
2	Medicare Gross Revenue Payer Mix Percentage	45.1%	46.9%	47.9%					
3	Medicaid Gross Revenue Payer Mix Percentage	12.6%	13.2%	12.7%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	4.0%	3.7%	4.3%					
5	Uninsured Gross Revenue Payer Mix Percentage	2.4%	2.8%	2.4%					
6 7	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage Total Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1% 100.0%					
8	Non-Government Gross Revenue (Charges)	\$236,813,442	\$237,128,411	\$275,365,397					
9	Medicare Gross Revenue (Charges)	\$298,416,528	\$332,737,902	\$404,726,863					
10	Medicaid Gross Revenue (Charges)	\$83,335,823	\$93,565,091	\$107,535,583					
11	Other Medical Assistance Gross Revenue (Charges)	\$26,368,566	\$25,950,410	\$36,022,959					
12	Uninsured Gross Revenue (Charges)	\$15,947,527	\$19,594,066	\$19,996,563					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$518,487	\$593,238	\$1,266,902					
14	Total Gross Revenue (Charges)	\$661,400,373	\$709,569,118	\$844,914,267					
J.	Hospital Net Revenue Payer Mix Percentage								
1	Non-Government Net Revenue Payer Mix Percentage	43.4%	42.0%	39.7%					

	WATERBUR	Y 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	44.8%	46.7%	47.1%					
3	Medicaid Net Revenue Payer Mix Percentage	10.0%	9.6%	9.7%					
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.3%	1.1%	1.3%					
4 5	Uninsured Net Revenue Payer Mix Percentage	0.4%	0.5%						
				2.1%					
6 7	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage Total Net Revenue Payer Mix Percentage	0.1% 100.0%	0.1% 100.0%	0.1% 100.0%					
8	Non-Government Net Revenue (Payments)	\$86,225,358	\$85,526,201	\$88,844,049					
9	Medicare Net Revenue (Payments)	\$88,993,730	\$94,927,962	\$105,422,025					
10	Medicaid Net Revenue (Payments)	\$19,767,250	\$19,562,259	\$21,623,564					
11	Other Medical Assistance Net Revenue (Payments)	\$2,500,310	\$2,251,025	\$2,939,438					
12	Uninsured Net Revenue (Payments)	\$858,474	\$1,060,888	\$4,673,624					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$119,807	\$157,309	\$244,955					
14	Total Net Revenue (Payments)	\$198,464,929	\$203,485,644	\$223,747,655					
К.	<u>Discharges</u>								
1	Non-Government (Including Self Pay / Uninsured)	5,265	4,942	4,524					
2	Medicare	6,299	6,566	6,496					
3	Medical Assistance	3,009	3,216	2,881					
4	Medicaid	2,496	2,730	2,363					
5	Other Medical Assistance	513	486	518					
6	CHAMPUS / TRICARE	11	12	15					
7	Uninsured (Included In Non-Government)	345	335	265					
8	Total	14,584	14,736	13,916					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.140650	1.192500	1.293650					
2	Medicare	1.447070	1.581600	1.592700					
3	Medical Assistance	0.907694	1.005844	1.755999					
4	Medicaid	0.873720	0.980200	1.886300					
5	Other Medical Assistance	1.073000	1.149900	1.161600					
6	CHAMPUS / TRICARE	1.190000	1.329400	1.660100					
7	Uninsured (Included In Non-Government)	1.074200	1.119000	1.146600					
8	Total Case Mix Index	1.224969	1.325249	1.529361					
м.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	9,065	9,294	8,895					
2	Emergency Room - Treated and Discharged	44,759	45,166	49,237					
3	Total Emergency Room Visits	53,824	54,460	58,132					

(1)	(2)	(3)	(4)	(5)	(6)
. /		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
				•	
I.	MEDICARE MANAGED CARE	-			
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT	1	•	.	
1	Inpatient Charges	\$739,390	\$873,350	\$133,960	18%
2	Inpatient Payments	\$217,915	\$264,902	\$46,987	22%
3	Outpatient Charges	\$270,667	\$322,857	\$52,190	19%
4	Outpatient Payments	\$70,678	\$71,397	\$719	1%
5	Discharges	17	23	6	35%
6	Patient Days	112	83	(29)	-26%
7	Outpatient Visits (Excludes ED Visits)	122	162	40	33%
8	Emergency Department Outpatient Visits	18	19	1	6%
9	Emergency Department Inpatient Admissions	13	12	(1)	-8%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,010,057	\$1,196,207	\$186,150	18%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$288,593	\$336,299	\$47,706	17%
В.	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 CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
<u>C.</u>	CONNECTICARE, INC.	\$004.000	¢4 5 40 404	¢4.050.055	4.4050/
1	Inpatient Charges	\$284,836	\$4,543,191	\$4,258,355	1495%
2	Inpatient Payments	\$77,827	\$986,461	\$908,634	1168%
3	Outpatient Charges	\$257,993	\$1,909,114	\$1,651,121	640%
4	Outpatient Payments	\$45,016	\$345,612	\$300,596	668%
5	Discharges	6	85	79	1317%
6	Patient Days	40	457	417	1043%
7	Outpatient Visits (Excludes ED Visits)	181	1,086	905	500%
8	Emergency Department Outpatient Visits	16	89	73	456%
9	Emergency Department Inpatient Admissions	5	59	54 \$5 000 476	1080%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$542,829	\$6,452,305	\$5,909,476	1089%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$122,843	\$1,332,073	\$1,209,230	984%

(1)	(2)	(3)	(4)	(5)	(6)
/		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$16,723,863	\$23,042,540	\$6,318,677	38%
2	Inpatient Payments	\$4,420,561	\$5,684,461	\$1,263,900	29%
3	Outpatient Charges	\$6,001,532	\$7,870,733	\$1,869,201	31%
4	Outpatient Payments	\$1,347,658	\$1,439,150	\$91,492	7%
5	Discharges	434	483	49	11%
6	Patient Days	2,272	2,693	421	19%
7	Outpatient Visits (Excludes ED Visits)	3,912	3,990	78	2%
8	Emergency Department Outpatient Visits	463	489	26	6%
9	Emergency Department Inpatient Admissions	311	370	59	19%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$22,725,395	\$30,913,273	\$8,187,878	36%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,768,219	\$7,123,611	\$1,355,392	23%
Ε.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$0	\$924,840	\$924,840	0%
2	Inpatient Payments	\$0	\$217,218	\$217,218	0%
3	Outpatient Charges	\$0	\$482,976	\$482,976	0%
4	Outpatient Payments	\$0	\$66,628	\$66,628	0%
5	Discharges	0	23	23	0%
6	Patient Days	0	92	92	0%
7	Outpatient Visits (Excludes ED Visits)	0	167	167	0%
8	Emergency Department Outpatient Visits	0	33	33	0%
9	Emergency Department Inpatient Admissions	0	14	14	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$1,407,816	\$1,407,816	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$283,846	\$283,846	0%
F .	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN		• · • • • • · · ·		
1	Inpatient Charges	\$1,692,711	\$1,265,714	(\$426,997)	-25%
2	Inpatient Payments	\$560,353	\$297,221	(\$263,132)	-47%
3	Outpatient Charges	\$494,275	\$662,503	\$168,228	34%
4	Outpatient Payments	\$67,251	\$89,328	\$22,077	33%
5	Discharges	43	32	(11)	-26%
6	Patient Days	288	164	(124)	-43%
-	Outpatient Visits (Excludes ED Visits)	436	539	103	24%
8	Emergency Department Outpatient Visits	31	70	39	126%
9	Emergency Department Inpatient Admissions	31	24	(7)	-23%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,186,986	\$1,928,217	(\$258,769)	-12%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$627,604	\$386,549	(\$241,055)	-38%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
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%
	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%
Η.	WELLCARE OF CONNECTICUT	#0.000.010	* ~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~	0 044.000	000/
1	Inpatient Charges	\$2,823,313	\$3,637,996	\$814,683	29%
2	Inpatient Payments	\$828,855	\$848,357	\$19,502	2%
3	Outpatient Charges	\$1,353,526	\$1,780,835	\$427,309	32%
4	Outpatient Payments	\$276,048	\$365,890	\$89,842	33%
5	Discharges	78	85	7	9%
	Patient Days	426	485	59	14%
	Outpatient Visits (Excludes ED Visits)	912	1,050	138	15%
8	Emergency Department Outpatient Visits	230	238	8	3%
9	Emergency Department Inpatient Admissions	71	75	4	6%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,176,839	\$5,418,831	\$1,241,992	30%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,104,903	\$1,214,247	\$109,344	10%
١.	AETNA				
1	Inpatient Charges	\$238,341	\$1,572,905	\$1,334,564	560%
2	Inpatient Payments	\$83,664	\$401,812	\$318,148	380%
2	Outpatient Charges	\$158,118	\$501,864	\$343,746	217%
4	Outpatient Payments	\$40,155	\$122,644	\$82,489	205%
4 5	Discharges	^{\$40,155}	<u>3122,044</u> 31	پ62,469 21	203%
6	Patient Days	43	128	85	198%
7	Outpatient Visits (Excludes ED Visits)	116	337	221	190 %
8	Emergency Department Outpatient Visits	10	40	30	300%
9	Emergency Department Inpatient Admissions	7	19	12	171%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$396,459	\$2,074,769	\$1,678,310	423%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$123,819	<u>\$2,074,709</u> \$524,456	\$400,637	324%
		ψ123,013	ψ524,430	φ+00,037	524 /0

