	WATERBURY HOS	:PITAI			
	TWELVE MONTHS ACT				
	FISCAL YEAR				
	REPORT 100 - HOSPITAL BALANCE		ATION		
/4\				(E)	(6)
(1)	(2)	(3) FY 2009	(4) FY 2010	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	<u>ASSETS</u>				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$14,657,330	\$16,243,349	\$1,586,019	11%
2	Short Term Investments	\$0	\$0	\$0	0%
		·	·	·	
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$30,390,471	\$27,764,677	(\$2,625,794)	-9%
4	Current Assets Whose Use is Limited for Current Liabilities	\$573,887	\$582,693	\$8,806	2%
5	Due From Affiliates	\$902,115	\$752,190	(\$149,925)	-17%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$584,339	\$634,324	\$49,985	9%
8	Prepaid Expenses	\$1,248,474	\$1,161,757	(\$86,717)	-7%
9	Other Current Assets	\$1,208,850	\$1,773,357	\$564,507	47%
	Total Current Assets	\$49,565,466	\$48,912,347	(\$653,119)	-1%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$37,864,978	\$39,561,090	\$1,696,112	4%
2	Board Designated for Capital Acquisition	\$2,673,155	\$2,787,502	\$114,347	4%
3	Funds Held in Escrow	\$2,003,239	\$2,020,082	\$16,843	1%
4	Other Noncurrent Assets Whose Use is Limited	\$16,843	\$0	(\$16,843)	-100%
	Total Noncurrent Assets Whose Use is Limited:	\$42,558,215	\$44,368,674	\$1,810,459	4%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$9,558,064	\$12,235,187	\$2,677,123	28%
7	Other Noncurrent Assets	\$6,278,831	\$6,407,782	\$128,951	2%
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C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$240,623,424	\$243,761,756	\$3,138,332	1%
2	Less: Accumulated Depreciation	\$197,380,797	\$206,294,646	\$8,913,849	5%
	Property, Plant and Equipment, Net	\$43,242,627	\$37,467,110	(\$5,775,517)	-13%
3	Construction in Progress	\$93,916	\$1,070,830	\$976,914	1040%
	Total Net Fixed Assets	\$43,336,543	\$38,537,940	(\$4,798,603)	
	Total Assets	\$151,297,119	\$150,461,930	(\$835,189)	-1%

	WATERBUR'	Y HOSPITAL			
	TWELVE MONTHS	S ACTUAL FILING			
	FISCAL	YEAR 2010			
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION				
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<u>BEGONII HON</u>	AOTOAL	AOTOAL	DITTERCITOE	DIFFERENCE
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
	Accounts Payable and Accrued Expenses	\$14,976,895	\$18,516,046	\$3,539,151	24%
	Salaries, Wages and Payroll Taxes	\$7,919,991	\$7,688,690	(\$231,301)	-3%
	Due To Third Party Payers	\$1,023,178	\$230,310	(\$792,868)	-77%
	Due To Affiliates	\$0	\$0	\$0	0%
	Current Portion of Long Term Debt	\$820,000	\$865,000	\$45,000	5%
	Current Portion of Notes Payable	\$83,754	\$64,625	(\$19,129)	-23%
	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$24,823,818	\$27,364,671	\$2,540,853	10%
B.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$18,984,928	\$18,142,716	(\$842,212)	-4%
2	Notes Payable (Net of Current Portion)	\$64,625	\$0	(\$64,625)	-100%
	Total Long Term Debt	\$19,049,553	\$18,142,716	(\$906,837)	-5%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$14,365,164	\$14,200,723	(\$164,441)	-1%
	Total Long Term Liabilities	\$33,414,717	\$32,343,439	(\$1,071,278)	-3%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$44,636,663	\$40,084,846	(\$4,551,817)	-10%
2	Temporarily Restricted Net Assets	\$7,764,952	\$8,315,873	\$550,921	7%
3	Permanently Restricted Net Assets	\$40,656,969	\$42,353,101	\$1,696,132	4%
	Total Net Assets	\$93,058,584	\$90,753,820	(\$2,304,764)	-2%
	Total Liabilities and Net Assets	\$151,297,119	\$150,461,930	(\$835,189)	-1%
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	WATERBU	IRY HOSPITAL			
	TWELVE MONT	HS ACTUAL FILING			
	FISCA	AL YEAR 2010			
	REPORT 150 - HOSPITAL STATEN	IENT OF OPERATION	S INFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<u>SECONI HON</u>	71010712	71010/12	DITTERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$844,914,262	\$815,767,934	(\$29,146,328)	-3%
2				,,	-3%
	Less: Allowances	\$601,712,067	\$583,675,151	(\$18,036,916)	-3% -6%
3	Less: Charity Care	\$3,273,671	\$3,081,465 \$0	(\$192,206)	-6% 0%
4	Less: Other Deductions Total Net Patient Revenue	\$239,928,524	\$229,011,318	\$0 (\$10,917,206)	-5%
5	Other Operating Revenue			V: , , ,	-30%
5 6	Net Assets Released from Restrictions	\$3,509,420 \$5,108,393	\$2,460,675 \$5,405,414	(\$1,048,745) \$297,021	-30% 6%
0	Total Operating Revenue	\$248,546,337	\$236,877,407	(\$11,668,930)	-5%
	Total Operating Nevertue	\$246,340,337	\$230,677,407	(\$11,000,930)	-5%
В.	Operating Expenses:				
1	Salaries and Wages	\$105,995,287	\$98,804,093	(\$7,191,194)	-7%
2	Fringe Benefits	\$30,095,663	\$28,853,399	(\$1,242,264)	-4%
3	Physicians Fees	\$10,486,600	\$11,608,202	\$1,121,602	11%
4	Supplies and Drugs	\$37,120,926	\$33,658,593	(\$3,462,333)	-9%
5	Depreciation and Amortization	\$9,056,904	\$9,226,011	\$169,107	2%
6	Bad Debts	\$14,319,487	\$14,985,815	\$666,328	5%
7	Interest	\$1,281,962	\$1,188,449	(\$93,513)	-7%
8	Malpractice	\$4,566,483	\$3,538,376	(\$1,028,107)	-23%
9	Other Operating Expenses	\$40,609,282	\$35,656,638	(\$4,952,644)	-12%
	Total Operating Expenses	\$253,532,594	\$237,519,576	(\$16,013,018)	-6%
	Income/(Loss) From Operations	(\$4,986,257)	(\$642,169)	\$4,344,088	-87%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,617,478	\$684,910	(\$932,568)	-58%
2	Gifts, Contributions and Donations	\$434,411	\$157,191	(\$277,220)	-64%
3	Other Non-Operating Gains/(Losses)	\$1,014,797	\$127,424	(\$887,373)	-87%
	Total Non-Operating Revenue	\$3,066,686	\$969,525	(\$2,097,161)	-68%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$1,919,571)	\$327,356	\$2,246,927	-117%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$1,919,571)	\$327,356	\$2,246,927	-117%
	Principal Payments	\$1,162,266	\$1,334,228	\$171,962	15%

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

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2009	FY 2010	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
					,
I.	GROSS REVENUE BY PAYER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$267,926,170	\$245,851,820	(\$22,074,350)	-8%
2	MEDICARE MANAGED CARE	\$38,759,660	\$43,441,660	\$4,682,000	12%
3	MEDICAID	\$34,349,834	\$32,629,630	(\$1,720,204)	
4	MEDICAID MANAGED CARE	\$21,928,723	\$25,051,714	\$3,122,991	14%
5	CHAMPUS/TRICARE	\$803,012	\$433,901	(\$369,111)	-46%
6	COMMERCIAL INSURANCE	\$69,311,069	\$65,748,935	(\$3,562,134)	
7	NON-GOVERNMENT MANAGED CARE	\$68,252,270	\$70,842,780	\$2,590,510	4%
8	WORKER'S COMPENSATION	\$4,609,867	\$4,858,298	\$248,431	5%
9	SELF- PAY/UNINSURED	\$8,867,028	\$7,496,163	(\$1,370,865)	-15%
10	SAGA	\$19,981,018	\$21,017,773	\$1,036,755	5%
11	OTHER	\$0	\$0 \$547,070,674	\$0	0%
В	TOTAL INPATIENT GROSS REVENUE	\$534,788,651	\$517,372,674	(\$17,415,977)	-3%
B .	OUTPATIENT GROSS REVENUE	¢02.040.002	¢02 020 262	(\$4.040.604)	40/
	MEDICARE TRADITIONAL	\$83,849,883	\$82,839,262	(\$1,010,621)	-1%
3	MEDICARE MANAGED CARE	\$14,191,150	\$16,264,113	\$2,072,963	15%
4	MEDICAID	\$18,014,339	\$15,701,399	(\$2,312,940)	-13%
	MEDICAID MANAGED CARE	\$33,242,687	\$35,299,813	\$2,057,126	6%
5	CHAMPUS/TRICARE COMMERCIAL INSURANCE	\$463,890	\$439,975	(\$23,915)	-5%
7	NON-GOVERNMENT MANAGED CARE	\$62,842,967 \$63.503.900	\$53,929,716 \$62,254,649	(\$8,913,251)	-14% -2%
8	WORKER'S COMPENSATION	\$6,845,324	\$62,254,649	(\$1,249,251) (\$93,653)	-2% -1%
9	SELF- PAY/UNINSURED	\$11,129,535	\$8,854,899	(\$2,274,636)	-1%
10	SAGA	\$16,041,941	\$16,059,756	\$17,815	-20% 0%
11	OTHER	\$10,041,941	\$10,039,730	\$17,813	0%
- ' '	TOTAL OUTPATIENT GROSS REVENUE	\$310,125,616	\$298,395,253	(\$11,730,363)	-4%
	TOTAL OUT ATIENT GROSS REVEROE	φ310,123,010	Ψ 2 90,393,233	(\$11,730,303)	-4 /0
c.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$351,776,053	\$328,691,082	(\$23,084,971)	-7%
_	MEDICARE MANAGED CARE	\$52,950,810	\$59,705,773	\$6,754,963	13%
3	MEDICAID	\$52,364,173	\$48,331,029	(\$4,033,144)	-8%
4	MEDICAID MANAGED CARE	\$55,171,410	\$60,351,527	\$5,180,117	9%
5	CHAMPUS/TRICARE	\$1,266,902	\$873,876	(\$393,026)	-31%
6	COMMERCIAL INSURANCE	\$132,154,036	\$119,678,651	(\$12,475,385)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$131,756,170	\$133,097,429	\$1,341,259	1%
8	WORKER'S COMPENSATION	\$11,455,191	\$11,609,969	\$154,778	1%
9	SELF- PAY/UNINSURED	\$19,996,563	\$16,351,062	(\$3,645,501)	-18%
10	SAGA	\$36,022,959	\$37,077,529	\$1,054,570	3%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$844,914,267	\$815,767,927	(\$29,146,340)	-3%
II.	NET REVENUE BY PAYER				
A.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$75,908,323	\$69,217,001	(\$6,691,322)	-9%
2	MEDICARE MANAGED CARE	\$9,408,169	\$11,704,943	\$2,296,774	24%
3	MEDICAID	\$7,306,089	\$6,135,697	(\$1,170,392)	-16%
4	MEDICAID MANAGED CARE	\$4,792,305	\$4,557,807	(\$234,498)	-5%
5	CHAMPUS/TRICARE	\$106,979	\$100,569	(\$6,410)	-6%
6	COMMERCIAL INSURANCE	\$25,656,703	\$25,552,899	(\$103,804)	0%
7	NON-GOVERNMENT MANAGED CARE	\$21,528,178	\$21,481,559	(\$46,619)	0%
8	WORKER'S COMPENSATION	\$3,409,742	\$3,717,991	\$308,249	9%
9	SELF- PAY/UNINSURED	\$1,031,285	\$105,638	(\$925,647)	-90%
10	SAGA	\$1,538,371	\$2,291,206	\$752,835	49%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$150,686,144	\$144,865,310	(\$5,820,834)	-4%