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
				-	
J.	HUMANA				
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%
	SECURE HORIZONS				
K.		\$0	<u> </u>	<u> </u>	0%
1	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
2		\$0	<u> </u>	\$0	
3	Outpatient Charges	\$0 \$0		\$0 \$0	0% 0%
4	Outpatient Payments		\$0		0%
5	Discharges Patient Days	0	0	0	0%
6 7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
7 8	Emergency Department Outpatient Visits	0	0	0	0%
8 9		0	0	0	0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0% 0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	<u>\$0</u> \$0	\$0 \$0	0%
	TOTAL INFATILIT & COTFATILIT FATMENTS	φU	φU	φU	U /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 CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
М.					
1 VI.	UNIVERSAL AMERICAN Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0 \$0		\$0	0%
3	Outpatient Charges	\$0 \$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%
N.	EVERCARE				
1	Inpatient Charges	\$2,040,271	\$2,899,124	\$858,853	42%
2	Inpatient Payments	\$562,298	\$707,737	\$145,439	26%
3	Outpatient Charges	\$211,107	\$660,268	\$449,161	213%
4	Outpatient Payments	\$43,253	\$124,590	\$81,337	188%
5	Discharges	26	53	27	104%
6	Patient Days	289	360	71	25%
7	Outpatient Visits (Excludes ED Visits)	100	339	239	239%
8	Emergency Department Outpatient Visits	38	122	84	221%
9	Emergency Department Inpatient Admissions	24	44	20	83%
-		\$2,251,378	\$3,559,392	\$1,308,014	58%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$605,551	\$832,327	\$226,776	37%
		I		I	I
II.	TOTAL MEDICARE MANAGED CARE			r	
	TOTAL INPATIENT CHARGES	\$24,542,725	\$38,759,660	\$14,216,935	58%
	TOTAL INPATIENT PAYMENTS	\$6,751,473	\$9,408,169	\$2,656,696	39%
	TOTAL OUTPATIENT CHARGES	\$8,747,218	\$14,191,150	\$5,443,932	62%
	TOTAL OUTPATIENT PAYMENTS	\$1,890,059	\$2,625,239	\$735,180	39%
	TOTAL DISCHARGES	614	815	201	33%
	TOTAL PATIENT DAYS	3,470	4,462	992	29%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	5,779	7,670	1,891	33%
	TOTAL EMERGENCY DEPARTMENT				
		806	1,100	294	36%
			• <i>i</i> -		
		462	617	155	34%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$33,289,943	\$52,950,810	\$19,660,867	59%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,641,532	\$12,033,408	\$3,391,876	39%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
-					
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD				
Α.	OF CONNECTICUT	* 4 • • • • • • • •	* • • • • • • •	(************	====
1	Inpatient Charges	\$14,046,608	\$3,581,650	(\$10,464,958)	-75%
2	Inpatient Payments	\$3,182,997	\$781,135	(\$2,401,862)	-75%
3	Outpatient Charges	\$17,639,765	\$5,702,796	(\$11,936,969)	-68%
4	Outpatient Payments	\$3,682,003	\$1,068,024	(\$2,613,979)	
5	Discharges	1,077	232	(845)	
6	Patient Days	3,385	698	(2,687)	-79%
7	Outpatient Visits (Excludes ED Visits)	9,790	2,909	(6,881)	-70%
8	Emergency Department Outpatient Visits	5,882	1,729	(4,153)	
9	Emergency Department Inpatient Admissions	311	77	(234)	-75%
	TOTAL INPATIENT & OUTPATIENT	* ***	AA AA A A A	(****	
		\$31,686,373	\$9,284,446	(\$22,401,927)	-71%
	TOTAL INPATIENT & OUTPATIENT	* 0.005.000	¢4 040 450	(*** 04** 044)	700/
	PAYMENTS	\$6,865,000	\$1,849,159	(\$5,015,841)	-73%
_					
В.	COMMUNITY HEALTH NETWORK OF CT		• • • • • • • • • • •	.	
1	Inpatient Charges	\$4,388,984	\$13,908,471	\$9,519,487	217%
2	Inpatient Payments	\$1,076,671	\$3,132,903	\$2,056,232	191%
3	Outpatient Charges	\$4,967,821	\$21,424,290	\$16,456,469	331%
4	Outpatient Payments	\$1,014,877	\$4,215,878	\$3,201,001	315%
5	Discharges	357	974	617	173%
6	Patient Days	1,145	2,883	1,738	152%
7	Outpatient Visits (Excludes ED Visits)	3,114	10,979	7,865	253%
8	Emergency Department Outpatient Visits	2,027	6,852	4,825	238%
9	Emergency Department Inpatient Admissions	92	186	94	102%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$9,356,805	\$35,332,761	\$25,975,956	278%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$2,091,548	\$7,348,781	\$5,257,233	251%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$2,571,443	\$0	(\$2,571,443)	-100%
2	Inpatient Payments	\$586,762	\$0	(\$586,762)	
3	Outpatient Charges	\$2,731,204	\$0	(\$2,731,204)	
4	Outpatient Payments	\$609,219	\$0	(\$609,219)	
5	Discharges	199	0	(199)	
6	Patient Days	624	0	(624)	
7	Outpatient Visits (Excludes ED Visits)	1,402	0	(1,402)	
8	Emergency Department Outpatient Visits	958	0	(958)	
9	Emergency Department Inpatient Admissions	45	0	(938) (45)	
5	TOTAL INPATIENT & OUTPATIENT		0	(+3)	-10076
	CHARGES	\$5,302,647	\$0	(\$5,302,647)	-100%
	TOTAL INPATIENT & OUTPATIENT			<u>, , , , , , , , , , , , , , , , , , , </u>	
	PAYMENTS	\$1,195,981	\$0	(\$1,195,981)	-100%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$79,014	\$1,095,989	\$1,016,975	1287%
2	Inpatient Payments	\$15,986	\$236,817	\$220,831	1381%
3	Outpatient Charges	\$38,629	\$1,332,963	\$1,294,334	3351%
4	Outpatient Payments	\$4,565	\$246,343	\$241,778	5296%
5	Discharges	φ 1 ,505 7	40	33	471%
6	Patient Days	17	204	187	1100%
7	Outpatient Visits (Excludes ED Visits)	4	265	261	6525%
8	Emergency Department Outpatient Visits	25	674	649	2596%
9	Emergency Department Inpatient Admissions	4	0/4	(4)	
9	TOTAL INPATIENT & OUTPATIENT	4	0	(4)	-100 /6
	CHARGES	\$117 GA2	\$2,428,952	\$2,311,309	10650/
	TOTAL INPATIENT & OUTPATIENT	\$117,643	\$ 2,420,952	\$2,311,309	1965%
	PAYMENTS	¢20.554	¢492.460	\$462,609	2251%
	PATMENTS	\$20,551	\$483,160	\$402,009	2231%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$1,166,334	\$0	(\$1,166,334)	-100%
2	Inpatient Payments	\$293,381	\$0	(\$293,381)	
3	Outpatient Charges	\$1,586,996	\$2,723	(\$1,584,273)	
4	Outpatient Payments	\$310,639	\$219	(\$310,420)	
5	Discharges	104	0	(104)	
6	Patient Days	312	0	(312)	
7	Outpatient Visits (Excludes ED Visits)	872	0	(872)	-100%
8	Emergency Department Outpatient Visits	701	2	(699)	
9	Emergency Department Inpatient Admissions	31	0	(31)	
	TOTAL INPATIENT & OUTPATIENT	0.	•	(0.)	
	CHARGES	\$2,753,330	\$2,723	(\$2,750,607)	-100%
	TOTAL INPATIENT & OUTPATIENT	<i> </i>	<i> </i>	(+=,: ••,••:)	
	PAYMENTS	\$604.020	\$219	(\$603,801)	-100%
	FIRST CHOICE OF CONNECTICUT,	*** ,*=*	+	(+,)	
F.	PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0 \$0	0%
3	Outpatient Charges	\$0	\$0 \$0	<u>\$0</u>	0%
4	Outpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0%
5	Discharges	φ0 0	φ <u>υ</u> 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%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT		^	A A	
	CHARGES TOTAL INPATIENT & OUTPATIENT	\$0	\$0	\$0	0%
	PAYMENTS	\$0	\$0	\$0	0%
	FATWENTS	φU	φU	ቅሀ	0%
G.	UNITED 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		^	A A	
	CHARGES TOTAL INPATIENT & OUTPATIENT	\$0	\$0	\$0	0%
	PAYMENTS	\$0	\$0	\$0	0%
	FATMENTS	م 0	φU	ቅሀ	0%
Н.	AETNA				
1	Inpatient Charges	\$3,215	\$3,342,613	\$3,339,398	103869%
2	Inpatient Payments	\$1,881	\$641,450	\$639,569	34002%
3	Outpatient Charges	\$0	\$4,779,915	\$4,779,915	0%
4	Outpatient Payments	\$0	\$985,034	\$985,034	0%
5	Discharges	1	167	166	16600%
6	Patient Days	2	580	578	28900%
7	Outpatient Visits (Excludes ED Visits)	0	1,732	1,732	0%
8	Emergency Department Outpatient Visits	0	1,818	1,818	0%
9	Emergency Department Inpatient Admissions	0	42	42	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES TOTAL INPATIENT & OUTPATIENT	\$3,215	\$8,122,528	\$8,119,313	252545%
	PAYMENTS	\$1,881	\$1,626,484	\$1,624,603	86369%
		φ1,001	\$1,020,404	\$1,024,005	0030378
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$22,255,598	\$21,928,723	(\$326,875)	-1%
	TOTAL INPATIENT PAYMENTS	\$5,157,678	\$4,792,305	(\$365,373)	-7%
	TOTAL OUTPATIENT CHARGES	\$26,964,415	\$33,242,687	\$6,278,272	23%
	TOTAL OUTPATIENT PAYMENTS	\$5,621,303	\$6,515,498	\$894,195	16%
	TOTAL DISCHARGES	1,745	1,413	(332)	-19%
	TOTAL PATIENT DAYS	5,485	4,365	(1,120)	-20%
		45 400	45 005		50/
	(EXCLUDES ED VISITS)	15,182	15,885	703	5%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	9,593	11,075	1,482	15%
	TOTAL EMERGENCY DEPARTMENT	9,593	11,075	1,402	15%
		483	305	(178)	-37%
			000	(170)	51 /0
	INPATIENT ADMISSIONS TOTAL INPATIENT & OUTPATIENT				
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$49,220.013	\$55,171.410	\$5,951.397	12%
	TOTAL INPATIENT & OUTPATIENT	\$49,220,013	\$55,171,410	\$5,951,397	12%

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

	GREATER WATERBURY HEALTH NETWORK						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009						
	(1)	(2)	(3)	(4)	(5)	(6)	
LINE	DESCRIPTION	FY 2008 <u>ACTUAL</u>	FY 2009 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE		
 I.	ASSETS						
Α.	Current Assets:						
A. 1	Cash and Cash Equivalents	\$14,837,426	\$19,343,506	\$4,506,080	30%		
2	Short Term Investments	\$548,261	\$819,938	\$271,677	50%		
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$37,698,199	\$34,132,488	(\$3,565,711)	-9%		
	Current Assets Whose Use is Limited for	_					
4	Current Liabilities	\$2,737,177	\$573,887	(\$2,163,290)	-79%		
5	Due From Affiliates	\$2,559,601	\$1,531,902	(\$1,027,699)	-40%		
6	Due From Third Party Payers	\$575,043	\$0	(\$575,043)	-100%		
7	Inventories of Supplies	ventories of Supplies \$608,211 \$584,339 (\$23,872			-4%		
8	Prepaid Expenses	\$1,792,742	\$1,404,755	(\$387,987)	-22%		
9	Other Current Assets	\$275,709	\$145,408	(\$130,301)	-47%		
	Total Current Assets	\$61,632,369	\$58,536,223	(\$3,096,146)	-5%		
В.	Noncurrent Assets Whose Use is Limited:						
1	Held by Trustee	\$38,548,695	\$37,864,978	(\$683,717)	-2%		
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%		
3	Funds Held in Escrow	\$0	\$0	\$0	0%		
4	Other Noncurrent Assets Whose Use is Limited	\$4,666,396	\$2,055,943	(\$2,610,453)	-56%		
4	Total Noncurrent Assets Whose Use is Limited:	\$43,215,091	\$39,920,921	(\$3,294,170)	-36%		
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%		
6	Long Term Investments	\$32,964,272	\$30,168,049	(\$2,796,223)	-8%		
7	Other Noncurrent Assets	\$2,275,828	\$4,587,071	\$2,311,243	102%		
C.	Net Fixed Assets:						
1	Property, Plant and Equipment	\$255,640,875	\$257,885,293	\$2,244,418	1%		
2	Less: Accumulated Depreciation	\$198,386,192	\$207,922,774	\$9,536,582	\$0		
	Property, Plant and Equipment, Net	\$57,254,683	\$49,962,519	(\$7,292,164)	-13%		
3	Construction in Progress	\$193,299	\$134,784	(\$58,515)	-30%		
	Total Net Fixed Assets	\$57,447,982	\$50,097,303	(\$7,350,679)	-13%		
	Total Assets	\$197,535,542	\$183,309,567	(\$14,225,975)	-7%		
		¥.01,000,072	÷.00,000,001	(*17,220,010)	-170		

	GREATER WA	TERBURY HEALTH NET	WORK				
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION						
(1)	(2)	(3) FY 2008	(4) FY 2009	(5) AMOUNT	(6) %		
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE		
II.	LIABILITIES AND NET ASSETS						
Α.	Current Liabilities:						
1	Accounts Payable and Accrued Expenses	\$30,851,726	\$25,053,002	(\$5,798,724)	-19%		
2	Salaries, Wages and Payroll Taxes	\$0	\$0	\$0	0%		
3	Due To Third Party Payers	\$0	\$1,195,037	\$1,195,037	0%		
4	Due To Affiliates	\$416,047	\$0	(\$416,047)	-100%		
5	Current Portion of Long Term Debt	\$835,000	\$865,000	\$30,000	4%		
6	Current Portion of Notes Payable	\$5,010,284	\$442,010	(\$4,568,274)	-91%		
7	Other Current Liabilities	\$0	\$0	\$0	0%		
	Total Current Liabilities	\$37,113,057	\$27,555,049	(\$9,558,008)	-26%		
В.	Long Term Debt:						
1	Bonds Payable (Net of Current Portion)	\$21,387,150	\$20,547,007	(\$840,143)	-4%		
2	Notes Payable (Net of Current Portion)	\$565,884	\$634,843	\$68,959	12%		
	Total Long Term Debt	\$21,953,034	\$21,181,850	(\$771,184)	-4%		
3	Accrued Pension Liability	\$0	\$0	\$0	0%		
4	Other Long Term Liabilities	\$7,826,358	\$14,365,164	\$6,538,806	84%		
	Total Long Term Liabilities	\$29,779,392	\$35,547,014	\$5,767,622	19%		
5	Interest in Net Assets of Affiliates or Joint	\$2,417,095	\$2,530,345	\$113,250	5%		
C.	Net Assets:						
1	Unrestricted Net Assets or Equity	\$76,183,050	\$69,255,238	(\$6,927,812)	-9%		
2	Temporarily Restricted Net Assets	\$10,702,822	\$7,764,952	(\$2,937,870)	-27%		
3	Permanently Restricted Net Assets	\$41,340,126	\$40,656,969	(\$683,157)	-2%		
	Total Net Assets	\$128,225,998	\$117,677,159	(\$10,548,839)	-8%		
	Total Liabilities and Net Assets	\$197,535,542	\$183,309,567	(\$14,225,975)	-7%		

			-		
		MONTHS ACTUAL I			
	REPORT 350 - HOSPITAL ST	FISCAL YEAR 2009			
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$738,607,872	\$874,444,095	\$135,836,223	18%
2	Less: Allowances	\$496,179,702	\$613,049,353	\$116,869,651	24%
3	Less: Charity Care	\$3,956,734	\$3,273,671	(\$683,063)	-17%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$238,471,436	\$258,121,071	\$19,649,635	8%
5	Other Operating Revenue	\$15,904,506	\$13,154,938	(\$2,749,568)	-17%
6	Net Assets Released from Restrictions	\$4,742,105	\$5,108,393	\$366,288	8%
	Total Operating Revenue	\$259,118,047	\$276,384,402	\$17,266,355	7%
В.	Operating Expenses:				
1	Salaries and Wages	\$154,419,089	\$152,082,483	(\$2,336,606)	-2%
2	Fringe Benefits	\$0	\$0	\$0	0%
3	Physicians Fees	\$0	\$0	\$0	0%
4	Supplies and Drugs	\$89,295,673	\$90,618,383	\$1,322,710	1%
5	Depreciation and Amortization	\$10,474,375	\$9,919,723	(\$554,652)	-5%
6	Bad Debts	\$17,897,459	\$14,440,795	(\$3,456,664)	-19%
7	Interest	\$1,719,620	\$1,607,522	(\$112,098)	-7%
8	Malpractice	\$0	\$0	\$0	0%
9	Other Operating Expenses	\$167,035	\$12,908,481	\$12,741,446	7628%
	Total Operating Expenses	\$273,973,251	\$281,577,387	\$7,604,136	3%
	Income/(Loss) From Operations	(\$14,855,204)	(\$5,192,985)	\$9,662,219	-65%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,263,709	\$2,668,767	\$1,405,058	111%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$4,235,892)	(\$779,918)	\$3,455,974	-82%
	Total Non-Operating Revenue	(\$2,972,183)	\$1,888,849	\$4,861,032	-164%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$17,827,387)	(\$3,304,136)	\$14,523,251	-81%
	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	(\$17,827,387)	(\$3,304,136)	\$14,523,251	-81%

	TWELVE MONTHS AC									
	FISCAL YEA		ATA ANAI YSIS							
	REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS									
(1)	(2)	(3)	(4)	(5)						
		ACTUAL	ACTUAL	ACTUAL						
LINE	DESCRIPTION	FY 2007	FY 2008	FY 2009						
Α.	Parent Corporation Statement of Operations Summary									
1	Net Patient Revenue	\$239,196,513	\$238,471,436	\$258,121,071						
2	Other Operating Revenue	12,628,320	20,646,611	18,263,331						
3	Total Operating Revenue	\$251,824,833	\$259,118,047	\$276,384,402						
4	Total Operating Expenses	261,744,737	273,973,251	281,577,387						
5	Income/(Loss) From Operations	(\$9,919,904)	(\$14,855,204)	(\$5,192,985						
6	Total Non-Operating Revenue	4,767,863	(2,972,183)	1,888,849						
7	Excess/(Deficiency) of Revenue Over Expenses	(\$5,152,041)	(\$17,827,387)	(\$3,304,136						
в.	Parent Corporation Profitability Summary									
1	Parent Corporation Operating Margin	-3.87%	-5.80%	-1.87%						
2	Parent Corporation Non-Operating Margin	1.86%	-1.16%	0.68%						
3	Parent Corporation Total Margin	-2.01%	-6.96%	-1.19%						
4	Income/(Loss) From Operations	(\$9,919,904)	(\$14,855,204)	(\$5,192,985						
5	Total Operating Revenue	\$251,824,833	\$259,118,047	\$276,384,402						
6	Total Non-Operating Revenue	\$4,767,863	(\$2,972,183)	\$1,888,849						
7	Total Revenue	\$256,592,696	\$256,145,864	\$278,273,251						
8	Excess/(Deficiency) of Revenue Over Expenses	(\$5,152,041)	(\$17,827,387)	(\$3,304,136						
C.	Parent Corporation Net Assets Summary									
1	Parent Corporation Unrestricted Net Assets	\$96,779,895	\$76,183,050	\$69,255,23						
2	Parent Corporation Total Net Assets	\$160,331,670	\$128,225,998	\$117,677,159						
3	Parent Corporation Change in Total Net Assets	\$160,331,670	(\$32,105,672)	(\$10,548,839						
4	Parent Corporation Change in Total Net Assets %	0.0%	-20.0%	-8.2%						

	GREATER WATERBURY H	EALTH	INETWORK					
	TWELVE MONTHS AC	TUAL	FILING					
	FISCAL YE	AR 200	9					
	REPORT 385 - PARENT CORPORATION CONS	OLIDAT	ED FINANCIAL	DATA ANALYSIS				
(1)	1) (2) (3) (4)							
	ACTUAL A	ACTUAL	ACTUAL					
LINE	DESCRIPTION		FY 2007	FY 2008	<u> </u>			
D.	Liquidity Measures Summary							
1	Current Ratio		1.74	1.66	2.12			
2	Total Current Assets		\$53,385,512	\$61,632,369	\$58,536,223			
3	Total Current Liabilities		\$30,696,342	\$37,113,057	\$27,555,04			
4	Days Cash on Hand		14	21	27			
5	Cash and Cash Equivalents		\$8,969,393	\$14,837,426	\$19,343,506			
6	Short Term Investments		564,013	548,261	819,938			
7	Total Cash and Short Term Investments		\$9,533,406	\$15,385,687	\$20,163,444			
8	Total Operating Expenses		\$261,744,737	\$273,973,251	\$281,577,387			
9	Depreciation Expense		\$10,999,147	\$10,474,375	\$9,919,72			
10	Operating Expenses less Depreciation Expense		\$250,745,590	\$263,498,876	\$271,657,664			
11	Days Revenue in Patient Accounts Receivable		53	59	4			
12	Net Patient Accounts Receivable	\$	37,410,931	\$ 37,698,199	\$ 34,132,488			
13	Due From Third Party Payers		\$0	\$575,043	\$0			
14	Due To Third Party Payers		\$2,493,637	\$0	\$1,195,03			
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$	34,917,294	\$ 38,273,242	\$ 32,937,45 ⁻			
16	Total Net Patient Revenue		\$239,196,513	\$238,471,436	\$258,121,07			
17	Average Payment Period		45	51	3			
18	Total Current Liabilities		\$30,696,342	\$37,113,057	\$27,555,04			
19	Total Operating Expenses		\$261,744,737	\$273,973,251	\$281,577,387			
20	Depreciation Expense		\$10,999,147	\$10,474,375	\$9,919,72			
21	Total Operating Expenses less Depreciation Expense		\$250,745,590	\$263,498,876	\$271,657,664			

	GREATER WATERBURY HEA	LTH NETWORK							
	TWELVE MONTHS ACTU	JAL FILING							
	FISCAL YEAR	2009							
	REPORT 385 - PARENT CORPORATION CONSOLI	DATED FINANCIAL D	ATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	<u> </u>	<u>FY 2008</u>	FY 2009					
E.	Solvency Measures Summary								
1	Equity Financing Ratio	70.8	64.9	64.2					
2	Total Net Assets	\$160,331,670	\$128,225,998	\$117,677,159					
3	Total Assets	\$226,469,119	\$197,535,542	\$183,309,567					
4	Cash Flow to Total Debt Ratio	10.7	(12.4)	13.6					
5	Excess/(Deficiency) of Revenues Over Expenses	(\$5,152,041)	(\$17,827,387)	(\$3,304,136)					
6	Depreciation Expense	\$10,999,147	\$10,474,375	\$9,919,723					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$5,847,106	(\$7,353,012)	\$6,615,587					
8	Total Current Liabilities	\$30,696,342	\$37,113,057	\$27,555,049					
9	Total Long Term Debt	\$23,967,740	\$21,953,034	\$21,181,850					
10	Total Current Liabilities and Total Long Term Debt	\$54,664,082	\$59,066,091	\$48,736,899					
11	Long Term Debt to Capitalization Ratio	13.0	14.6	15.3					
12	Total Long Term Debt	\$23,967,740	\$21,953,034	\$21,181,850					
13	Total Net Assets	\$160,331,670	\$128,225,998	\$117,677,159					
14	Total Long Term Debt and Total Net Assets	\$184,299,410	\$150,179,032	\$138,859,009					

			FERBURY HOSPITA			
		TWELVE	MONTHS ACTUAL F			
			FISCAL YEAR 2009			
	REPOR	T 400 - HOSPITAL INF	PATIENT BED UTILIZ	ZATION BY DEPART	MENT	
(1)			(1)	(=)	(0)	(
(1)	(2)	(3)	(4)	(5)	(6)	(7)
					OCCUPANCY	OCCUPANCY
		PATIENT	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	BEDS (A)	<u>BEDS</u>	BEDS (A)	<u>BEDS</u>
1	Adult Medical/Surgical	45,941	133	171	94.6%	73.6%
•		5 70 4			70.00/	70.00/
2	ICU/CCU (Excludes Neonatal ICU)	5,791	20	20	79.3%	79.3%
3	Psychiatric: Ages 0 to 17	1,191	5	5	65.3%	65.3%
4	Psychiatric: Ages 18+	5,813	18	25	88.5%	63.7%
4	TOTAL PSYCHIATRIC	7,004	23	30	83.4%	<u> </u>
		7,004	25	50	05.478	04.078
5	Rehabilitation	0	0	0	0.0%	0.0%
5		0	0	0	0.076	0.076
6	Maternity	3.292	19	27	47.5%	33.4%
0	Materinty	0,202	10	21	+1.070	00.470
7	Newborn	2,352	11	36	58.6%	17.9%
		2,002			00.070	11.070
8	Neonatal ICU	1,480	0	0	0.0%	0.0%
		.,				,.
9	Pediatric	209	0	0	0.0%	0.0%
10	Other	1,613	8	8	55.2%	55.2%
	TOTAL EXCLUDING NEWBORN	65,330	203	256	88.2%	69.9%
	TOTAL INPATIENT BED UTILIZATION	67,682	214	292	86.6%	63.5%
	TOTAL INPATIENT REPORTED YEAR	67,682	214	292	86.6%	63.5%
	TOTAL INPATIENT PRIOR YEAR	70,997	238	292	81.7%	66.6%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-3,315	-24	0	4.9%	-3.1%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-5%	-10%	0%	6%	-5%
	Total Licensed Beds and Bassinets	393				
(A) T	his number may not exceed the number of available	beds for each departi	ment or in total.			