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WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2010 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	OUTDATION THE DEVIANUE				
	OUTPATIENT NET REVENUE	£47,400,004	Ф45 0C4 C4C	(\$4.040.070)	00/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$17,480,294 \$2,625,239	\$15,861,616 \$2,734,587	(\$1,618,678) \$109,348	-9% 4%
3	MEDICARE MANAGED CARE MEDICAID	\$3,009,672	\$2,734,567	(\$694,462)	-23%
4	MEDICAID MANAGED CARE	\$6,515,498	\$6,478,768	(\$36,730)	-1%
5	CHAMPUS/TRICARE	\$137,976	\$97,339	(\$40,637)	-29%
6	COMMERCIAL INSURANCE	\$18,989,146	\$17,988,289	(\$1,000,857)	-5%
7	NON-GOVERNMENT MANAGED CARE	\$14,213,260	\$14,021,147	(\$192,113)	-1%
8	WORKER'S COMPENSATION	\$5,047,020	\$5,657,003	\$609,983	12%
9	SELF- PAY/UNINSURED	\$3,642,339	\$608,463	(\$3,033,876)	-83%
10	SAGA	\$1,401,067	\$1,314,373	(\$86,694)	-6%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$73,061,511	\$67,076,795	(\$5,984,716)	-8%
	TOTAL NET DEVENUE				
<u>C.</u>	TOTAL NET REVENUE MEDICARE TRADITIONAL	\$93,388,617	\$85,078,617	(\$8,310,000)	-9%
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$12,033,408	\$14,439,530	\$2,406,122	20%
3	MEDICAID CARE	\$10,315,761	\$8,450,907	(\$1,864,854)	-18%
4	MEDICAID MANAGED CARE	\$11,307,803	\$11,036,575	(\$271,228)	-2%
5	CHAMPUS/TRICARE	\$244,955	\$197,908	(\$47,047)	-19%
6	COMMERCIAL INSURANCE	\$44,645,849	\$43,541,188	(\$1,104,661)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$35,741,438	\$35,502,706	(\$238,732)	-1%
8	WORKER'S COMPENSATION	\$8,456,762	\$9,374,994	\$918,232	11%
9	SELF- PAY/UNINSURED	\$4,673,624	\$714,101	(\$3,959,523)	-85%
10	SAGA	\$2,939,438	\$3,605,579	\$666,141	23%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$223,747,655	\$211,942,105	(\$11,805,550)	-5%
III.	STATISTICS BY PAYER				
	<u>STATIONES BITTATER</u>				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	5,681	5,217	(464)	-8%
2	MEDICARE MANAGED CARE	815	860	45	6%
3	MEDICAID	950	926	(24)	-3%
4	MEDICAID MANAGED CARE	1,413	1,485	72	5%
5	CHAMPUS/TRICARE	15	10	(5)	-33%
6	COMMERCIAL INSURANCE	2,030	1,709	(321)	-16%
7				` /	
	NON-GOVERNMENT MANAGED CARE	2,145	1,955	(190)	-9%
8	WORKER'S COMPENSATION	84	1,955 88	(190) 4	5%
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED	84 265	1,955 88 216	(190) 4 (49)	5% -18%
9 10	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	84 265 518	1,955 88 216 580	(190) 4 (49) 62	5% -18% 12%
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER	84 265 518 0	1,955 88 216 580	(190) 4 (49) 62 0	5% -18% 12% 0%
9 10 11	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES	84 265 518	1,955 88 216 580	(190) 4 (49) 62	5% -18% 12%
9 10	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS	84 265 518 0 13,916	1,955 88 216 580 0 13,046	(190) 4 (49) 62 0 (870)	5% -18% 12% 0% -6%
9 10 11 B .	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES	84 265 518 0	1,955 88 216 580	(190) 4 (49) 62 0	5% -18% 12% 0%
9 10 11 B .	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL	84 265 518 0 13,916	1,955 88 216 580 0 13,046	(190) 4 (49) 62 0 (870) (5,760)	5% -18% 12% 0% - 6%
9 10 11 B. 1 2 3 4	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE	84 265 518 0 13,916 34,165 4,462	1,955 88 216 580 0 13,046 28,405 4,489	(190) 4 (49) 62 0 (870) (5,760)	5% -18% 12% 0% -6% -17% 1% -17% 10%
9 10 11 B . 1 2	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416	5% -18% 12% 0% -6% -17% 1% -17% 10% -65%
9 10 11 B. 1 2 3 4 5 6	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119 7,600	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781 42 6,796	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416 (77) (804)	5% -18% 12% 0% -6% -17% 1% -17% 10% -65% -11%
9 10 11 B. 1 2 3 4 5 6	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119 7,600 7,356	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781 42 6,796 6,363	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416 (77) (804) (993)	5% -18% 12% 0% -6% -17% 1% -17% 10% -65% -11% -13%
9 10 11 B. 1 2 3 4 5 6 7	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119 7,600 7,356 266	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781 42 6,796 6,363 276	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416 (77) (804) (993) 10	5% -18% -12% -6% -6% -17% -17% -17% -11% -13% -13% -4%
9 10 11 B. 1 2 3 4 5 6 7 8	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119 7,600 7,356 266 1,146	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781 42 6,796 6,363 276 824	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416 (77) (804) (993) 10 (322)	5% -18% -12% -6% -6% -17% -17% -10% -65% -11% -13% -4% -28%
9 10 11 B. 1 2 3 4 5 6 7 8 9	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119 7,600 7,356 266 1,146 2,625	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781 42 6,796 6,363 276 824 2,664	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416 (77) (804) (993) 10 (322) 39	5% -18% -12% -6% -6% -17% -17% -17% -11% -13% -4% -28% -1%
9 10 11 B. 1 2 3 4 5 6 7	WORKER'S COMPENSATION SELF- PAY/UNINSURED SAGA OTHER TOTAL DISCHARGES PATIENT DAYS MEDICARE TRADITIONAL MEDICARE MANAGED CARE MEDICAID MEDICAID MANAGED CARE CHAMPUS/TRICARE COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION SELF- PAY/UNINSURED	84 265 518 0 13,916 34,165 4,462 5,578 4,365 119 7,600 7,356 266 1,146	1,955 88 216 580 0 13,046 28,405 4,489 4,631 4,781 42 6,796 6,363 276 824	(190) 4 (49) 62 0 (870) (5,760) 27 (947) 416 (77) (804) (993) 10 (322)	5% -18% -12% -6% -6% -17% -17% -10% -65% -11% -13% -4% -28%

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WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2010 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

Country Coun	(5) (6)	(4)	(3)	(2)	(1)
MEDICARE TRADITIONAL 58,701 56,054 (2,647 2 MEDICARE TRADITIONAL 58,701 56,054 (2,647 2 MEDICARE MANAGED CARE 8,770 9,777 1,000 3 MEDICARE MANAGED CARE 26,960 27,847 887 4 MEDICAID MANAGED CARE 26,960 27,847 887 5 CHAMPUS/TRICARE 30 18 (21 2 2 2 2 2 2 2 2 2					
MEDICARE TRADITIONAL 58,701 56,054 (2,647)	DIFFERENCE DIFFERENCE	ACTUAL	ACTUAL	DESCRIPTION	LINE
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MEDICAID MANAGED CARE	· · ·		,		
CHAMPUSTRICARE					
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B WORKER'S COMPENSATION		,	,		
SELF- PAY/UNINSURED	() /				
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OTHER		,			
TOTAL OUTPATIENT VISITS	\	,	, , , , , , , , , , , , , , , , , , ,		
N. EMERGENCY DEPARTMENT OUTPATIENT BY PAYER			-	-	
A. EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE 1 MEDICARE TRADITIONAL \$23,790,989 \$22,936,805 \$854,184 2 MEDICAID \$8,755,784 \$7,907,888 \$847,896 \$3,333,507 \$3,698,099 \$364,592 \$3 MEDICAID \$8,755,784 \$7,907,888 \$847,896 \$4 MEDICAID \$8,755,784 \$7,907,888 \$847,896 \$5 CHAMPUS/TRICARE \$16,793,801 \$18,799,530 \$2,005,729 \$5 CHAMPUS/TRICARE \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	(12,000)	102,200	204,020	TOTAL GOTT ATTENT VIGITO	
MEDICARE TRADITIONAL \$23,790,989 \$22,936,805 \$854,184				EMERGENCY DEPARTMENT OUTPATIENT BY PAYER	IV.
MEDICARE TRADITIONAL \$23,790,989 \$22,936,805 \$854,184	+ + + + + + + + + + + + + + + + + + + +		NUE	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVE	A.
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	(121) -2%				
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	83 29				
	221 5%				
	0 0%	,			
TOTAL EMERGENCY DEPARTMENT OUTPATIENT			,		
VISITS 49,237 49,393 156	156 0%	49,393	49,237	VISITS	

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
1.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$33,017,306	\$31,968,760	(\$1,048,546)	-3%
2	Physician Salaries	\$14,446,788	\$8,044,219	(\$6,402,569)	-44%
3	Non-Nursing, Non-Physician Salaries	\$58,531,193	\$58,791,114	\$259,921	0%
	Total Salaries & Wages	\$105,995,287	\$98,804,093	(\$7,191,194)	-7%
В.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$8,798,841	\$9,335,720	\$536,879	6%
2	Physician Fringe Benefits	\$3,948,037	\$2,349,124	(\$1,598,913)	-40%
3	Non-Nursing, Non-Physician Fringe Benefits	\$17,348,785	\$17,168,555	(\$180,230)	-1%
	Total Fringe Benefits	\$30,095,663	\$28,853,399	(\$1,242,264)	-4%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$582,277	\$648,834	\$66,557	11%
2	Physician Fees	\$10,486,600	\$11,608,202	\$1,121,602	11%
3	Non-Nursing, Non-Physician Fees	\$360,266	\$219,763	(\$140,503)	-39%
	Total Contractual Labor Fees	\$11,429,143	\$12,476,799	\$1,047,656	9%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$29,649,204	\$26,740,221	(\$2,908,983)	-10%
2	Pharmaceutical Costs	\$7,471,722	\$6,918,372	(\$553,350)	-7%
	Total Medical Supplies and Pharmaceutical Cost	\$37,120,926	\$33,658,593	(\$3,462,333)	-9%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$3,080,296	\$2,998,382	(\$81,914)	-3%
2	Depreciation-Equipment	\$5,824,352	\$5,707,547	(\$116,805)	-2%
3	Amortization	\$152,256	\$520,082	\$367,826	242%
	Total Depreciation and Amortization	\$9,056,904	\$9,226,011	\$169,107	2%
F.	Bad Debts:				
1	Bad Debts	\$14,319,487	\$14,985,815	\$666,328	5%
		, ,	, , ,	, ,	
G.	Interest Expense:				
1	Interest Expense	\$1,281,962	\$1,188,449	(\$93,513)	-7%
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$4,566,483	\$3,538,376	(\$1,028,107)	-23%
I.	Utilities:				
1	Water	\$266,882	\$234,580	(\$32,302)	-12%
2	Natural Gas	\$1,341,526	\$1,270,286	(\$71,240)	-5%
3	Oil	\$22,287	\$22,283	(\$4)	0%
4	Electricity	\$1,771,594	\$1,924,957	\$153,363	9%
5	Telephone	\$261,104	\$263,540	\$2,436	1%
6	Other Utilities Total Utilities	\$0 \$3,663,393	\$0 \$3,715,646	\$0 \$52,253	0% 1%
	Total Othities	ψυ,υυυ,υσυ	ψ3,713,040	Ψ 32,233	170
J.	Business Expenses:	0/====		*****	
1	Accounting Fees	\$173,012	\$197,916	\$24,904	14%
2	Legal Fees	\$828,971	\$737,229	(\$91,742)	-11%
3 4	Consulting Fees Dues and Membership	\$12,874,775 \$410,035	\$3,353,342 \$372,137	(\$9,521,433) (\$37,898)	-74% -9%
5	Equipment Leases	\$1,832,746	\$1,775,534	(\$37,898)	-9%
6	Building Leases	\$753,361	\$785,428	\$32,067	4%
7	Repairs and Maintenance	\$2,151,235	\$2,470,458	\$319,223	15%
8	Insurance	\$340,579	\$312,904	(\$27,675)	-8%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

Process	(6)		(5)	(4)	(3)	(2)	(1)
9 Travel	%						
10 Conferences \$214.267 \$212.030 \$2.2377.51 11 Property Tax \$34.662 \$174.437 \$139.775 12 General Supplies \$3,120,359 \$2,939.202 \$(818.1577) 13 Licenses and Subscriptions \$0 \$0 \$0 \$0 14 Postage and Shipping \$146,773 \$137,973 \$(88.800) 15 Advertising \$337,173 \$714,990 \$337,817 16 Other Business Expenses \$11.415,513 \$12,570,210 \$1,154.697 Total Business Expenses \$34,782,569 \$26,612,697 \$67,869,872	FERENCE	<u>D</u>	<u>DIFFERENCE</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	DESCRIPTION	LINE
10 Conferences \$214.267 \$212.030 \$2.2377.51 11 Property Tax \$34.662 \$174.437 \$139.775 12 General Supplies \$3,120,359 \$2,939.202 \$(818.1577) 13 Licenses and Subscriptions \$0 \$0 \$0 \$0 14 Postage and Shipping \$146,773 \$137,973 \$(88.800) 15 Advertising \$337,173 \$714,990 \$337,817 16 Other Business Expenses \$11.415,513 \$12,570,210 \$1,154.697 Total Business Expenses \$34,782,569 \$26,612,697 \$67,869,872							
11 Property Tax	46%						
12 General Supplies \$3,120,359 \$2,939,202 \$181,157 13 Licenses and Subscriptions \$0 \$0 \$0 14 Postage and Shipping \$146,773 \$137,973 \$88,800 15 Advertising \$377,173 \$714,990 \$337,817 16 Other Business Expenses \$11,415,513 \$12,570,210 \$1,154,697 Total Business Expenses \$34,782,569 \$26,912,697 \$(\$7,669,872) K. Other Operating Expenses \$1,207,777 \$4,159,698 \$2,938,921 Total Operating Expenses \$1,220,777 \$4,159,698 \$2,938,921 Total Operating Expenses - All Expense Categories \$253,532,594 \$237,519,576 \$(\$16,013,018) "A K. The total operating expenses amount above must agree with the total operating expenses amount on I II. OPERATING EXPENSE BY DEPARTMENT	-1%						
13 Licenses and Subscriptions \$0 \$0 14 Postage and Shipping \$146,773 \$137,973 \$38,800) 15 Arvertising \$377,173 \$714,990 \$337,817 16 Other Business Expenses \$11,415,513 \$12,570,210 \$11,54,697 17 Total Business Expenses \$34,782,569 \$26,912,697 \$(\$7,669,872) 18 Wiscollaneous Other Operating Expenses \$34,782,569 \$26,912,697 \$(\$7,669,872) 19 Wiscollaneous Other Operating Expenses \$1,220,777 \$4,159,698 \$2,938,921 10 Total Operating Expenses - All Expense Categories* \$253,532,594 \$237,519,576 \$(\$16,013,018) 10 **A** K. The total operating expenses amount above must agree with the total operating expenses amount on I 11. OPERATING EXPENSE BY DEPARTMENT	403%						
14 Postage and Shipping \$146,773 \$137,973 \$88,800 \$156,47415513 \$12,570,210 \$1,154,697 \$1,145,513 \$12,570,210 \$1,154,697 \$1,145,513 \$12,570,210 \$1,154,697 \$1,145,513 \$12,570,210 \$1,154,697 \$	-6%						
15 Adventising \$377,173 \$714,990 \$337,817 16 Other Business Expenses \$11,415,513 \$12,570,210 \$1,154,697 17 Total Business Expenses \$34,782,569 \$26,912,697 \$(\$7,869,872) 18 Miscellaneous Other Operating Expenses \$1,220,777 \$4,159,698 \$2,938,921 19 Total Operating Expenses - All Expense Categories* \$253,532,594 \$237,519,576 \$(\$16,013,018) 10 "A- K. The total operating expenses amount above must agree with the total operating expenses amount on I 11 OPERATING EXPENSE BY DEPARTMENT 12 General Administration \$26,601,549 \$28,511,639 \$1,910,090 2 General Administration \$26,601,549 \$28,511,639 \$1,910,090 3 Patient Billing & Collection \$1,764,369 \$1,711,486 \$(\$52,911) 4 Admitting / Registration Office \$1,764,369 \$1,711,486 \$(\$52,911) 5 Data Processing \$7,098,420 \$7,936,887 \$838,467 6 Communications \$333,139 \$742,171 \$359,032 9 Purbasing \$990,869 \$991,769 \$10,900 10 Dietary and Caleteria \$3,237,703 \$2,973,208 \$24,978 11 Houskeeping \$440,70,98 \$44,81,885 \$74,787 12 Laundry & Linen \$1,148,497 \$1,136,096 \$1,679,478 13 Operation of Plant \$55,04,218 \$669,971 \$165,091,701 14 Security \$1,206,563 \$1,373,863 \$137,300 17 Pharmacy Department \$9,427,206 \$9,52,229 \$10,940,544 18 Central Sterile Supply \$1,236,563 \$1,573,863 \$137,300 19 Other General Services \$11,94,966 \$1,764,969 \$1,7718,551 19 Other Professional Services \$11,94,969 \$1,960,969 \$1,9718,551 10 Other Professional Services \$1,764,969 \$1,960,969 \$1,960,969 \$1,9718,551 11 Other Professional Services \$1,764,969 \$1,960,968 \$1,9718,551 12 Other Professional Serv	0%						
Total Dusiness Expenses \$11,415,513 \$12,570,210 \$1,154,697	-6%						
Total Business Expenses \$34,782,569 \$26,912,697 \$(\$7,869,872)	90%						
No. Chief Operating Expenses St. 220,777 \$4,159,698 \$2,938,921	10%						16
Total Operating Expenses	-23%	<u>) </u>	(\$7,869,872)	\$26,912,697	\$34,782,569	Total Business Expenses	
Total Operating Expenses		-				01 0 11 5	17
Total Operating Expenses - All Expense Categories* \$253,532,594 \$237,519,576 (\$16,013,018)		_	A A A A A A A A A A	* 4 	^ 4 000 ===		
**A- K. The total operating expenses amount above must agree with the total operating expenses amount on I II. OPERATING EXPENSE BY DEPARTMENT General Administration	241%	-	\$2,938,921	\$4,159,698	\$1,220,777	Miscellaneous Other Operating Expenses	1
A K. The total operating expenses amount above must agree with the total operating expenses amount on I		_	(\$10.010.010)	**	****		
II. OPERATING EXPENSE BY DEPARTMENT	-6%)	(\$16,013,018)	\$237,519,576	\$253,532,594	Total Operating Expenses - All Expense Categories*	
II. OPERATING EXPENSE BY DEPARTMENT		Щ.					
A. General Services:	Report 15	<u>ount</u>	ng expenses amou	the total operatin	e must agree with	*A K. The total operating expenses amount abov	
A. General Services:		\bot					
A. General Services:		Щ					
General Administration						OPERATING EXPENSE BY DEPARTMENT	II.
General Administration		Щ					
General Accounting							A.
3	7%						
4 Admitting / Registration Office \$1,764,369 \$1,711,458 (\$52,911) 5 Data Processing \$7,098,420 \$7,936,887 \$838,467 6 Communications \$0 \$0 \$0 7 Personnel \$1,581,672 \$1,630,347 \$48,675 8 Public Relations \$333,139 \$742,171 \$359,032 9 Purchasing \$980,869 \$991,769 \$10,900 10 Dietary and Cafeteria \$3,237,703 \$2,973,208 (\$264,495) 11 Housekeeping \$4,407,098 \$4,481,885 \$74,787 12 Laundry & Linen \$1,136,096 \$12,2401) 13 Operation of Plant \$5,504,218 \$5,669,978 \$165,760 14 Security \$1,210,130 \$1,135,368 (\$24,762) 15 Repairs and Maintenance \$998,170 \$918,253 (\$70,917) 16 Central Sterile Supply \$1,236,563 \$1,373,863 \$137,300 17 Pharmacy Department \$9,427,206	26%						
5 Data Processing \$7,098,420 \$7,936,887 \$838,467 6 Communications \$0 \$0 \$0 7 Personnel \$1,581,672 \$1,630,347 \$48,675 8 Public Relations \$383,139 \$742,171 \$359,032 9 Purchasing \$980,869 \$991,769 \$10,900 10 Dietary and Cafeteria \$3,237,703 \$2,973,208 \$264,495) 11 Housekeeping \$4,407,098 \$4,481,885 \$74,787 12 Laundry & Linen \$1,148,497 \$1,136,096 (\$12,401) 13 Operation of Plant \$5,504,218 \$5,669,978 \$165,760 14 Security \$1,210,130 \$1,185,368 (\$24,762) 15 Repairs and Maintenance \$989,170 \$918,253 (\$70,917) 16 Central Sterile Supply \$1,236,563 \$1,373,863 \$137,300 17 Pharmacy Department \$9,427,206 \$9,325,729 (\$101,477) 18 Other General Services	-9%						
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7 Personnel \$1,581,672 \$1,630,347 \$48,675 8 Public Relations \$383,139 \$742,171 \$359,032 9 Purchasing \$980,869 \$910,900 10 Dietary and Cafeteria \$3,237,703 \$2,973,208 (\$264,495) 11 Housekeeping \$4,407,098 \$4,481,885 \$74,787 12 Laundry & Linen \$1,148,497 \$1,136,096 (\$12,401) 13 Operation of Plant \$5,504,218 \$5,669,978 \$165,760 14 Security \$1,210,130 \$1,185,368 (\$24,762) 15 Repairs and Maintenance \$989,170 \$918,253 (\$70,917) 16 Central Sterile Supply \$1,236,563 \$1,373,386 \$137,300 17 Pharmacy Department \$9,427,206 \$9,325,729 (\$101,477) 18 Other General Services \$51,104,986 \$40,164,452 (\$10,940,534) Total General Services \$119,347,640 \$111,629,089 (\$7,718,551) B. Professional Service	12%						
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13 Operation of Plant	2%						
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2 Recovery Room \$1,013,230 \$1,019,896 \$6,666 3 Anesthesiology \$635,732 \$530,545 (\$105,187) 4 Delivery Room \$0 \$0 \$0 5 Diagnostic Radiology \$3,632,236 \$3,676,421 \$44,185	-12%	<u>. </u>	(\$2 000 1E2)	¢20,202,669	¢22 272 024		
3 Anesthesiology \$635,732 \$530,545 (\$105,187) 4 Delivery Room \$0 \$0 \$0 5 Diagnostic Radiology \$3,632,236 \$3,676,421 \$44,185	-12% 1%						
4 Delivery Room \$0 \$0 \$0 5 Diagnostic Radiology \$3,632,236 \$3,676,421 \$44,185	-17%						
5 Diagnostic Radiology \$3,632,236 \$3,676,421 \$44,185							
	0% 1%						
. D. D. (1990) (1991) (7%						
7 Radiation Therapy \$68,290 \$21,164 (\$47,126)	-69%						