		TERBURY HOSPITAL MONTHS ACTUAL F FISCAL YEAR 2009			
	REPORT 450 - HOSPITAL INPATIENT AN		ER SERVICES UTILI	ZATION AND FTES	5
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2008</u>	<u>FY 2009</u>	DIFFERENCE	DIFFERENCE
•	07.0 (1)				
A.	CT Scans (A)	0.040	0.400	407	4.0/
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	9,319	9,426	107	1%
2	Scans)	4,663	4,514	-149	-3%
3	Emergency Department Scans	7,190	8,495	1,305	18%
4	Other Non-Hospital Providers' Scans (A)	0	0,100	1,000	0%
	Total CT Scans	21,172	22,435	1,263	6%
В.	MRI Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department		Т	Т	
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A) Total MRI Scans	2,430	2,631	201 201	<u>8%</u>
	lotal MRI Scans	2,430	2,631	201	8%
C.	PET Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A) Total PET Scans	0	0	0	0% 0%
		0	0	0	0 78
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
2	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	U	U	U	0%
	(A) If the Hospital is not the primary provider of the			scal year	
	volume of each of these types of scans from the	e primary provider of t	the scans.		
Ε.	Linear Accelerator Procedures				00/
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures Total Linear Accelerator Procedures	0	0 0	0	0% 0%
		0	0	0	0 /8
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	615	681	66	11%
					00/
2	Outpatient Procedures	258	278	20	8%
	Outpatient Procedures Total Cardiac Catheterization Procedures		278 959	20 86	8% 10%
2	Total Cardiac Catheterization Procedures	258			
2 G .	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures	258 873	959	86	10%
2	Total Cardiac Catheterization Procedures	258			10% 5%
2 G. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures	258 873 148	959 156	86 8	10% 5% 15%
2 G. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures	258 873 148 179	959 156 206	86 8 27	10% 5% 15%
2 G. 1 2	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies	258 873 148 179	959 156 206	86 8 27	10% 5% 15% 11%
2 G. 1 2 H.	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies	258 873 148 179 327 0 0	959 156 206 362 0 0	86 8 27 35 0 0	10% 5% 15% 11% 0%
2 G. 1 2 H. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies	258 873 148 179 327 0	959 156 206 362 0	86 8 27 35 0	
2 G. 1 2 H. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies	258 873 148 179 327 0 0	959 156 206 362 0 0	86 8 27 35 0 0	10% 5% 15% 11% 0%
2 G. 1 2 H. 1 2 I. 1	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Surgical Procedures Inpatient Surgical Procedures	258 873 148 179 327 0 0 0 0 0 3,854	959 156 206 362 0 0 0 0 3,557	86 8 27 35 0 0 0 0 0 -297	10% 5% 15% 11% 0% 0% 0%
2 G. 1 2 H. 1 2 I.	Total Cardiac Catheterization Procedures Cardiac Angioplasty Procedures Primary Procedures Elective Procedures Total Cardiac Angioplasty Procedures Electrophysiology Studies Inpatient Studies Outpatient Studies Total Electrophysiology Studies Surgical Procedures	258 873 148 179 327 0 0 0 0	959 156 206 362 0 0 0 0	86 8 27 35 0 0 0 0	10% 5% 15% 11% 0%

		TERBURY HOSPITAL MONTHS ACTUAL FIL							
		FISCAL YEAR 2009	LING						
	REPORT 450 - HOSPITAL INPATIENT AN								
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTES									
(1)	(2)	(3)	(4)	(5)	(6)				
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE				
	Endoscopy Procedures								
	Inpatient Endoscopy Procedures	840	859	19	2%				
2	Outpatient Endoscopy Procedures	2,768	2,474	-294	-11%				
	Total Endoscopy Procedures	3,608	3,333	-275	-8%				
К.	Hospital Emergency Room Visits								
	Emergency Room Visits: Treated and Admitted	9,294	8,895	-399	-4%				
	Emergency Room Visits: Treated and Discharged	45,166	49,237	4,071	9%				
	Total Emergency Room Visits	54,460	58,132	3,672	7%				
L.	Hospital Clinic Visits								
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%				
2	Dental Clinic Visits	0	0	0	0%				
	Psychiatric Clinic Visits	27,981	29,060	1.079	4%				
	Medical Clinic Visits	0	29,000	1,079	0%				
	Specialty Clinic Visits	0	0	0	0%				
0	Total Hospital Clinic Visits	27,981	29,060	1,079	4%				
м.	Other Hospital Outpatient Visits								
	Rehabilitation (PT/OT/ST)	0	0	0	0%				
	Cardiology	3,420	3,625	205	6%				
	Chemotherapy	0	0	0	0%				
4	Gastroenterology	2,487	2,181	-306	-12%				
5	Other Outpatient Visits	125,674	120,220	-5,454	-4%				
	Total Other Hospital Outpatient Visits	131,581	126,026	-5,555	-4%				
N.	Hospital Full Time Equivalent Employees								
	Total Nursing FTEs	393.8	381.0	-12.8	-3%				
2	Total Physician FTEs	109.4	120.8	11.4	10%				
2	Total Non-Nursing and Non-Physician FTEs	1,121.8	1,087.4	-34.4	-3%				
5	Total Hospital Full Time Equivalent Employees	1,625.0	1,589.2	-34.4	-3%				
	rotar noopitar i un rinie Equivalent Employees	1,023.0	1,505.2	-33.0	-2/0				

	-		10		<u> </u>			
	TWELVE MONTH		NG					
DEE		YEAR 2009						
REP	ORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPT AND EN		OW SERVICES	BILUCATION			
(1)	(1) (2) (3) (4) (5)							
(1)	(2)	(3)	(4)	(3)	(6)			
		ACTUAL	ACTUAL	AMOUNT	%			
	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE			
		<u> </u>	112005	DITTERENCE	DITTERENCE			
Α.	Outpatient Surgical Procedures							
1	Waterbury Hospital	5,539	5,156	-383	-7%			
	Total Outpatient Surgical Procedures(A)	5,539	5,156	-383	-7%			
	· · · · · · · · · · · · · · · · · · ·	-	-					
В.	Outpatient Endoscopy Procedures							
1	Waterbury Hospital	2,768	2,474	-294	-11%			
	Total Outpatient Endoscopy Procedures(B)	2,768	2,474	-294	-11%			
C.	Outpatient Hospital Emergency Room Visits							
1	Waterbury Hospital	45,166	49,237	4,071	9%			
	Total Outpatient Hospital Emergency Room Visits(45,166	49,237	4,071	9%			
	(A) Must agree with Total Outpatient Surgical Procedur	es on Report 45	50.					
	(B) Must agree with Total Outpatient Endoscopy Proce	dures on Repor	t 450.					
	(C) Must agree with Emergency Room Visits Treated an	nd Discharged o	on Report 450.					

	WATER	BURY HOSPITAL			
	TWELVE MO	NTHS ACTUAL FILING			
	FI	SCAL YEAR 2009			
	REPORT FORM 500 - CALCUL			міт	
	AND BASELINE UNDERPAY	VIENT DATA: COMPARA	IVE ANALYS	515	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u> </u>	FY 2009	DIFFERENCE	DIFFERENCE
_					
Ι.	DATA BY MAJOR PAYER CATEGORY				
Α.	MEDICARE				
1	INPATIENT ACCRUED CHARGES	\$252,567,230	\$306,685,830	\$54,118,600	21%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$77.196.884	\$85,316,492	\$8,119,608	11%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.56%	27.82%	-2.75%	-9%
4	DISCHARGES	6.566	6.496	(70)	-1%
5	CASE MIX INDEX (CMI)	1.58160	1.59270	0.01110	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	10.384.78560	10.346.17920	(38,60640)	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,433.65	\$8,246.18	\$812.53	11%
8	PATIENT DAYS	39,552	38,627	(925)	-2%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,951.78	\$2,208.73	\$256.94	13%
10	AVERAGE LENGTH OF STAY	6.0	5.9	(0.1)	-1%
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$80,170,672	\$98,041,033	\$17,870,361	22%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$17,731,078	\$20,105,533	\$2,374,455	13%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.12%	20.51%	-1.61%	-7%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	31.74%	31.97%	0.23%	1%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,084.20005	2,076.63507	(7.56497)	0%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,507.38	\$9,681.78	\$1,174.41	14%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$332,737,902	\$404,726,863	\$71,988,961	22%
18	TOTAL ACCRUED PAYMENTS	\$94,927,962	\$105,422,025	\$10,494,063	11%
19	TOTAL ALLOWANCES	\$237,809,940	\$299,304,838	\$61,494,898	26%

	WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2009 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT								
	AND BASELINE UNDERPAYMENT DA	ATA: COMPARAT	IVE ANALYS	SIS					
				-					
		ACTUAL	ACTUAL	AMOUNT	%				
		ACTUAL	ACTUAL	AMOUNT					
LINE	DESCRIPTION	<u>FY 2008</u>	FY 2009	DIFFERENCE	DIFFERENCE				
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)								
	NON-GOVERNMENT INPATIENT								
1	INPATIENT ACCRUED CHARGES	\$129,793,227	\$151,040,234	\$21,247,007	16%				
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$46,745,303	\$51,625,908	\$4,880,605	10%				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.02%	34.18%	-1.83%	-5%				
4	DISCHARGES	4,942	4,524	(418)	-8%				
5	CASE MIX INDEX (CMI)	1.19250	1.29365	0.10115	8%				
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,893.33500	5,852.47260	(40.86240)	-1%				
	INPATIENT ACCRUED PAYMENT / CMAD	\$7,931.89	\$8,821.21	\$889.32	11%				
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$498.24)	(\$575.03)	(\$76.79)	15%				
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,936,300)	(\$3,365,345)	(\$429,045)	15%				
10	PATIENT DAYS	17,752	16,368	(1,384)	-8%				
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,633.24	\$3,154.08	\$520.83	20%				
12	AVERAGE LENGTH OF STAY	3.6	3.6	0.0	1%				
40	NON-GOVERNMENT OUTPATIENT OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$100.000.050	\$444 004 7 00	\$17,000,170	4.40/				
13 14	OUTPATIENT ACCRUED CHARGES (OF CHOS)	\$126,929,250 \$39,841,786	\$144,321,726 \$41,891,765	\$17,392,476 \$2,049,979	<u>14%</u> 5%				
14	OUTPATIENT ACCROED FAIMENTS (OF FMIT)	31.39%	29.03%	-2.36%	-8%				
16	OUTPATIENT CHARGES / INPATIENT CHARGES	97.79%	95.55%	-2.30%	-0%				
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,832.95136	4,322.76534	(510.18602)	-2 %				
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,243.78	\$9,690.96	\$1,447.18	-11%				
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	\$263.60	(\$9.18)	(\$272.78)	-103%				
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,273,959	(\$39,683)	(\$1,313,642)	-103%				
20		\$1,210,000	(\$00,000)	(\$1,610,612)	10070				
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)								
21	TOTAL ACCRUED CHARGES	\$256,722,477	\$295,361,960	\$38,639,483	15%				
22	TOTAL ACCRUED PAYMENTS	\$86,587,089	\$93,517,673	\$6,930,584	8%				
23	TOTAL ALLOWANCES	\$170,135,388	\$201,844,287	\$31,708,899	19%				
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,662,341)	(\$3,405,028)	(\$1,742,687)	105%				
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA								
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$237,128,412	\$275,365,397	\$38,236,985	16%				
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$87,299,529	\$89,650,520	\$2,350,991	3%				
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)								
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$149,828,883	\$185,714,877	\$35,885,994	24%				
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	63.18%	67.44%	4.26%					

	WATERBURY	HOSPITAL			
	TWELVE MONTHS A	ACTUAL FILING			
	FISCAL	(EAR 2009			
	REPORT FORM 500 - CALCULATION			лт	
	AND BASELINE UNDERPAYMENT D	ATA: COMPARAT	IVE ANALYS	515	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
С.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$9,188,200	\$8,867,028	(\$321,172)	-39
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$332.477	\$1,031,285	\$698.808	2109
	INPATIENT PAYMENTS / INPATIENT CHARGES	3.62%	11.63%	8.01%	2107
	DISCHARGES	335	265	(70)	-219
5	CASE MIX INDEX (CMI)	1.11900	1.14660	0.02760	29
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	374.86500	303.84900	(71.01600)	-19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$886.92	\$3,394.07	\$2,507.15	283%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,044.97	\$5,427.14	(\$1,617.83)	-23%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,546.73	\$4,852.11	(\$1,694.61)	-26%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,454,139	\$1,474,310	(\$979,829)	-40%
	PATIENT DAYS	1,410	1,146	(264)	-19%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$235.80	\$899.90	\$664.10	282%
13	AVERAGE LENGTH OF STAY	4.2	4.3	0.1	39
	UNINSURED OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$10,405,866	\$11,129,535	\$723,669	79
-	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$728,411	\$3,642,339	\$2,913,928	400%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	7.00%	32.73%	25.73%	368%
	OUTPATIENT CHARGES / INPATIENT CHARGES	113.25%	125.52%	12.26%	119
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	379.39587	332.61728	(46.77858)	-12%
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,919.92	\$10,950.54	\$9,030.62	4709
	NON-GOVERNMENT - UNINSURED OP PMT / OPED MEDICARE - UNINSURED OP PMT / OPED	\$6,323.86	(\$1,259.58)	(\$7,583.43)	-1209
21 22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,587.45 \$2,499,253	(\$1,268.76) (\$422,010)	(\$7,856.21) (\$2,921,263)	-1199 -1179
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$19,594,066	\$19,996,563	\$402,497	2%
24	TOTAL ACCRUED PAYMENTS	\$1,060,888	\$4,673,624	\$3,612,736	3419
25	TOTAL ALLOWANCES	\$18,533,178	\$15,322,939	(\$3,210,239)	-179
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,953,392	\$1,052,299	(\$3,901,093)	-79%