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

8	DESCRIPTION	FY 2009	FY 2010	AMOUNT	0/
8	DESCRIPTION				%
		<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
	Dadisia stance	Ф740 770	CO15 711	(† 05.050)	400/
9 1	Radioisotopes	\$710,770	\$615,711	(\$95,059)	-13%
	CT Scan	\$963,311	\$938,232	(\$25,079)	-3%
	Laboratory	\$8,475,864	\$7,977,901	(\$497,963)	-6%
	Blood Storing/Processing	\$2,388,006 \$5,422,357	\$2,148,844 \$5,753,018	(\$239,162)	-10% 6%
	Cardiology Electrocardiology			\$330,661	
	Electrocardiology Electroencephalography	\$0 \$592,986	\$0 \$518,496	\$0 (\$74,490)	0% -13%
	Occupational Therapy	\$092,980	\$516,496	(\$74,490) \$0	-13%
	Speech Pathology	\$14,666	\$1,950	(\$12,716)	-87%
	Audiology	\$0	\$0	\$0	0%
	Respiratory Therapy	\$1,525,700	\$1,507,972	(\$17,728)	-1%
	Pulmonary Function	\$18,226	\$19,356	\$1,130	6%
	Intravenous Therapy	\$0	\$0	\$0	0%
	Shock Therapy	\$0	\$0	\$0	0%
	Psychiatry / Psychology Services	\$6,702,635	\$6,431,358	(\$271,277)	-4%
	Renal Dialysis	\$528,164	\$452,659	(\$75,505)	-14%
	Emergency Room	\$11,714,122	\$8,727,779	(\$2,986,343)	-25%
	MRI	\$1,257,500	\$1,132,157	(\$125,343)	-10%
	PET Scan	\$0	\$0	\$0	0%
	PET/CT Scan	\$0	\$0	\$0	0%
	Endoscopy	\$1,165,963	\$1,352,519	\$186,556	16%
	Sleep Center	\$947,632	\$1,015,547	\$67,915	7%
	Lithotripsy	\$0	\$0	\$0	0%
	Cardiac Catheterization/Rehabilitation	\$259,610	\$234,020	(\$25,590)	-10%
32	Occupational Therapy / Physical Therapy	\$1,213,362	\$1,254,223	\$40,861	3%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$463,336	\$466,722	\$3,386	1%
	Total Special Services	\$73,423,238	\$66,657,101	(\$6,766,137)	-9%
D.	Routine Services:				
		£40,440,077	£47.455.400	(0007 705)	F0/
	Medical & Surgical Units	\$18,443,277	\$17,455,492	(\$987,785)	-5%
	Intensive Care Unit	\$5,484,044	\$5,127,742 \$1,732,194	(\$356,302) (\$145,435)	-6% -8%
_	Coronary Care Unit Psychiatric Unit	\$1,877,629 \$3,305,549	\$3,267,693	(\$37,856)	-0%
	Pediatric Unit	\$238,525	\$3,267,693	(\$238,525)	-100%
	Maternity Unit	\$4,028,858	\$4,198,709	\$169,851	4%
	Newborn Nursery Unit	\$1,348,051	\$1,346,803	(\$1,248)	0%
	Neonatal ICU	\$0	\$0	\$0	0%
	Rehabilitation Unit	\$0	\$0 \$0	\$0 \$0	0%
	Ambulatory Surgery	\$2,021,307	\$2,129,184	\$107,877	5%
	Home Care	\$0	\$0	\$0	0%
	Outpatient Clinics	\$0	\$0	\$0	0%
	Other Routine Services	\$0	\$0	\$0	0%
	Total Routine Services	\$36,747,240	\$35,257,817	(\$1,489,423)	-4%
	Other Departments:	#0.400.007	#0.000.500	#500.400	050
1	Miscellaneous Other Departments	\$2,403,367	\$2,999,563	\$596,196	25%
	Total Operating Expenses - All Departments*	\$253,532,594	\$237,519,576	(\$16,013,018)	-6%
	*A 0. The total operating expenses amount ab				

	WATER	BURY HOSPITAL							
	TWELVE MON	ITHS ACTUAL FILING							
	FISCAL YEAR 2010								
	REPORT 185 - HOSPITAL FINANC	CIAL AND STATISTICAL	DATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2008	FY 2009	<u>FY 2010</u>					
A.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$221,441,319	\$ 239,928,524	\$229,011,318					
2	Other Operating Revenue	11,605,995	8,617,813	7,866,089					
3	Total Operating Revenue	\$233,047,314	\$248,546,337	\$236,877,407					
4	Total Operating Expenses	245,407,419	253,532,594	237,519,576					
5	Income/(Loss) From Operations	(\$12,360,105)	(\$4,986,257)	(\$642,169)					
6	Total Non-Operating Revenue	1,875,322	3,066,686	969,525					
7	Excess/(Deficiency) of Revenue Over Expenses	(\$10,484,783)	(\$1,919,571)	\$327,356					
В.	Profitability Summary								
1	Hospital Operating Margin	-5.26%	-1.98%	-0.27%					
2	Hospital Non Operating Margin	0.80%	1.22%	0.41%					
3	Hospital Total Margin	-4.46%	-0.76%	0.14%					
4	Income/(Loss) From Operations	(\$12,360,105)	(\$4,986,257)	(\$642,169)					
5	Total Operating Revenue	\$233,047,314	\$248,546,337	\$236,877,407					
6	Total Non-Operating Revenue	\$1,875,322	\$3,066,686	\$969,525					
7	Total Revenue	\$234,922,636	\$251,613,023	\$237,846,932					
8	Excess/(Deficiency) of Revenue Over Expenses	(\$10,484,783)	(\$1,919,571)	\$327,356					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$47,953,352	\$44,636,663	\$40,084,846					
2	Hospital Total Net Assets	\$99,996,300	\$93,058,584	\$90,753,820					
3	Hospital Change in Total Net Assets	(\$22,520,197)	(\$6,937,716)	(\$2,304,764)					
4	Hospital Change in Total Net Assets %	81.6%	-6.9%	-2.5%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.31	0.30	0.29					
2	Total Operating Expenses	\$227,689,900	\$253,532,594	\$237,519,576					
3	Total Gross Revenue	\$709,569,118	\$844,914,267	\$815,767,927					
4	Total Other Operating Revenue	\$13,967,320	\$13,073,722	\$10,576,444					

	WATE	RBURY HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2008	FY 2009	FY 2010				
5	Private Payment to Cost Ratio	1.15	1.09	1.16				
6	Total Non-Government Payments	\$86,587,089	\$93,517,673	\$89,132,989				
7	Total Uninsured Payments	\$1,060,888	\$4,673,624	\$714,101				
8	Total Non-Government Charges	\$256,722,477	\$295,361,960	\$280,737,111				
9	Total Uninsured Charges	\$19,594,066	\$19,996,563	\$16,351,062				
10	Medicare Payment to Cost Ratio	0.91	0.88	0.89				
11	Total Medicare Payments	\$94,927,962	\$105,422,025	\$99,518,147				
12	Total Medicare Charges	\$332,737,902	\$404,726,863	\$388,396,855				
13	Medicaid Payment to Cost Ratio	0.66	0.68	0.62				
14	Total Medicaid Payments	\$19,562,259	\$21,623,564	\$19,487,482				
15	Total Medicaid Charges	\$93,565,091	\$107,535,583	\$108,682,556				
16	Uncompensated Care Cost	\$6,390,261	\$4,766,186	\$4,856,677				
17	Charity Care	\$2,588,984	\$1,809,921	\$1,910,845				
18	Bad Debts	\$17,717,523	\$14,319,487	\$14,985,815				
19	Total Uncompensated Care	\$20,306,507	\$16,129,408	\$16,896,660				
20	Uncompensated Care % of Total Expenses	2.8%	1.9%	2.0%				
21	Total Operating Expenses	\$227,689,900	\$253,532,594	\$237,519,576				
E.	Liquidity Measures Summary							
1	Current Ratio	1.63	2.00	1.79				
2	Total Current Assets	\$50,995,793	\$49,565,466	\$48,912,347				
3	Total Current Liabilities	\$31,245,675	\$24,823,818	\$27,364,671				
4	Days Cash on Hand	16	22	26				
5	Cash and Cash Equivalents	\$10,440,801	\$14,657,330	\$16,243,349				
6	Short Term Investments	0	0	0				
7	Total Cash and Short Term Investments	\$10,440,801	\$14,657,330	\$16,243,349				
8	Total Operating Expenses	\$245,407,419	\$253,532,594	\$237,519,576				
9	Depreciation Expense	\$9,625,585	\$9,056,904	\$9,226,011				
10	Operating Expenses less Depreciation Expense	\$235,781,834	\$244,475,690	\$228,293,565				

	WATERBU	RY HOSPITAL							
	TWELVE MONT	HS ACTUAL FILING							
	FISCAL YEAR 2010 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2008	<u>FY 2009</u>	<u>FY 2010</u>					
11	Days Revenue in Patient Accounts Receivable	56.81	44.68	43.88					
12	Net Patient Accounts Receivable	\$ 33,654,146	\$ 30,390,471	\$ 27,764,677					
13	Due From Third Party Payers	\$810,405	\$0	\$0					
14	Due To Third Party Payers	\$0	\$1,023,178	\$230,310					
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 34,464,551	\$ 29,367,293	\$ 27,534,367					
16	Total Net Patient Revenue	\$221,441,319	\$ 239,928,524	\$ 229,011,318					
17	Average Payment Period	48.37	37.06	43.75					
18	Total Current Liabilities	\$31,245,675	\$24,823,818	\$27,364,671					
19	Total Operating Expenses	\$245,407,419	\$253,532,594	\$237,519,576					
20	Depreciation Expense	\$9,625,585	\$9,056,904						
21	Total Operating Expenses less Depreciation Expense	\$235,781,834	\$244,475,690	\$228,293,565					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	62.9	61.5	60.3					
2	Total Net Assets	\$99,996,300	\$93,058,584	\$90,753,820					
3	Total Assets	\$158,850,472	\$151,297,119	\$150,461,930					
4	Cash Flow to Total Debt Ratio	(1.7)	16.3	21.0					
5	Excess/(Deficiency) of Revenues Over Expenses	(\$10,484,783)	(\$1,919,571)	\$327,356					
6	Depreciation Expense	\$9,625,585	\$9,056,904	\$9,226,011					
7	Excess of Revenues Over Expenses and Depreciation Expense	(\$859,198)	\$7,137,333	\$9,553,367					
8	Total Current Liabilities	\$31,245,675	\$24,823,818	\$27,364,671					
9	Total Long Term Debt	\$19,782,139	\$19,049,553	\$18,142,716					
10	Total Current Liabilities and Total Long Term Debt	\$51,027,814	\$43,873,371	\$45,507,387					
11	Long Term Debt to Capitalization Ratio	16.5	17.0	16.7					
12	Total Long Term Debt	\$19,782,139	\$19,049,553	\$18,142,716					
13	Total Net Assets	\$99,996,300	\$93,058,584	\$90,753,820					
14	Total Long Term Debt and Total Net Assets	\$119,778,439	\$112,108,137	\$108,896,536					

	WATERBURY	'HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
	,	ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2008	FY 2009						
LINE	DESCRIPTION	<u> </u>	F1 2003	<u>FY 2010</u>					
15	Debt Service Coverage Ratio	0.4	3.4	4.3					
16	Excess Revenues over Expenses	(\$10,484,783)	(\$1,919,571)	\$327,356					
17	Interest Expense	\$1,414,401	\$1,281,962	\$1,188,449					
18	Depreciation and Amortization Expense	\$9,625,585	\$9,056,904	\$9,226,011					
19	Principal Payments	\$0	\$1,162,266	\$1,334,228					
G.	Other Financial Ratios								
20	Average Age of Plant	19.6	21.8	22.4					
21	Accumulated Depreciation	\$188,689,241	\$197,380,797	\$206,294,646					
22	Depreciation and Amortization Expense	\$9,625,585	\$9,056,904	\$9,226,011					
	Depreciation and Amortization Expense	ψ9,023,303	φ9,030,904	ψθ,220,011					
Н.	Utilization Measures Summary								
1	Patient Days	70,997	67,682	59,271					
2	Discharges	14,736	13,916	13,046					
3	ALOS	4.8	4.9	4.5					
4	Staffed Beds	238	214	192					
5	Available Beds	-	292	292					
6	Licensed Beds	393	393	393					
6	Occupancy of Staffed Beds	81.7%	86.6%	84.6%					
7	Occupancy of Available Beds	66.6%	63.5%	55.6%					
8	Full Time Equivalent Employees	1,625.0	1,589.2	1,513.1					
0	Pull Time Equivalent Employees	1,625.0	1,569.2	1,515.1					
l.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	33.4%	32.6%	32.4%					
2	Medicare Gross Revenue Payer Mix Percentage	46.9%	47.9%	47.6%					
<u>3</u> 4	Medicaid Gross Revenue Payer Mix Percentage Other Medical Assistance Gross Revenue Payer Mix Percentage	13.2% 3.7%	12.7% 4.3%	13.3% 4.5%					
5	Uninsured Gross Revenue Payer Mix Percentage	2.8%	2.4%	2.0%					
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%					
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Gross Revenue (Charges)	\$237,128,411	\$275,365,397	\$264,386,049					
9	Medicare Gross Revenue (Charges)	\$332,737,902	\$404,726,863	\$388,396,855					
10	Medicaid Gross Revenue (Charges)	\$93,565,091	\$107,535,583	\$108,682,556					
11	Other Medical Assistance Gross Revenue (Charges)	\$25,950,410	\$36,022,959	\$37,077,529					
12	Uninsured Gross Revenue (Charges)	\$19,594,066	\$19,996,563	\$16,351,062					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$593,238	\$1,266,902	\$873,876					
14	Total Gross Revenue (Charges)	\$709,569,118	\$844,914,267	\$815,767,927					

	WATERBUF	RY HOSPITAL								
	TWELVE MONTHS ACTUAL FILING									
	FISCAL YEAR 2010 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS									
(1)	(2)	(3)	(4)	(5)						
(-,	(=)	ACTUAL	ACTUAL	ACTUAL						
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010						
J.	Hospital Net Revenue Payer Mix Percentage									
1	Non-Government Net Revenue Payer Mix Percentage	42.0%	39.7%	41.7%						
2	Medicare Net Revenue Payer Mix Percentage	46.7%	47.1%	47.0%						
3	Medicaid Net Revenue Payer Mix Percentage	9.6%	9.7%	9.2%						
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.1%	1.3%	1.7%						
5	Uninsured Net Revenue Payer Mix Percentage	0.5%	2.1%	0.3%						
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%						
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%						
8	Non-Government Net Revenue (Payments)	\$85,526,201	\$88,844,049	\$88,418,888						
9	Medicare Net Revenue (Payments)	\$94,927,962	\$105,422,025	\$99,518,147						
10	Medicaid Net Revenue (Payments)	\$19,562,259	\$21,623,564	\$19,487,482						
11	Other Medical Assistance Net Revenue (Payments)	\$2,251,025	\$2,939,438	\$3,605,579						
12	Uninsured Net Revenue (Payments)	\$1,060,888	\$4,673,624	\$714,101						
13	CHAMPUS / TRICARE Net Revenue Payments)	\$157,309	\$244,955	\$197,908						
14	Total Net Revenue (Payments)	\$203,485,644	\$223,747,655	\$211,942,105						
K.	<u>Discharges</u>									
1	Non-Government (Including Self Pay / Uninsured)	4,942	4,524	3,968						
2	Medicare	6,566	6,496	6,077						
3	Medical Assistance	3,216	2,881	2,991						
4	Medicaid	2,730	2,363	2,411						
5	Other Medical Assistance	486	518	580						
6	CHAMPUS / TRICARE	12	15	10						
7	Uninsured (Included In Non-Government)	335	265	216						
8	Total	14,736	13,916	13,046						
L.	Case Mix Index									
1	Non-Government (Including Self Pay / Uninsured)	1.192500	1.293650	1.315160						
2	Medicare	1.581600	1.592700	1.666750						
3	Medical Assistance	1.005844	1.755999	1.032599						
4	Medicaid	0.980200	1.886300	0.998800						
5	Other Medical Assistance	1.149900	1.161600	1.173100						
6	CHAMPUS / TRICARE	1.329400	1.660100	1.715000						
7	Uninsured (Included In Non-Government)	1.119000	1.146600	1.160900						
8	Total Case Mix Index	1.325249	1.529361	1.414460						
М.	Emergency Department Visits									
1	Emergency Room - Treated and Admitted	9,294	8,895	8,340						
2	Emergency Room - Treated and Discharged	45,166	49,237	49,393						
3	Total Emergency Room Visits	54,460	58,132	57,733						