	WATERBUR	Y HOSPITAL			
	TWELVE MONTHS	S ACTUAL FILING			
	FISCA	L YEAR 2009			
	REPORT FORM 500 - CALCULATIO	N OF DSH UPPER P	AYMENT LI	ЛТ	
		DATA. CONFARAT	IVE ANALIS	513	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
_					
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$50,829,292	\$56,278,557	\$5,449,265	119
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,768,562	\$12,098,394	\$329,832	3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.15%	21.50%	-1.66%	-7%
4	DISCHARGES	2,730	2,363	(367)	-13%
5	CASE MIX INDEX (CMI)	0.98020	1.88630	0.90610	92%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,675.94600	4,457.32690	1,781.38090	67%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,397.91	\$2,714.27	(\$1,683.64)	-389
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,533.99	\$6,106.94	\$2,572.96	73%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,035.75	\$5,531.91	\$2,496.17	82%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,123,490	\$24,657,541	\$16,534,052	204%
11	PATIENT DAYS	11,144	9,943	(1,201)	-119
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,056.04	\$1,216.78	\$160.73	15%
13	AVERAGE LENGTH OF STAY	4.1	4.2	0.1	3%
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$42,735,799	\$51,257,026	\$8,521,227	20%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,793,697	\$9,525,170	\$1,731,473	22%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.24%	18.58%	0.35%	29
17	OUTPATIENT CHARGES / INPATIENT CHARGES	84.08%	91.08%	7.00%	89
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,295.30506	2,152.15810	(143.14696)	-6%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,395.50	\$4,425.87	\$1,030.37	30%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,848.28	\$5,265.10	\$416.81	9%
21	MEDICARE - MEDICAID OP PMT / OPED	\$5,111.88	\$5,255.92	\$144.03	3%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,733,331	\$11,311,561	(\$421,771)	-49
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$93,565,091	\$107,535,583	\$13,970,492	15%
24	TOTAL ACCRUED PAYMENTS	\$19,562,259	\$21,623,564	\$2,061,305	119
25	TOTAL ALLOWANCES	\$74,002,832	\$85,912,019	\$11,909,187	16%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,856,821	\$35,969,102	\$16,112,281	81%

	WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009							
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT							
	AND BASELINE UNDERPAYMENT DA							
		ACTUAL	ACTUAL	AMOUNT	0/			
		ACTUAL FY 2008	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	<u>FY 2008</u>	FY 2009	DIFFERENCE	DIFFERENCE			
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)							
	OTHER MEDICAL ASSISTANCE INPATIENT							
		\$14,096,098	\$19,981,018	\$5,884,920	42%			
	INPATIENT ACCRUED PAYMENTS (IP PMT) INPATIENT PAYMENTS / INPATIENT CHARGES	\$1,149,646	\$1,538,371	\$388,725	34%			
-	DISCHARGES	8.16%	7.70%	-0.46% 32	-6% 7%			
	CASE MIX INDEX (CMI)	486	518 1.16160	32 0.01170	7% 1%			
-	CASE MIX INDEX (CMI) CASE MIX ADJUSTED DISCHARGES (CMAD)	558.85140	601.70880	42.85740	8%			
	INPATIENT ACCRUED PAYMENT / CMAD	\$2.057.16	\$2,556.67	\$499.51	24%			
	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$5,874.73	\$6,264.54	\$389.81	7%			
-	MEDICARE - O.M.A. IP PMT / CMAD	\$5,376.49	\$5,689.51	\$313.02	6%			
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,004,661	\$3,423,430	\$418,769	14%			
11	PATIENT DAYS	2,511	2,625	114	5%			
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$457.84	\$586.05	\$128.20	28%			
13	AVERAGE LENGTH OF STAY	5.2	5.1	(0.1)	-2%			
14	OTHER MEDICAL ASSISTANCE OUTPATIENT OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$11,854,312	\$16.041.941	\$4,187.629	35%			
	OUTPATIENT ACCRUED CHARGES (OF CHAS)	\$1,101,379	\$1,401,067	\$299,688	27%			
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	9.29%	8.73%	-0.56%	-6%			
	OUTPATIENT CHARGES / INPATIENT CHARGES	84.10%	80.29%	-3.81%	-5%			
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	408,70854	415.88098	7,17244	2%			
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,694.78	\$3,368.91	\$674.13	25%			
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$5,549.00	\$6,322.05	\$773.05	14%			
	MEDICARE - O.M.A. OP PMT / CMAD	\$5,812.60	\$6,312.87	\$500.27	9%			
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,375,659	\$2,625,403	\$249,744	11%			
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT) TOTAL ACCRUED CHARGES	¢05.050.440	¢20,020,050	¢40.070.540	000/			
	TOTAL ACCRUED PAYMENTS	\$25,950,410 \$2,251,025	\$36,022,959 \$2,939,438	\$10,072,549 \$688,413	39% 31%			
	TOTAL ACCIVED FAIMENTS	\$23.699.385	\$33.083.521	\$9.384.136	40%			
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$5,380,320	\$6,048,833	\$668,513	12%			

	WATERBURY H TWELVE MONTHS A				
	FISCAL Y				
	REPORT FORM 500 - CALCULATION	OF DSH UPPER H	PAYMENT LI		
	AND BASELINE UNDERPAYMENT D	ATA: COMPARA	FIVE ANALYS	SIS	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
				DITENCIOL	
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL				
••		ACCICITANCE)			
1	TOTAL MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES	\$64,925,390	\$76,259,575	\$11,334,185	17%
2	INPATIENT ACCRUED CHARGES	\$12,918,208	\$13,636,765	\$718,557	6%
2	INPATIENT PAYMENTS / INPATIENT CHARGES	19.90%	17.88%	-2.01%	-10%
4	DISCHARGES	3,216	2.881	(335)	-10%
5	CASE MIX INDEX (CMI)	1.00584	1.75600	0.75015	75%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,234.79740	5,059.03570	1,824.23830	56%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,993.51	\$2.695.53	(\$1,297,99)	-33%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,938.38	\$6,125,69	\$2,187.31	-33 %
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,440.14	\$5,550.66	\$2,107.51	61%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,128,151	\$28,080,972	\$16,952,821	152%
11	PATIENT DAYS	13,655	12,568	(1,087)	-8%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$946.04	\$1.085.04	\$139.00	15%
13	AVERAGE LENGTH OF STAY	4.2	4.4	0.1	3%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$54,590,111	\$67,298,967	\$12,708,856	23%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$8,895,076	\$10,926,237	\$2,031,161	23%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.29%	16.24%	-0.06%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	84.08%	88.25%	4.17%	5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,704.01360	2,568.03909	(135.97452)	-5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,289.58	\$4,254.70	\$965.12	29%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,954.20	\$5,436.26	\$482.07	10%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,217.80	\$5,427.08	\$209.29	4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$14,108,990	\$13,936,964	(\$172,027)	-1%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$119,515,501	\$143,558,542	\$24,043,041	20%
-	TOTAL ACCRUED PAYMENTS				13%
25	TOTAL ALLOWANCES				22%
24	TOTAL ACCRUED PAYMENTS	\$21,813,284 \$97,702,217	\$24,563,002 \$118,995,540	\$2,749,718 \$21,293,323	

	WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING								
	FISCAL Y	EAR 2009							
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS								
	AND BASELINE UNDERPAYMENT D	ATA: COMPARAT	IVE ANALYS	515					
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE				
G.	CHAMPUS / TRICARE								
.	CHAIN DO / TRIDARE								
	CHAMPUS / TRICARE INPATIENT								
1	INPATIENT ACCRUED CHARGES	\$274,994	\$803,012	\$528,018	192%				
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$67,936	\$106,979	\$39,043	57%				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.70%	13.32%	-11.38%	-46%				
4	DISCHARGES	12	15	3	25%				
5	CASE MIX INDEX (CMI)	1.32940	1.66010	0.33070	25%				
	CASE MIX ADJUSTED DISCHARGES (CMAD)	15.95280	24.90150	8.94870	56%				
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,258.56	\$4,296.09	\$37.52	1%				
8	PATIENT DAYS	38	119	81	213%				
-	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,787.79	\$898.98	(\$888.81)	-50%				
10	AVERAGE LENGTH OF STAY	3.2	7.9	4.8	151%				
	<u>CHAMPUS / TRICARE OUTPATIENT</u>								
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$318,244	\$463,890	\$145,646	46%				
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$89,373	\$137,976	\$48,603	54%				
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)								
13	TOTAL ACCRUED CHARGES TOTAL ACCRUED PAYMENTS	\$593,238	\$1,266,902	\$673,664	114%				
	TOTAL ACCROED PAYMENTS	\$157,309	\$244,955	\$87,646	56%				
15	TOTAL ALLOWANCES	\$435,929	\$1,021,947	\$586,018	134%				
Н.	OTHER DATA								
1	OTHER OPERATING REVENUE	\$13,967,320	\$13,073,722	(\$893,598)	-6%				
2	TOTAL OPERATING EXPENSES	\$227,689,900	\$253,532,594	\$25,842,694	-0%				
-	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$1,605,901	\$1,753,777	\$147.876	9%				
5		ψ1,000,001	ψ1,100,111	ψ1+1,070	570				
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)								
4	CHARITY CARE (CHARGES)	\$2,588,984	\$1.809.921	(\$779,063)	-30%				
	BAD DEBTS (CHARGES)	\$17,717,523	\$14,319,487	(\$3,398,036)	-19%				
	UNCOMPENSATED CARE (CHARGES)	\$20,306,507	\$16,129,408	(\$4,177,099)	-21%				
7	COST OF UNCOMPENSATED CARE	\$5,869,327	\$4,304,821	(\$1,564,506)	-27%				
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)								
	TOTAL ACCRUED CHARGES	\$119,515,501	\$143,558,542	\$24,043,041	20%				
9	TOTAL ACCRUED PAYMENTS	\$21,813,284	\$24,563,002	\$2,749,718	13%				
10	COST OF TOTAL MEDICAL ASSISTANCE	\$34,544,371	\$38,314,724	\$3,770,354	11%				
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$12,731,087	\$13,751,722	\$1,020,636	8%				

	WATERBURY HOSPITAL							
	TWELVE MONTHS ACTUAL FILING							
		AL YEAR 2009						
	REPORT FORM 500 - CALCULAT	TON OF DSH UPPER F	PAYMENT LIN	TIN				
	AND BASELINE UNDERPAYME	NT DATA: COMPARAT	IVE ANALYS	SIS				
		ACTUAL	ACTUAL	AMOUNT	%			
	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE			
	DESCRIPTION	<u>F1 2008</u>	<u>F1 2009</u>	DIFFERENCE	DIFFERENCE			
П.	AGGREGATE DATA							
Α.	TOTALS - ALL PAYERS							
<u>А.</u> 1	TOTAL INPATIENT CHARGES	\$447,560,841	\$534,788,651	\$87,227,810	19%			
	TOTAL INPATIENT PAYMENTS	\$136,928,331	\$150,686,144	\$13,757,813	10%			
_	TOTAL INPATIENT PAYMENTS / CHARGES	30.59%	28.18%	-2.42%	-8%			
	TOTAL DISCHARGES	14,736	13,916	(820)	-6%			
5	TOTAL CASE MIX INDEX	1.32525	1.52936	0.20411	15%			
6	TOTAL CASE MIX ADJUSTED DISCHARGES	19,528.87080	21,282.58900	1,753.71820	9%			
-	TOTAL OUTPATIENT CHARGES	\$262,008,277	\$310,125,616	\$48,117,339	18%			
	OUTPATIENT CHARGES / INPATIENT CHARGES	58.54%	57.99%	-0.55%	-1%			
-	TOTAL OUTPATIENT PAYMENTS	\$66,557,313	\$73,061,511	\$6,504,198	10%			
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.40%	23.56%	-1.84%	-7%			
	TOTAL CHARGES	\$709,569,118	\$844,914,267	\$135,345,149	19%			
12 13	TOTAL PAYMENTS TOTAL PAYMENTS / TOTAL CHARGES	\$203,485,644	\$223,747,655	\$20,262,011	10%			
	PATIENT DAYS	28.68%	26.48% 67.682	-2.20%	-8% -5%			
14		10,331	07,002	(3,313)	-070			
В.	TOTALS - ALL GOVERNMENT PAYERS							
1	INPATIENT CHARGES	\$317,767,614	\$383,748,417	\$65,980,803	21%			
2	INPATIENT PAYMENTS	\$90,183,028	\$99,060,236	\$8,877,208	10%			
3	GOVT. INPATIENT PAYMENTS / CHARGES	28.38%	25.81%	-2.57%	-9%			
4	DISCHARGES	9,794	9,392	(402)	-4%			
5	CASE MIX INDEX	1.39223	1.64290	0.25067	18%			
6	CASE MIX ADJUSTED DISCHARGES	13,635.53580	15,430.11640	1,794.58060	13%			
7	OUTPATIENT CHARGES	\$135,079,027	\$165,803,890	\$30,724,863	23%			
8	OUTPATIENT CHARGES / INPATIENT CHARGES	42.51%	43.21%	0.70%	2%			
9 10	OUTPATIENT PAYMENTS OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	\$26,715,527	\$31,169,746	\$4,454,219	17%			
10	TOTAL CHARGES	19.78% \$452,846,641	18.80% \$549,552,307	-0.98% \$96,705,666	-5% 21%			
	TOTAL PAYMENTS	\$116.898.555	\$130.229.982	\$13,331,427	11%			
13	TOTAL PAYMENTS / CHARGES	25.81%	23.70%	-2.12%	-8%			
-	PATIENT DAYS	53,245	51,314	(1,931)	-4%			
	TOTAL GOVERNMENT DEDUCTIONS	\$335,948,086	\$419,322,325	\$83,374,239	25%			
C.	AVERAGE LENGTH OF STAY							
	MEDICARE	6.0	5.9	(0.1)	-1%			
_	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.6	0.0	1%			
0	UNINSURED	4.2	4.3	0.1	3%			
		4.1	4.2	0.1	3%			
	OTHER MEDICAL ASSISTANCE	5.2	5.1	(0.1)	-2%			
6	CHAMPUS / TRICARE TOTAL AVERAGE LENGTH OF STAY	3.2	7.9	4.8	<u>151%</u> 1%			
/	IVIAL AVENAGE LENGTE OF STAT	4.8	4.9	0.0	1%			