(1)	(2)	(3)	(4)	(5)	(6)
` '	, ,	FY 2009	FY 2010	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
_					
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$873,350	\$1,985,732	\$1,112,382	127%
	Inpatient Payments	\$264,902	\$599,367	\$334,465	126%
3	Outpatient Charges	\$322,857	\$563,100	\$240,243	74%
4	Outpatient Payments	\$71,397	\$105,533	\$34,136	48%
5	Discharges	23	43	20	87%
6	Patient Days	83	241	158	190%
7	Outpatient Visits (Excludes ED Visits)	162	293	131	81%
8	Emergency Department Outpatient Visits	19	46	27	142%
9	Emergency Department Inpatient Admissions	12	33	21	175%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,196,207	\$2,548,832	\$1,352,625	113%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$336,299	\$704,900	\$368,601	110%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0 \$0	\$0	0%
	Outpatient Payments	\$0	\$0 \$0	\$0	0%
5	Discharges	0	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%
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & COTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0	0%
	TOTAL INFATIENT & OUTPATIENT PATMENTS	\$0	40	\$0	0 /6
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$4,543,191	\$5,277,689	\$734,498	16%
2	Inpatient Payments	\$986,461	\$1,362,449	\$375,988	38%
3	Outpatient Charges	\$1,909,114	\$3,044,725	\$1,135,611	59%
4	Outpatient Payments	\$345,612	\$517,539	\$171,927	50%
5	Discharges	85	84	(1)	-1%
6	Patient Days	457	513	56	12%
7	Outpatient Visits (Excludes ED Visits)	1,086	1,403	317	29%
8	Emergency Department Outpatient Visits	89	122	33	37%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	59	50	(9)	-15%
<u> </u>	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,452,305	\$8,322,414	\$1,870,109	29%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,332,073	\$1,879,988	\$547,915	41%
	TOTAL INI ATILITI & COTFATILITI FATIVILITI	φ1,332,013	φι,υισ,σοο	φυ41,910	4170

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$23,042,540	\$22,852,409	(\$190,131)	-1%
2	Inpatient Payments	\$5,684,461	\$6,077,233	\$392,772	7%
3	Outpatient Charges	\$7,870,733	\$7,204,954	(\$665,779)	-8%
4	Outpatient Payments	\$1,439,150	\$1,221,290	(\$217,860)	-15%
5	Discharges	483	451	(32)	-7%
6	Patient Days	2,693	2,257	(436)	-16%
7	Outpatient Visits (Excludes ED Visits)	3,990	3,924	(66)	-2%
8	Emergency Department Outpatient Visits	489	474	(15)	-3%
9	Emergency Department Inpatient Admissions	370	337	(33)	-9%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$30,913,273	\$30,057,363	(\$855,910)	-3%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,123,611	\$7,298,523	\$174,912	2%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$924,840	\$1,836,208	\$911,368	99%
2	Inpatient Payments	\$217,218	\$458,731	\$241,513	111%
3	Outpatient Charges	\$482,976	\$397,667	(\$85,309)	-18%
4	Outpatient Payments	\$66,628	\$65,956	(\$672)	-1%
5	Discharges	23	36	13	57%
6	Patient Days	92	208	116	126%
7	Outpatient Visits (Excludes ED Visits)	167	186	19	11%
8	Emergency Department Outpatient Visits	33	50	17	52%
9	Emergency Department Inpatient Admissions	14	32	18	129%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,407,816	\$2,233,875	\$826,059	59%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$283,846	\$524,687	\$240,841	85%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN				
1	Inpatient Charges	\$1,265,714	\$4,156,536	\$2,890,822	228%
2	Inpatient Payments	\$297,221	\$1,075,104	\$777,883	262%
3	Outpatient Charges	\$662,503	\$1,163,006	\$500,503	76%
4	Outpatient Payments	\$89,328	\$155,592	\$66,264	74%
5	Discharges	32	85	53	166%
6	Patient Days	164	443	279	170%
7	Outpatient Visits (Excludes ED Visits)	539	795	256	47%
8	Emergency Department Outpatient Visits	70	97	27	39%
9	Emergency Department Inpatient Admissions	24	69	45	188%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,928,217	\$5,319,542	\$3,391,325	176%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$386,549	\$1,230,696	\$844,147	218%

(1)	(2)	(3)	(4)	(5)	(6)
	\	FY 2009	FY 2010	AMOÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$0	\$332,570	\$332,570	0%
2	Inpatient Payments	\$0	\$92,997	\$92,997	0%
3	Outpatient Charges	\$0	\$241,003	\$241,003	0%
4	Outpatient Payments	\$0	\$47,519	\$47,519	0%
5	Discharges	0	5	5	0%
6	Patient Days	0	29	29	0%
7	Outpatient Visits (Excludes ED Visits)	0	37	37	0%
8	Emergency Department Outpatient Visits	0	4	4	0%
9	Emergency Department Inpatient Admissions	0	5	5	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$573,573	\$573,573	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$140,516	\$140,516	0%
Н.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$3,637,996	\$2,555,226	(\$1,082,770)	-30%
2	Inpatient Payments	\$848,357	\$709,085	(\$139,272)	-16%
3	Outpatient Charges	\$1,780,835	\$1,439,997	(\$340,838)	-19%
4	Outpatient Payments	\$365,890	\$242,040	(\$123,850)	-34%
5	Discharges	85	60	(25)	-29%
6	Patient Days	485	293	(192)	-40%
7	Outpatient Visits (Excludes ED Visits)	1,050	867	(183)	-17%
8	Emergency Department Outpatient Visits	238	189	(49)	-21%
9	Emergency Department Inpatient Admissions	75	54	(21)	-28%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,418,831	\$3,995,223	(\$1,423,608)	-26%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,214,247	\$951,125	(\$263,122)	-22%
	A				
I.	AETNA	0.5	A	A. 5-2 -2-	
1	Inpatient Charges	\$1,572,905	\$3,149,502	\$1,576,597	100%
2	Inpatient Payments	\$401,812	\$879,180	\$477,368	119%
3	Outpatient Charges	\$501,864	\$1,342,822	\$840,958	168%
4	Outpatient Payments	\$122,644	\$240,838	\$118,194	96%
5	Discharges	31	61	30	97%
6	Patient Days	128	337	209	163%
7	Outpatient Visits (Excludes ED Visits)	337	572	235	70%
8	Emergency Department Outpatient Visits	40	81	41	103%
9	Emergency Department Inpatient Admissions	19	42	23	121%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,074,769	\$4,492,324	\$2,417,555	117%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$524,456	\$1,120,018	\$595,562	114%

(1)	(2)	(3)	(4)	(5)	(6)
	• •	FY 2009	FY 2010	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%
17					
K.	SECURE HORIZONS				
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%
	UNICARE LIFE & HEALTH INSURANCE				
L. 1	Inpatient Charges	\$0	\$0	\$0	0%
		\$0		\$0 \$0	
2	Inpatient Payments	\$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges Outpatient Payments	\$0	\$0 \$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%

UNIVERSAL AMERICAN	(6)		(5)	(4)	(3)	(2)	(1)
M. UNIVERSAL AMERICAN 1 Inpatient Charges \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$	% FEDENCE	- -	AMOUNT	FY 2010	FY 2009	DESCRIPTION	
1 Inpatient Charges	FERENCE	- 0	DIFFERENCE	ACTUAL	ACTUAL	DESCRIPTION	LINE
Inpatient Charges		\top				UNIVERSAL AMERICAN	M.
3 Outpatient Charges	0%	5	\$0	\$0	\$0		1
4 Outpatient Payments	0%)	\$0	\$0	\$0	Inpatient Payments	2
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 N. EVERCARE 1 Inpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) \$1 2 Inpatient Payments \$707,737 \$450,797 (\$256,940) \$3 \$0 \$0 3 Outpatient Payments \$707,737 \$450,797 (\$256,940) \$13,890	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 N. EVERCARE \$0 \$0 \$0 1 Inpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) \$0 2 Inpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) \$0 3 Outpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) \$0 \$0 4 Inpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) \$0	0%)	\$0	\$0	\$0		
7	0%)	0	0	0		
8 Emergency Department Outpatient Visits 0 0 0 9 Emergency Department Inpatient Admissions 0 0 0 TOTAL INPATIENT & OUTPATIENT CHARGES \$0 \$0 \$0 N. EVERCARE \$0 \$0 \$0 1 Inpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) 2 Inpatient Payments \$707,737 \$450,797 (\$256,940) 3 Outpatient Charges \$660,268 \$866,839 \$206,571 4 Outpatient Charges \$660,268 \$866,839 \$206,571 4 Outpatient Payments \$124,590 \$138,280 \$13,690 5 Discharges 53 35 (18) 6 Patient Days 360 168 (192) 7 Outpatient Visits (Excludes ED Visits) 339 481 142 8 Emergency Department Outpatient Visits 122 156 34 9 Emergency Department Inpatient Admissions 44 32 <td< td=""><td>0%</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	0%						
9 Emergency Department Inpatient Admissions 0 0 0 TOTAL INPATIENT & OUTPATIENT CHARGES \$0 \$0 \$0 TOTAL INPATIENT & OUTPATIENT PAYMENTS \$0 \$0 \$0 N. EVERCARE	0%						
TOTAL INPATIENT & OUTPATIENT CHARGES \$0	0%	_		-			
N. EVERCARE	0%						
N. EVERCARE Inpatient Charges \$2,899,124 \$1,295,788 (\$1,603,336) 2 Inpatient Charges \$707,737 \$450,797 (\$256,940) 3 Outpatient Payments \$707,737 \$450,797 (\$256,940) 3 Outpatient Charges \$660,268 \$866,839 \$206,571 4 Outpatient Payments \$124,590 \$138,280 \$13,690 5 Discharges 53 35 (18) 6 Patient Days 360 168 (192) 7 Outpatient Visits (Excludes ED Visits) 339 481 142 8 Emergency Department Outpatient Visits 122 156 34 9 Emergency Department Inpatient Admissions 44 32 (12) TOTAL INPATIENT & OUTPATIENT CHARGES \$3,559,392 \$2,162,627 (\$1,396,765) TOTAL INPATIENT & OUTPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT CHARGES \$14,191,510 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37	0%						
Inpatient Charges	0%	<u>) </u>	\$0	\$0	\$0	TOTAL INPATIENT & OUTPATIENT PAYMENTS	
Inpatient Charges		+				EVERCARE	N.
Inpatient Payments	-55%	3)	(\$1,603,336)	\$1,295,788	\$2,899,124		1
4 Outpatient Payments	-36%						
5 Discharges 53 35 (18) 6 Patient Days 360 168 (192) 7 Outpatient Visits (Excludes ED Visits) 339 481 142 8 Emergency Department Outpatient Visits 122 156 34 9 Emergency Department Inpatient Admissions 44 32 (12) TOTAL INPATIENT & OUTPATIENT CHARGES \$3,559,392 \$2,162,627 (\$1,396,765) TOTAL INPATIENT & OUTPATIENT PAYMENTS \$832,327 \$589,077 (\$243,250) II. TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT CHARGES \$3,9408,169 \$11,704,943 \$2,296,774 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888	31%	1	\$206,571	\$866,839	\$660,268	Outpatient Charges	3
Resident Days 360 168 (192)	11%)	\$13,690	\$138,280	\$124,590		
7	-34%	3)	(18)	35			
8 Emergency Department Outpatient Visits 122 156 34 9 Emergency Department Inpatient Admissions 44 32 (12) TOTAL INPATIENT & OUTPATIENT CHARGES \$3,559,392 \$2,162,627 (\$1,396,765) TOTAL INPATIENT & OUTPATIENT PAYMENTS \$832,327 \$589,077 (\$243,250) III. TOTAL MEDICARE MANAGED CARE TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT PAYMENTS \$9,408,169 \$11,704,943 \$2,296,774 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 1,100 1,219	-53%	2)	(192)	168			
9 Emergency Department Inpatient Admissions	42%						
TOTAL INPATIENT & OUTPATIENT CHARGES \$3,559,392 \$2,162,627 (\$1,396,765) TOTAL INPATIENT & OUTPATIENT PAYMENTS \$832,327 \$589,077 (\$243,250) II. TOTAL MEDICARE MANAGED CARE	28%	_					
TOTAL INPATIENT & OUTPATIENT PAYMENTS \$832,327 \$589,077 (\$243,250)	-27%	/	\ /			0 7 1	
II. TOTAL MEDICARE MANAGED CARE TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT PAYMENTS \$9,408,169 \$11,704,943 \$2,296,774 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 0UTPATIENT VISITS 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37	-39%						
TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT PAYMENTS \$9,408,169 \$11,704,943 \$2,296,774 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37	-29%	<u>)) </u>	(\$243,250)	\$589,077	\$832,327	TOTAL INPATIENT & OUTPATIENT PAYMENTS	
TOTAL INPATIENT CHARGES \$38,759,660 \$43,441,660 \$4,682,000 TOTAL INPATIENT PAYMENTS \$9,408,169 \$11,704,943 \$2,296,774 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37						TOTAL MEDICADE MANACED CADE	п
TOTAL INPATIENT PAYMENTS \$9,408,169 \$11,704,943 \$2,296,774 TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37		\top			T	TOTAL MEDICARE MANAGED CARE	111.
TOTAL OUTPATIENT CHARGES \$14,191,150 \$16,264,113 \$2,072,963 TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 654 37	12%)	\$4,682,000	\$43,441,660	\$38,759,660	TOTAL INPATIENT CHARGES	
TOTAL OUTPATIENT PAYMENTS \$2,625,239 \$2,734,587 \$109,348 TOTAL DISCHARGES 815 860 45 TOTAL PATIENT DAYS 4,462 4,489 27 TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 137 INPATIENT ADMISSIONS 617 654 37	24%						
TOTAL DISCHARGES	15%						
TOTAL PATIENT DAYS	4%	_					
TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 617 654 37	6%						
VISITS) 7,670 8,558 888 TOTAL EMERGENCY DEPARTMENT 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT 617 654 37	1%	7	27	4,489	4,462		
TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37						•	
OUTPATIENT VISITS 1,100 1,219 119 TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37	12%	3	888	8,558	7,670	/	
TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS 617 654 37	440		440	4 040	4 400		
INPATIENT ADMISSIONS 617 654 37	11%	<u>, </u>	119	1,219	1,100		
	60.	7	27	654	647		
	6% 13%			\$59,705,773	\$52,950,810	TOTAL INPATIENT & OUTPATIENT CHARGES	
TOTAL INPATIENT & OUTPATIENT CHARGES \$52,950,810 \$59,705,773 \$6,754,963 TOTAL INPATIENT & OUTPATIENT PAYMENTS \$12,033,408 \$14,439,530 \$2,406,122	20%						