	WATERBURY 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	%			
	DEGODIDION							
LINE	DESCRIPTION	<u>FY 2008</u>	<u>FY 2009</u>	DIFFERENCE	DIFFERENCE			
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION							
				-				
•	TOTAL CHARGES	\$709,569,118	\$844,914,267	\$135,345,149	19%			
	TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE	\$335,948,086	\$419,322,325	\$83,374,239	25%			
-	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$20,306,507 \$149,828,883	\$16,129,408 \$185,714,877	(\$4,177,099) \$35,885,994	24%			
	EMPLOYEE SELF INSURANCE ALLOWANCE		\$185,714,877	\$35,885,994	24%			
-	TOTAL ADJUSTMENTS	\$0 \$506.083.476	\$0 \$621.166.610	۵ 0 \$115.083.134	23%			
-	TOTAL ADJOSTMENTS	\$203,485,642	\$021,100,010	\$115,083,134 \$20,262,015	23%			
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adi OHCA Input)	\$203,485,642	\$223,747,657	\$20,262,015	9%			
	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$1,605,901	\$1,753,777	\$147,876	9% 10%			
-	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2890367376	0.2668926811	(0.0221440566)	-8%			
	COST OF UNCOMPENSATED CARE	\$5,869,327	\$4,304,821	(\$1,564,506)	-27%			
	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$12,731,087	\$13,751,722	\$1,020,636	-21%			
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%			
-	TOTAL COST OF UNCOMPENSATED CARE AND	ψŪ	φυ	φυ	076			
14	MEDICAL ASSISTANCE UNDERPAYMENT	\$18,600,413	\$18,056,543	(\$543,870)	-3%			
		\$10,000,413	ψ10,000,0 4 0	(\$343,070)	-570			
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)							
10.	CALCOLATED UNDERFATIMENT (UFFER LIMIT METHODOLOGT)							
	MEDICAID	\$11,733,331	\$11,311,561	(\$421,771)	-4%			
	OTHER MEDICAL ASSISTANCE	\$5,380,320	\$6,048,833	\$668,513	12%			
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,953,392	\$1,052,299	(\$3,901,093)	-79%			
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$22,067,043	\$18,412,693	(\$3,654,350)	-17%			
۷.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600							
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%			
_	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$17,864,548	\$14,427,091	(\$3,437,457)	-19.24%			
-	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$222,956,090	\$239,928,524	\$16,972,434	7.61%			
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%			
	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$709,569,118	\$844,914,262	\$135,345,144	19.07%			
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$1,367,749	\$1,463,750	\$96,001	7.02%			
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$21,674,256	\$17,593,158	(\$4,081,098)	-18.83%			

	WATERBURY HOSPITAL							
	TWELVE MONTHS ACTUAL F							
	FISCAL YEAR 2009							
	REPORT 550 - CALCULATION OF DSH UPPER							
BASELINE UNDERPAYMENT DATA								
1	BASELINE UNDERPATMENT							
(4)	(0)	(2)	(1)	(5)				
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL					
	DESCRIPTION	FY 2008	FY 2009	AMOUNT DIFFERENCE				
	DESCRIPTION	112000	112003	DIFFERENCE				
I.	ACCRUED CHARGES AND PAYMENTS							
1.	ACCRUED CHARGES AND FATMENTS							
Α.	INPATIENT ACCRUED CHARGES							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$129,793,227	\$151,040,234	\$21,247,00				
2	MEDICARE	\$252,567,230	306,685,830	\$54,118,6				
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$64,925,390	76,259,575	\$11,334,18				
	MEDICAID	\$50,829,292	56,278,557	\$5,449,2				
	OTHER MEDICAL ASSISTANCE	\$14,096,098	19,981,018	\$5,884,9				
	CHAMPUS / TRICARE	\$274,994	803,012	\$528,0				
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$9,188,200	8,867,028	(\$321,1)				
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$317,767,614 \$447,560,841	\$383,748,417 \$534,788,651	\$65,980,8 \$87,227,8				
		\$447,000,041	φJJ4,700,001	φο <i>ι</i> ,221,8				
В.	OUTPATIENT ACCRUED CHARGES							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$126,929,250	\$144,321,726	\$17,392,4				
2	MEDICARE	\$80,170,672	98,041,033	\$17,870,3				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$54,590,111	67,298,967	\$12,708,8				
	MEDICAID	\$42,735,799	51,257,026	\$8,521,2				
	OTHER MEDICAL ASSISTANCE	\$11,854,312	16,041,941	\$4,187,6				
	CHAMPUS / TRICARE	\$318,244	463,890	\$145,6				
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT CHARGES	\$10,405,866	11,129,535	\$723,6				
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$135,079,027 \$262,008,277	\$165,803,890 \$310,125,616	\$30,724,8 \$48,117,3				
	TOTAL OUTPATIENT CHARGES	\$202,008,277	\$310,125,010	\$ 4 0,117,3				
C.	TOTAL ACCRUED CHARGES							
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$256,722,477	\$295,361,960	\$38,639,4				
2	TOTAL MEDICARE	\$332,737,902	\$404,726,863	\$71,988,9				
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$119,515,501	\$143,558,542	\$24,043,0				
	TOTAL MEDICAID	\$93,565,091	\$107,535,583	\$13,970,4				
	TOTAL OTHER MEDICAL ASSISTANCE	\$25,950,410	\$36,022,959	\$10,072,5				
		\$593,238	\$1,266,902	\$673,6				
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$19,594,066 \$452,846,641	\$19,996,563 \$549,552,307	\$402,4 \$96,705,6				
	TOTAL CHARGES	\$709,569,118	\$844,914,267	\$135,345,1				
		\$100,000,110	4044,314,201	ψ100,040,1				
D.	INPATIENT ACCRUED PAYMENTS							
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$46,745,303	\$51,625,908	\$4,880,6				
	MEDICARE	\$77,196,884	85,316,492	\$8,119,6				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,918,208	13,636,765	\$718,5				
		\$11,768,562	12,098,394	\$329,8				
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$1,149,646	1,538,371	\$388,7				
-	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$67,936 \$332,477	106,979 1,031,285	\$39,0				
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$332,477	\$99,060,236	\$698,8 \$8,877,2				
	TOTAL INPATIENT PAYMENTS	\$136,928,331	\$150,686,144	\$13,757,8				
	-	÷ • • • • • • • • • • • • • • • • • • •		÷ - 2,1 • 7,1				
Ε.	OUTPATIENT ACCRUED PAYMENTS							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$39,841,786	\$41,891,765	\$2,049,9				
	MEDICARE	\$17,731,078	20,105,533	\$2,374,4				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$8,895,076	10,926,237	\$2,031,1				
		\$7,793,697	9,525,170	\$1,731,4				
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$1,101,379 \$89,373	1,401,067 137,976	\$299,6				
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$89,373	3,642,339	\$48,6 \$2,913,9				
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$26,715,527	\$31,169,746	\$4,454,2				
	TOTAL OUTPATIENT PAYMENTS	\$66,557,313	\$73,061,511	\$6,504,1				
	TOTAL ACCRUED PAYMENTS			<u> </u>				
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$86,587,089	\$93,517,673	\$6,930,5				
		\$94,927,962	\$105,422,025	\$10,494,0				
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$21,813,284	\$24,563,002	\$2,749,7				
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$19,562,259 \$2,251,025	\$21,623,564 \$2,939,438	\$2,061,3 \$688,4				
	TOTAL OTHER MEDICAL ASSISTANCE	\$2,251,025	\$2,939,438 \$244,955	<u>، ۵۵۵۵,4</u> \$87,6				
	TOTAL CHAMPOS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,060,888	\$4,673,624	\$3,612,7				
	TOTAL GOVERNMENT PAYMENTS	\$116,898,555	\$130,229,982	\$13,331,4				

	WATERBURY HOSPI			
	TWELVE MONTHS ACTUA	L FILING		
	FISCAL YEAR 20	09		
	REPORT 550 - CALCULATION OF DSH UPF			
	BASELINE UNDERPAYME			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
INE	DESCRIPTION	<u>FY 2008</u>	<u>FY 2009</u>	DIFFERENCE
II.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.29%	17.88%	-0.42
2	MEDICARE	35.59%	36.30%	0.70
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.15%	9.03%	-0.12
4		7.16%	6.66%	-0.50
5	OTHER MEDICAL ASSISTANCE	1.99%	2.36%	0.38
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.04%	0.10%	0.00
1		44.78%	45.42%	-0.23
		63.08%	45.42% 63.30%	0.84
_			00.0070	0.2
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.89%	17.08%	-0.8
2		11.30%	11.60%	0.3
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.69%	7.97%	0.2
4 5	MEDICAID OTHER MEDICAL ASSISTANCE	6.02% 1.67%	6.07% 1.90%	0.0
5 6	CHAMPUS / TRICARE	0.04%	0.05%	0.2
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.47%	1.32%	-0.15
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.04%	19.62%	0.59
	TOTAL OUTPATIENT PAYER MIX	36.92%	36.70%	-0.22
	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)	22.97%	23.07%	0.10
2	MEDICARE	37.94%	38.13%	0.1
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.35%	6.09%	-0.2
4	MEDICAID	5.78%	5.41%	-0.3
5	OTHER MEDICAL ASSISTANCE	0.56%	0.69%	0.1
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.03%	0.05%	0.0
1	TOTAL INPATIENT GOVERNMENT PAYER MIX	0.16% 44.32%	44.27%	-0.0
	TOTAL INPATIENT GOVERNMENT PATER MIX	67.29%	67.35%	-0.0
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	19.58%	18.72%	-0.8
1	MEDICARE	8.71%	8.99%	-0.8
2	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.37%	4.88%	0.2
4	MEDICAL ASSISTANCE (INCLODING OTHER MEDICAL ASSISTANCE)	3.83%	4.88%	0.3
5	OTHER MEDICAL ASSISTANCE	0.54%	0.63%	0.0
6	CHAMPUS / TRICARE	0.04%	0.06%	0.0
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.36%	1.63%	1.2
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	13.13%	13.93%	0.8
	TOTAL OUTPATIENT PAYER MIX	32.71%	32.65%	-0.0
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.0

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2009			
	REPORT 550 - CALCULATION OF DSH UPPER PAYME	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
				<u> </u>
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE
ш	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	ΠΔΤΔ		
Α.	DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,942	4,524	(418)
2	MEDICARE	6,566	6,496	(70)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,216	2,881	(335)
	MEDICAID	2,730	2,363	(367)
5	OTHER MEDICAL ASSISTANCE	486	518	32
6	CHAMPUS / TRICARE	12	15	3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	335	265	(70)
	TOTAL GOVERNMENT DISCHARGES	9,794	9,392	(402)
	TOTAL DISCHARGES	14,736	13,916	(820)
В.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17,752	16,368	(1,384)
	MEDICARE	39,552	38,627	(925)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13,655	12,568	(1,087)
	MEDICAID	11,144	9,943	(1,201)
	OTHER MEDICAL ASSISTANCE	2,511	2,625	114
	CHAMPUS / TRICARE	38	119	81
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,410	1,146	(264)
	TOTAL GOVERNMENT PATIENT DAYS	53,245	51,314	(1,931)
ļ	TOTAL PATIENT DAYS	70,997	67,682	(3,315)
_				
C.	AVERAGE LENGTH OF STAY (ALOS)			
4		0.0	0.0	0.0
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.6	0.0
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.0	5.9	(0.1)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.2	4.4	0.1
	OTHER MEDICAL ASSISTANCE	5.2	4.2	(0.1)
	CHAMPUS / TRICARE	3.2	7.9	4.8
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.2	4.3	0.1
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.4	5.5	0.1
	TOTAL AVERAGE LENGTH OF STAY	4.8	4.9	0.0
		410	410	0.0
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.19250	1.29365	0.10115
	MEDICARE	1.58160	1.59270	0.01110
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.00584	1.75600	0.75015
	MEDICAID	0.98020	1.88630	0.90610
5	OTHER MEDICAL ASSISTANCE	1.14990	1.16160	0.01170
6	CHAMPUS / TRICARE	1.32940	1.66010	0.33070
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.11900	1.14660	0.02760
	TOTAL GOVERNMENT CASE MIX INDEX	1.39223	1.64290	0.25067
	TOTAL CASE MIX INDEX	1.32525	1.52936	0.20411
Ε.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$237,128,412	\$275,365,397	\$38,236,985
1		\$237,128,412 \$87,299,529	\$275,365,397 \$89,650,520	\$38,236,985 \$2,350,991
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	. , ,		
1 2	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$87,299,529	\$89,650,520	\$2,350,991
1 2 3	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$87,299,529 \$149,828,883	\$89,650,520 \$185,714,877	\$2,350,991 \$35,885,994
1 2 3 4	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	\$87,299,529 \$149,828,883 63.18%	\$89,650,520 \$185,714,877 67.44%	\$2,350,991 \$35,885,994 4.26%
1 2 3 4 5	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	\$87,299,529 \$149,828,883 63.18% \$0	\$89,650,520 \$185,714,877 67.44% \$0	\$2,350,991 \$35,885,994 4.26% \$0
1 2 3 4 5 6	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$87,299,529 \$149,828,883 63.18% \$0 \$0	\$89,650,520 \$185,714,877 67.44% \$0 \$0	\$2,350,991 \$35,885,994 4.26%
1 2 3 4 5 6 7	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT	\$87,299,529 \$149,828,883 63.18% \$0	\$89,650,520 \$185,714,877 67.44% \$0	\$2,350,991 \$35,885,994 4.26% \$0
1 2 3 4 5 6 7	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$87,299,529 \$149,828,883 63.18% \$0 \$0	\$89,650,520 \$185,714,877 67.44% \$0 \$0	\$2,350,991 \$35,885,994 4.26% \$0
1 2 3 4 5 6 7	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT	\$87,299,529 \$149,828,883 63.18% \$0 \$0	\$89,650,520 \$185,714,877 67.44% \$0 \$0	\$2,350,991 \$35,885,994 4.26% \$0 \$0 \$0
1 2 3 4 5 6 7 8	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT)	\$87,299,529 \$149,828,883 63.18% \$0 \$0 \$1,605,901	\$89,650,520 \$185,714,877 67.44% \$0 \$0 \$1,753,777	\$2,350,991 \$35,885,994 4.26% \$0 \$0 \$147,876
1 2 3 4 5 6 7 7 8 9	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT) CHARITY CARE	\$87,299,529 \$149,828,883 63.18% \$0 \$0 \$1,605,901 \$2,588,984	\$89,650,520 \$185,714,877 67.44% \$0 \$0 \$1,753,777 \$1,809,921	\$2,350,991 \$35,885,994 4.26% \$0 \$0 \$147,876 (\$779,063)
1 2 3 4 5 6 7 7 8 9 10	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT) CHARITY CARE BAD DEBTS	\$87,299,529 \$149,828,883 63.18% \$0 \$0 \$1,605,901 \$2,588,984 \$17,717,523	\$89,650,520 \$185,714,877 67.44% \$0 \$0 \$1,753,777 \$1,809,921 \$14,319,487	\$2,350,991 \$35,885,994 4.26% \$0 \$0 \$147,876 (\$779,063) (\$3,398,036)

	WATERBURY HOSPITAL							
	TWELVE MONTHS ACT	JAL FILING						
	FISCAL YEAR 2009							
	REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND							
	BASELINE UNDERPAYMENT DATA							
(1)	(2)		(3)	(4)	(5)			
			ACTUAL	ACTUAL	AMOUNT			
LINE	DESCRIPTION		FY 2008	FY 2009	DIFFERENCE			

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2009			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM			
	BASELINE UNDERPAYMENT DATA			
	BASELINE UNDERPATMENT DATA			
(1)	(2)	(3)	(4)	(5)
(1)	(4)	(3)	(+)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,893.33500	5,852.47260	(40.86240
		10,384.78560	10,346.17920	(38.60640
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	3,234.79740 2,675.94600	5,059.03570 4,457.32690	1,824.23830
	OTHER MEDICAL ASSISTANCE	2,675.94600	4,457.32690	42.85740
	CHAMPUS / TRICARE	15.95280	24.90150	8.94870
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	374.86500	303.84900	(71.01600
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	13,635.53580	15,430.11640	1,794.58060
	TOTAL CASE MIX ADJUSTED DISCHARGES	19,528.87080	21,282.58900	1,753.71820
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
Б.	OUPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGT)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,832.95136	4,322.76534	-510.18602
2	MEDICARE	2,084.20005	2,076.63507	-7.5649
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,704.01360	2,568.03909	-135.97452
	MEDICAID	2,295.30506	2,152.15810	-143.14696
	OTHER MEDICAL ASSISTANCE	408.70854	415.88098	7.1724
	CHAMPUS / TRICARE	13.88731	8.66531	-5.2220
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	379.39587	332.61728	-46.77858
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,802.10096 9,635.05233	4,653.33947 8,976.10481	-148.76149 -658.94752
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	9,035.05233	0,970.10401	-030.9475
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
-				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,931.89	\$8,821.21	\$889.32
	MEDICARE	\$7,433.65	\$8,246.18	\$812.53
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,993.51	\$2,695.53	(\$1,297.99
		\$4,397.91	\$2,714.27	(\$1,683.64
-	OTHER MEDICAL ASSISTANCE	\$2,057.16	\$2,556.67	\$499.51
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,258.56 \$886.92	\$4,296.09 \$3.394.07	\$37.52 \$2,507.15
/	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,613.82	\$6,419.93	\$2,507.15 (\$193.90
	TOTAL GOVERNMENT INFATIENT PATMENT PER CASE MIX ADJOSTED DISCHARGE	\$7,011.58	\$7.080.25	\$68.67
				•
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,243.78	\$9,690.96	\$1,447.18
	MEDICARE	\$8,507.38	\$9,681.78	\$1,174.41
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,289.58	\$4,254.70	\$965.12
	MEDICAID	\$3,395.50	\$4,425.87	\$1,030.37
5	OTHER MEDICAL ASSISTANCE	\$2,694.78	\$3,368.91	\$674.13
6	CHAMPUS / TRICARE	\$6,435.59	\$15,922.80	\$9,487.21
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,919.92	\$10,950.54	\$9,030.62
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			*•••
		\$5,563.30	\$6,698.36	\$1,135.06
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,907.83	\$8,139.56	\$1,231.73

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2009			
	REPORT 550 - CALCULATION OF DSH UPPER PAY			
	BASELINE UNDERPAYMENT DATA			
	BASELINE UNDERPATMENT DATA	\		
		(2)	(0)	(=)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE
		112000	112005	DITTERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
••				
1	MEDICAID	\$11,733,331	\$11,311,561	(\$421,771
	OTHER MEDICAL ASSISTANCE	\$5,380,320	\$6,048,833	\$668,513
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,953,392	\$1,052,299	(\$3,901,093
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$22,067,043	\$18,412,693	(\$3,654,350
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	LOGY)		
			• • • • •	
	TOTAL CHARGES	\$709,569,118	\$844,914,267	\$135,345,149
	TOTAL GOVERNMENT DEDUCTIONS	\$335,948,086	\$419,322,325	\$83,374,239
		\$20,306,507	\$16,129,408	(\$4,177,099
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$149,828,883	\$185,714,877	\$35,885,994
	EMPLOYEE SELF INSURANCE ALLOWANCE TOTAL ADJUSTMENTS	\$0	\$0 \$621,166,610	\$0 \$115,092,124
	TOTAL ADJOSTMENTS	\$506,083,476 \$203,485,642	\$223,747,657	\$115,083,134 \$20,262,015
8	UCP DSH PAYMENTS (OHCA INPUT)	\$1,605,901	\$1,753,777	\$147,876
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$205,091,543	\$225,501,434	\$20,409,891
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2890367376	0.2668926811	(0.0221440566
	COST OF UNCOMPENSATED CARE	\$5,869,327	\$4,304,821	(\$1,564,506
	MEDICAL ASSISTANCE UNDERPAYMENT	\$12,731,087	\$13,751,722	\$1,020,636
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$18,600,413	\$18,056,543	(\$543,870
VII.	RATIOS			
Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.02%	34.18%	-1.83%
2	MEDICARE	30.56%	27.82%	-2.75%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19.90%	17.88%	-2.01%
	MEDICAID	23.15%	21.50%	-1.66%
	OTHER MEDICAL ASSISTANCE	8.16%	7.70%	-0.46%
		24.70%	13.32%	-11.389
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.62%	11.63%	8.01%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
		28.38%	25.81%	-2.57%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	30.59%	28.18%	-2.42%
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	+ +		
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.39%	29.03%	-2.36%
	MEDICARE	22.12%	29.03%	-2.507
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.29%	16.24%	-0.06%
	MEDICAID	18.24%	18.58%	0.35%
	OTHER MEDICAL ASSISTANCE	9.29%	8.73%	-0.56%
	CHAMPUS / TRICARE	28.08%	29.74%	1.66%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	7.00%	32.73%	25.73%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
		19.78%	18.80%	-0.98%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	25.40%	23.56%	-1.84%

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2009			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2008</u>	ACTUAL FY 2009	AMOUNT <u>DIFFERENCE</u>
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	TIONS		
		_		
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENT	<u>s</u>		
1	TOTAL ACCRUED PAYMENTS	\$203,485,644	\$223,747,655	\$20,262,011
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	ψ203,403,044	ψ223,747,000	\$147,876
_	(OHCA INPUT)	\$1,605,901	\$1,753,777	4 · · · , 6 · 6
	OHCA DEFINED NET REVENUE	\$205,091,545	\$225,501,432	\$20,409,887
		\$17.004.540	* 44.407.004	(\$0,407,457)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE CALCULATED NET REVENUE	\$17,864,548 \$240,673,616	\$14,427,091 \$239,928,523	(\$3,437,457) (\$745,093)
4		\$240,073,010	\$239,920,323	(\$745,095)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$222,956,090	\$239,928,524	\$16,972,434
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$17,717,526	(\$1)	(\$17,717,527)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	INTS		
1	OHCA DEFINED GROSS REVENUE	\$709,569,118	\$844,914,267	\$135,345,149
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$709,569,118	\$844,914,267	\$135,345,149
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$709,569,118	\$844,914,262	\$135,345,144
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$5	\$5
4	VARIANCE (MUST DE LESS THAN OR EQUAL TO \$500)	\$U	\$ 0	20
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	<u>TS</u>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,306,507	\$16,129,408	(\$4,177,099)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,367,749	\$1,463,750	\$96,001
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS	\$21,674,256	\$17,593,158	(\$4,081,098)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$21,674,256	\$17,593,158	(\$4,081,098)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