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
•	ANTHEM BLUE CROSS AND BLUE SHIELD				
A.	OF CONNECTICUT Inpatient Charges	\$3,581,650	\$0	(\$3,581,650)	-100%
2	Inpatient Charges Inpatient Payments	\$781,135	\$0 \$0	(\$781,135)	-100%
3	Outpatient Charges	\$5,702,796	\$533	(\$5,702,263)	-100%
4	Outpatient Payments	\$1,068,024	\$57	(\$1,067,967)	-100%
5	Discharges	232	0	(232)	-100%
6	Patient Days	698	0	(698)	-100%
7	Outpatient Visits (Excludes ED Visits)	2,909	2	(2,907)	-100%
8	Emergency Department Outpatient Visits	1,729	0	(1,729)	-100%
9	Emergency Department Inpatient Admissions	77	0	(77)	-100%
	TOTAL INPATIENT & OUTPATIENT			(,,)	10070
	CHARGES	\$9,284,446	\$533	(\$9,283,913)	-100%
	TOTAL INPATIENT & OUTPATIENT	\$0,20 i, i i o	4000	(40,200,010)	10070
	PAYMENTS	\$1,849,159	\$57	(\$1,849,102)	-100%
	-	, , , , , , , , , , , , , , , , , , ,	* -	(+ /= = /	
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$13,908,471	\$17,439,330	\$3,530,859	25%
2	Inpatient Payments	\$3,132,903	\$3,207,142	\$74,239	2%
3	Outpatient Charges	\$21,424,290	\$25,266,627	\$3,842,337	18%
4	Outpatient Payments	\$4,215,878	\$4,610,218	\$394,340	9%
5	Discharges	974	1,033	59	6%
6	Patient Days	2,883	3,334	451	16%
7	Outpatient Visits (Excludes ED Visits)	10,979	11,355	376	3%
8	Emergency Department Outpatient Visits	6,852	8,569	1,717	25%
9	Emergency Department Inpatient Admissions	186	244	58	31%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$35,332,761	\$42,705,957	\$7,373,196	21%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	¢7 240 704	¢7 047 260	£460 E70	c 0/
	FATWENTS	\$7,348,781	\$7,817,360	\$468,579	6%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0	\$1,141	\$1,141	0%
4	Outpatient Payments	\$0	\$69	\$69	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	2	2	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT	-	-	-	
	CHARGES	\$0	\$1,141	\$1,141	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$69	\$69	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
<u>D.</u>	Inpatient Charges	\$1,095,989	\$2,217,568	\$1,121,579	102%
2	Inpatient Charges Inpatient Payments	\$236,817	\$375,655	\$138,838	59%
3	Outpatient Charges	\$1,332,963	\$2,453,042	\$1,120,079	84%
4	Outpatient Charges Outpatient Payments	\$246,343	\$449,212	\$202,869	82%
5	Discharges	40	118	78	195%
6	Patient Days	204	426	222	109%
7	Outpatient Visits (Excludes ED Visits)	265	809	544	205%
8	Emergency Department Outpatient Visits	674	1,273	599	89%
9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0/4	37	37	0%
3	TOTAL INPATIENT & OUTPATIENT	0		37	070
	CHARGES	\$2,428,952	\$4,670,610	\$2,241,658	92%
	TOTAL INPATIENT & OUTPATIENT	+-,,	V 1,01 0,010	V =,= 11,000	5270
	PAYMENTS	\$483,160	\$824,867	\$341,707	71%
		+ 100,100	* • • • • • • • • • • • • • • • • • • •	4011,101	
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$2,723	\$0	(\$2,723)	-100%
4	Outpatient Payments	\$219	\$0	(\$219)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	2	0	(2)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT	-	-		
	CHARGES	\$2,723	\$0	(\$2,723)	-100%
	TOTAL INPATIENT & OUTPATIENT	, ,		X+ / -/	
	PAYMENTS	\$219	\$0	(\$219)	-100%
	FIRST CHOICE OF CONNECTICUT,			· · · /	
F.	PREFERRED ONE				
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	-	<u> </u>		3,3
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	* -		, ,	371
	PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	LINITED LIEAL THOADE				
G.	UNITED HEALTHCARE	¢o.		C O	00/
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%
	AFTNA				
H. 1	AETNA	\$2.242.642	ΦE 204 946	¢2.052.202	610/
1	Inpatient Charges	\$3,342,613	\$5,394,816	\$2,052,203	61%
2	Inpatient Payments	\$641,450	\$975,010	\$333,560	52%
3	Outpatient Charges	\$4,779,915	\$7,578,470	\$2,798,555	59%
4	Outpatient Payments	\$985,034	\$1,419,212	\$434,178	44%
5	Discharges	167	334	167	100%
6	Patient Days	580	1,021	441	76%
7	Outpatient Visits (Excludes ED Visits)	1,732	2,890	1,158	67%
8	Emergency Department Outpatient Visits	1,818	2,947	1,129	62%
9	Emergency Department Inpatient Admissions	42	76	34	81%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$8,122,528	\$12,973,286	\$4,850,758	60%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$1,626,484	\$2,394,222	\$767,738	47%
11	TOTAL MEDICAID MANACED CARE				
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$21,928,723	\$25,051,714	\$3,122,991	14%
	TOTAL INPATIENT PAYMENTS	\$4,792,305	\$4,557,807	(\$234,498)	-5%
	TOTAL OUTPATIENT CHARGES	\$33,242,687	\$35,299,813	\$2,057,126	6%
	TOTAL OUTPATIENT PAYMENTS	\$6,515,498	\$6,478,768	(\$36,730)	-1%
	TOTAL DISCHARGES	1,413	1,485	72	5%
	TOTAL PATIENT DAYS	4,365	4,781	416	10%
	TOTAL OUTPATIENT VISITS	7,505	7,701	710	1070
	(EXCLUDES ED VISITS)	15,885	15,058	(827)	-5%
	TOTAL EMERGENCY DEPARTMENT	13,003	13,030	(021)	-3 /0
	OUTPATIENT VISITS	11,075	12,789	1,714	15%
	TOTAL EMERGENCY DEPARTMENT	11,073	12,100	1,717	1370
	INPATIENT ADMISSIONS	305	357	52	17%
	TOTAL INPATIENT & OUTPATIENT	303	331	32	1770
	CHARGES	\$55,171,410	¢60 254 527	\$5,180,117	9%
	TOTAL INPATIENT & OUTPATIENT	Φ55,171,410	\$60,351,527	φο, 1 δ υ, 117	9%
		¢11 207 002	\$11 026 E7E	(\$374 330 <u>)</u>	20/
	PAYMENTS	\$11,307,803	\$11,036,575	(\$271,228)	-2%