	WATERBURY 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)
(1)	<u>_/</u>	ACTUAL
LINE	DESCRIPTION	FY 2009
I.	ACCRUED CHARGES AND PAYMENTS	
	INPATIENT ACCRUED CHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$151,040,234
	MEDICARE	306,685,830
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	76,259,575
	MEDICAID	56,278,557
-	OTHER MEDICAL ASSISTANCE	19,981,018
	CHAMPUS / TRICARE	803,012
		8,867,028
	TOTAL INPATIENT GOVERNMENT CHARGES	\$383,748,417
	TOTAL INPATIENT CHARGES	\$534,788,651
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$144,321,726
2	MEDICARE	98,041,033
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	67,298,967
4	MEDICAID	51,257,026
5	OTHER MEDICAL ASSISTANCE	16,041,941
	CHAMPUS / TRICARE	463,890
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	11,129,535
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$165,803,890
	TOTAL OUTPATIENT CHARGES	\$310,125,616
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$295,361,960
2	TOTAL GOVERNMENT ACCRUED CHARGES	549,552,307
	TOTAL ACCRUED CHARGES	\$844,914,267
D.	INPATIENT ACCRUED PAYMENTS	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$51,625,908
	MEDICARE	85,316,492
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13,636,765
4	MEDICAID	12,098,394
5	OTHER MEDICAL ASSISTANCE	1,538,371
6	CHAMPUS / TRICARE	106,979
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,031,285
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$99,060,236
	TOTAL INPATIENT PAYMENTS	\$150,686,144
E.	OUTPATIENT ACCRUED PAYMENTS	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$41,891,765
2	MEDICARE	20,105,533
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,926,237
4	MEDICAID	9,525,170
5	OTHER MEDICAL ASSISTANCE	1,401,067
	CHAMPUS / TRICARE	137,976
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,642,339
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$31,169,746
	TOTAL OUTPATIENT PAYMENTS	\$73,061,511
F.	TOTAL ACCRUED PAYMENTS	
	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$93,517,673
1	TOTAL GOVERNMENT ACCRUED PAYMENTS	130,229,982

	WATERBURY 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)				
		ACTUAL				
LINE	DESCRIPTION	<u>FY 2009</u>				
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA					
Α.	ACCRUED DISCHARGES					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,524				
2	MEDICARE	6,496				
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,881				
	MEDICAID	2,363				
5	OTHER MEDICAL ASSISTANCE	518				
	CHAMPUS / TRICARE	15				
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	265				
	TOTAL GOVERNMENT DISCHARGES	9,392				
	TOTAL DISCHARGES	13,916				
В.	CASE MIX INDEX					
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.29365				
2	MEDICARE	1.59270				
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.75600				
4	MEDICAID	1.88630				
5	OTHER MEDICAL ASSISTANCE	1.16160				
6	CHAMPUS / TRICARE	1.66010				
7		1.14660				
	TOTAL GOVERNMENT CASE MIX INDEX	1.64290				
	TOTAL CASE MIX INDEX	1.52936				
C.	OTHER REQUIRED DATA					
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$275,365,397				
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$89,650,520				
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)					
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$185,714,877				
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	67.44%				
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0				
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0				
		A ·				
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$1,753,777				
8	CHARITY CARE	\$1,809,921				
-	BAD DEBTS	\$14,319,487				
10	TOTAL UNCOMPENSATED CARE	\$16,129,408				
11		\$13,073,722				
12	TOTAL OPERATING EXPENSES	\$253,532,594				

	WATERBURY HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2009	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
	BASELINE UNDERFAIMENT DATA. AGREED-OFON PROCEDURES	
(1)	(2)	(3)
		ACTUAL
LINE	DESCRIPTION	<u>FY 2009</u>
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$223,747,655
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$1,753,777
_	OHCA DEFINED NET REVENUE	\$225,501,432
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$14,427,091
3	CALCULATED NET REVENUE	\$239,928,523
		Ψ 2 55,520,525
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$239,928,524
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$844,914,267
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$844,914,267
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$844,914,262
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$5
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,129,408
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,463,750
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS	\$17,593,158
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$17,593,158
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

	TWELVE MONTHS ACT	TUAL FILING			
	FISCAL YEA	AR 2009			
	REPORT 650 - HOSPITAL UNC	OMPENSATED CAP	RE		
(1)	(2)	(2)	(4)	(5)	(6)
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) AMOUNT	(6) %
	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENC
	DESCRIPTION	<u> </u>	<u>F1 2009</u>	DIFFERENCE	DIFFERENC
Α.	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	501	498	(3)	-1
2	Number of Approved Applicants	385	376	(9)	-2
3	Total Charges (A)	\$2,588,984	\$1,809,921	(\$779,063)	-30
4	Average Charges	\$6,725	\$4,814	(\$1,911)	-28
5	Ratio of Cost to Charges (RCC)	0.323012	0.314690	(0.008322)	-3
6	Total Cost	\$836,273	\$569,564	(\$266,709)	-32
7	Average Cost	\$2,172	\$1,515	(\$657)	-30
8	Charity Care - Inpatient Charges	\$1,942,042	\$1,222,220	(\$719,822)	-37
9	Charity Care - Outpatient Charges (Excludes ED Charges)	330,966	203,011	(127,955)	-39
10	Charity Care - Emergency Department Charges	315,976	384,690	68,714	22
11	Total Charges (A)	\$2,588,984	\$1,809,921	(\$779,063)	-30
12	Charity Care - Number of Patient Days	808	385	(423)	-52
13	Charity Care - Number of Discharges	180	167	(13)	-7
14	Charity Care - Number of Outpatient ED Visits	251	322	71	28
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	335	242	(93)	-28
В.	Hospital Bad Debts (from HRS Report 500)				
<u>в.</u> 1	Bad Debts - Inpatient Services	\$8,327,236	\$7,302,938	(\$1,024,298)	-12
2	Bad Debts - Mpatient Services (Excludes ED Bad Debts)	2,629,280	2,455,792	(173,488)	-7
3	Bad Debts - Emergency Department	6,761,007	4,560,757	(2,200,250)	-33
4	Total Bad Debts (A)	\$17,717,523	\$14,319,487	(\$3,398,036)	-19
~					
C.	Hospital Uncompensated Care (from HRS Report 500)	¢0,500,004	¢4,000,004	(\$770.000)	0.0
1	Charity Care (A)	\$2,588,984	\$1,809,921	(\$779,063)	-30
2	Bad Debts (A) Total Uncompensated Care (A)	17,717,523 \$20,306,507	14,319,487 \$16,129,408	(3,398,036) (\$4,177,099)	-19 -21
		+,,	+,,	(+ ,,,,	
4	Uncompensated Care - Inpatient Services	\$10,269,278	\$8,525,158	(\$1,744,120)	-17
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	2,960,246	2,658,803	(301,443)	-10
6	Uncompensated Care - Emergency Department	7,076,983	4,945,447	(2,131,536)	-30
7	Total Uncompensated Care (A)	\$20,306,507	\$16,129,408	(\$4,177,099)	-21

		WATERBURY HOSP	TAL		
		TWELVE MONTHS ACTUA			
		FISCAL YEAR 2	2009		
	REPORT 685 - HOSPITAL NON-	GOVERNMENT GROSS RE	VENUE, CONTRACTUAL	ALLOWANCES,	
	ACCRUEI	PAYMENTS AND DISCO	UNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$237,128,412	\$275,365,397	\$38,236,985	16%
2	Total Contractual Allowances	\$149,828,883	\$185,714,877	\$35,885,994	24%
	Total Accrued Payments (A)	\$87,299,529	\$89,650,520	\$2,350,991	3%
	Total Discount Percentage	63.18%	67.44%	4.26%	7%
(A) A	Accrued Payments associated with Non-Governm	ent Contractual Allowance	es must exclude any redu	ction for Uncompens	sated Care.

	WATERBURY HOSI	PITAL					
	TWELVE MONTHS ACTU						
	REPORT 700 - STATISTICAL ANALYSIS OF HO	SPITAL REVENUE AND E	XPENSE				
(1)	(2)	(3)	(4)	(5)			
LINE	DESCRIPTION	ACTUAL <u>FY 2007</u>	ACTUAL <u>FY 2008</u>	ACTUAL <u>FY 2009</u>			
A.	Gross and Net Revenue	¢440.707.500	¢447.500.044	\$504 300 054			
1	Inpatient Gross Revenue	\$412,787,592	\$447,560,841	\$534,788,651			
2	Outpatient Gross Revenue	\$248,612,781	\$262,008,277	\$310,125,616			
3	Total Gross Patient Revenue	\$661,400,373	\$709,569,118	\$844,914,267			
4	Net Patient Revenue	\$222,219,540	\$221,441,319	\$239,928,524			
В.	Total Operating Expenses						
1	Total Operating Expense	\$240,315,931	\$245,407,419	\$253,532,594			
C.	Utilization Statistics						
1	Patient Days	71,532	70,997	67,682			
2	Discharges	14,584	14,736	13,916			
3	Average Length of Stay	4.9	4.8	4.9			
4	Equivalent (Adjusted) Patient Days (EPD)	114,614	112,560	106,931			
0	Equivalent (Adjusted) Discharges (ED)	23,368	23,363	21,986			
D.	Case Mix Statistics						
1	Case Mix Index	1.22497	1.32525	1.52936			
2	Case Mix Adjusted Patient Days (CMAPD)	87,625	94,089	103,510			
3	Case Mix Adjusted Discharges (CMAD)	17,865	19,529	21,283			
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	140,399	149,170	163,536			
5	Case Mix Adjusted Equivalent Discharges (CMAED)	28,625	30,961	33,624			
E.	Gross Revenue Per Statistic						
 1	Total Gross Revenue per Patient Day	\$9,246	\$9,994	\$12,484			
2	Total Gross Revenue per Discharge	\$45,351	\$48,152	\$60,715			
3	Total Gross Revenue per EPD	\$5,771	\$6,304	\$7,901			
4	Total Gross Revenue per ED	\$28,304	\$30,372	\$38,430			
5	Total Gross Revenue per CMAEPD	\$4,711	\$4,757	\$5,167			
6	Total Gross Revenue per CMAED	\$23,106	\$22,918	\$25,128			
7	Inpatient Gross Revenue per EPD	\$3,602	\$3,976	\$5,001			
8	Inpatient Gross Revenue per ED	\$3,602	\$19,157	\$3,001			

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILI	NG		
	FISCAL YEAR 2009			
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL	REVENUE AND E	XPENSE	
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL <u>FY 2007</u>	ACTUAL <u>FY 2008</u>	ACTUAL <u>FY 2009</u>
F.	Net Revenue Per Statistic	.	AA A A	* • = +=
1	Net Patient Revenue per Patient Day	\$3,107	\$3,119	\$3,545
2	Net Patient Revenue per Discharge	\$15,237	\$15,027	\$17,241
3	Net Patient Revenue per EPD	\$1,939	\$1,967	\$2,244
4	Net Patient Revenue per ED	\$9,510	\$9,478	\$10,913
5	Net Patient Revenue per CMAEPD	\$1,583	\$1,484	\$1,467
6	Net Patient Revenue per CMAED	\$7,763	\$7,152	\$7,136
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$3,360	\$3,457	\$3,746
2	Total Operating Expense per Discharge	\$16,478	\$16,654	\$18,219
3	Total Operating Expense per EPD	\$2,097	\$2,180	\$2,371
4	Total Operating Expense per ED	\$10,284	\$10,504	\$11,532
5	Total Operating Expense per CMAEPD	\$1,712	\$1,645	\$1,550
6	Total Operating Expense per CMAED	\$8,395	\$7,926	\$7,540
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$32,761,682	\$33,893,598	\$33,017,306
2	Nursing Fringe Benefits Expense	\$8,788,546	\$9,032,365	\$8,798,841
3	Total Nursing Salary and Fringe Benefits Expense	\$41,550,228	\$42,925,963	\$41,816,147
I.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$13,857,628	\$14,395,769	\$14,446,788
2	Physician Fringe Benefits Expense	\$3,717,404	\$3,836,354	\$3,948,037
3	Total Physician Salary and Fringe Benefits Expense	\$17,575,032	\$18,232,123	\$18,394,825
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$59,117,092	\$60,406,391	\$58,531,193
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$15,858,563	\$16,097,807	\$17,348,785
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$74,975,655	\$76,504,198	\$75,879,978
К.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$105,736,402	\$108,695,758	\$105,995,287
2	Total Fringe Benefits Expense	\$28,364,513	\$28,966,526	\$30,095,663
3	Total Salary and Fringe Benefits Expense	\$134,100,915	\$137,662,284	\$136,090,950