	GREATER WA	TERBURY HEALTH N	ETWORK		
	TWELVE	MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2010			
	REPORT 300 - HOSP	ITAL BALANCE SHEET	TINFORMATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	<u>ASSETS</u>				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$19,343,506	\$22,269,814	\$2,926,308	15%
2	Short Term Investments	\$819,938	\$920,291	\$100,353	12%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$34,132,488	\$34,332,910	\$200,422	1%
4	Current Assets Whose Use is Limited for Current Liabilities	\$573,887	\$582,693	\$8.806	2%
5	Due From Affiliates	\$1,531,902	\$197,863	(\$1,334,039)	-87%
6	Due From Third Party Payers	\$1,531,902	\$197,863	(\$1,334,039)	0%
7	Inventories of Supplies	\$584,339	\$812,360	\$228,021	39%
8	Prepaid Expenses	\$1,404,755	\$1,423,516	\$18.761	
9	Other Current Assets	\$145,408	\$1,423,510	(\$145,408)	-100%
9	Total Current Assets	\$58,536,223	\$60,539,447	\$2,003,224	3%
	Total Current Assets	\$30,330,ZZ3	\$00,339,447	\$2,003,224	378
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$37,864,978	\$39,561,090	\$1,696,112	4%
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	\$2.055.042	\$2,051,129	(\$4,814)	0%
- 4	Total Noncurrent Assets Whose Use is	\$2,055,943	φ2,031,129	(\$4,014)	0 78
	Limited:	\$39,920,921	\$41,612,219	\$1,691,298	4%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$30,168,049	\$32,295,430	\$2,127,381	7%
7	Other Noncurrent Assets	\$4,587,071	\$4,157,120	(\$429,951)	-9%
C.	Net Fixed Assets:	_			
1	Property, Plant and Equipment	\$257,885,293	\$259,813,818	\$1,928,525	1%
2	Less: Accumulated Depreciation	\$207,922,774	\$215,664,310	\$7,741,536	\$0
	Property, Plant and Equipment, Net	\$49,962,519	\$44,149,508	(\$5,813,011)	-12%
3	Construction in Progress	\$134,784	\$1,688,586	\$1,553,802	1153%
	Total Net Fixed Assets	\$50,097,303	\$45,838,094	(\$4,259,209)	-9%
	Total Assets	\$183,309,567	\$184,442,310	\$1,132,743	1%
		. ,,	. , ,= -	. , , ,	

	GREATER W	ATERBURY HEALTH NET	TWORK				
	TWELVE	MONTHS ACTUAL FILIN	NG				
	FISCAL YEAR 2010						
	REPORT 300 - HOSP	ITAL BALANCE SHEET I	NFORMATION				
(1)	(2)	(3) FY 2009	(4) FY 2010	(5) AMOUNT	(6) %		
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE		
II.	LIABILITIES AND NET ASSETS						
Α.	Current Liabilities:						
1	Accounts Payable and Accrued Expenses	\$25,053,002	\$28,749,242	\$3,696,240	15%		
2	Salaries, Wages and Payroll Taxes	\$0	\$0	\$0	0%		
3	Due To Third Party Payers	\$1,195,037	\$414,546	(\$780,491)	-65%		
4	Due To Affiliates	\$0	\$10,409	\$10,409	0%		
5	Current Portion of Long Term Debt	\$865,000	\$910,000	\$45,000	5%		
6	Current Portion of Notes Payable	\$442,010	\$502,875	\$60,865	14%		
7	Other Current Liabilities	\$0	\$0	\$0	0%		
	Total Current Liabilities	\$27,555,049	\$30,587,072	\$3,032,023	11%		
В.	Long Term Debt:						
1	Bonds Payable (Net of Current Portion)	\$20,547,007	\$19,661,864	(\$885,143)	-4%		
2	Notes Payable (Net of Current Portion)	\$634,843	\$736,885	\$102,042	16%		
	Total Long Term Debt	\$21,181,850	\$20,398,749	(\$783,101)	-4%		
3	Accrued Pension Liability	\$0	\$0	\$0	0%		
4	Other Long Term Liabilities	\$14,365,164	\$14,667,421	\$302,257	2%		
	Total Long Term Liabilities	\$35,547,014	\$35,066,170	(\$480,844)	-1%		
5	Interest in Net Assets of Affiliates or Joint	\$2,530,345	\$2,930,053	\$399,708	16%		
C.	Net Assets:						
1	Unrestricted Net Assets or Equity	\$69,255,238	\$65,190,041	(\$4,065,197)	-6%		
2	Temporarily Restricted Net Assets	\$7,764,952	\$8,315,873	\$550,921	7%		
3	Permanently Restricted Net Assets	\$40,656,969	\$42,353,101	\$1,696,132	4%		
	Total Net Assets	\$117,677,159	\$115,859,015	(\$1,818,144)	-2%		
	Total Liabilities and Net Assets	\$183,309,567	\$184,442,310	\$1,132,743	1%		
	I Otal Blayllitics alla 1461 A55615	\$ 103,303,30 <i>1</i>	φ10+,44∠,310	φ1,132,143	176		

		MONTHS ACTUAL FISCAL YEAR 2010			
	REPORT 350 - HOSPITAL ST			MATION	
(1)	(2)	(3) FY 2009	(4) FY 2010	(5) AMOUNT	(6) %
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$874,444,095	\$872,701,324	(\$1,742,771)	0%
2	Less: Allowances	\$613,049,353	\$609,807,896	(\$3,241,457)	-1%
3	Less: Charity Care	\$3,273,671	\$3,081,466	(\$192,205)	-6%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$258,121,071	\$259,811,962	\$1,690,891	1%
5	Other Operating Revenue	\$13,154,938	\$10,548,834	(\$2,606,104)	-20%
6	Net Assets Released from Restrictions	\$5,108,393	\$5,405,414	\$297,021	6%
	Total Operating Revenue	\$276,384,402	\$275,766,210	(\$618,192)	0%
В.	Operating Expenses:				
1	Salaries and Wages	\$152,082,483	\$158,857,461	\$6,774,978	4%
2	Fringe Benefits	\$0	\$0	\$0	0%
3	Physicians Fees	\$0	\$0	\$0	0%
4	Supplies and Drugs	\$90,618,383	\$90,947,561	\$329,178	0%
5	Depreciation and Amortization	\$9,919,723	\$9,815,349	(\$104,374)	-1%
6	Bad Debts	\$14,440,795	\$15,713,175	\$1,272,380	9%
7	Interest	\$1,607,522	\$1,915,699	\$308,177	19%
8	Malpractice	\$0	\$0	\$0	0%
9	Other Operating Expenses	\$12,908,481	\$2,695,434	(\$10,213,047)	-79%
	Total Operating Expenses	\$281,577,387	\$279,944,679	(\$1,632,708)	-1%
	Income/(Loss) From Operations	(\$5,192,985)	(\$4,178,469)	\$1,014,516	-20%
C.	Non-Operating Revenue:				
1	Income from Investments	\$2,668,767	\$1,308,292	(\$1,360,475)	-51%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$779,918)	\$389,113	\$1,169,031	-150%
	Total Non-Operating Revenue	\$1,888,849	\$1,697,405	(\$191,444)	-10%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$3,304,136)	(\$2,481,064)	\$823,072	-25%
	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	(\$3,304,136)	(\$2,481,064)	\$823,072	-25%

GREATER WATERBURY HEALTH NETWORK

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2010

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)	
		ACTUAL	ACTUAL	ACTUAL	
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010	
A.	Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$238,471,436	\$258,121,071	\$259,811,962	
2	Other Operating Revenue	20,646,611	18,263,331	15,954,248	
3	Total Operating Revenue	\$259,118,047	\$276,384,402	\$275,766,210	
4	Total Operating Expenses	273,973,251	281,577,387	279,944,679	
5	Income/(Loss) From Operations	(\$14,855,204)	(\$5,192,985)	(\$4,178,469)	
6	Total Non-Operating Revenue	(2,972,183)	1,888,849	1,697,405	
7	Excess/(Deficiency) of Revenue Over Expenses	(\$17,827,387)	(\$3,304,136)	(\$2,481,064)	
В.	Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-5.80%	-1.87%	-1.51%	
2	Parent Corporation Non-Operating Margin	-1.16%	0.68%	0.61%	
3	Parent Corporation Total Margin	-6.96%	-1.19%	-0.89%	
4	Income/(Loss) From Operations	(\$14,855,204)	(\$5,192,985)	(\$4,178,469)	
5	Total Operating Revenue	\$259,118,047	\$276,384,402	\$275,766,210	
6	Total Non-Operating Revenue	(\$2,972,183)	\$1,888,849	\$1,697,405	
7	Total Revenue	\$256,145,864	\$278,273,251	\$277,463,615	
8	Excess/(Deficiency) of Revenue Over Expenses	(\$17,827,387)	(\$3,304,136)	(\$2,481,064)	
C.	Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$76,183,050	\$69,255,238	\$65,190,041	
2	Parent Corporation Total Net Assets	\$128,225,998	\$117,677,159	\$115,859,015	
3	Parent Corporation Change in Total Net Assets	(\$32,105,672)	(\$10,548,839)	(\$1,818,144)	
4	Parent Corporation Change in Total Net Assets %	80.0%	-8.2%	-1.5%	

GREATER WATERBURY HEALTH NETWORK

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2010

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)		(3)	(4)		(5) ACTUAL	
			ACTUAL		ACTUAL		
LINE	DESCRIPTION		FY 2008		FY 2009		FY 2010
D.	Liquidity Measures Summary						
1	Current Ratio		1.66		2.12		1.98
2	Total Current Assets		\$61,632,369		\$58,536,223		\$60,539,447
3	Total Current Liabilities		\$37,113,057		\$27,555,049		\$30,587,072
4	Days Cash on Hand		21		27		31
5	Cash and Cash Equivalents		\$14,837,426		\$19,343,506		\$22,269,814
6	Short Term Investments		548,261		819,938		920,291
7	Total Cash and Short Term Investments		\$15,385,687		\$20,163,444		\$23,190,105
8	Total Operating Expenses		\$273,973,251		\$281,577,387		\$279,944,679
9	Depreciation Expense		\$10,474,375		\$9,919,723		\$9,815,349
10	Operating Expenses less Depreciation Expense		\$263,498,876		\$271,657,664		\$270,129,330
11	Days Revenue in Patient Accounts Receivable		59		47		48
12	Net Patient Accounts Receivable	\$	37,698,199	\$	34,132,488	\$	34,332,910
13	Due From Third Party Payers		\$575,043		\$0		\$0
14	Due To Third Party Payers		\$0		\$1,195,037		\$414,546
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$	38,273,242	\$	32,937,451	\$	33,918,364
16	Total Net Patient Revenue		\$238,471,436		\$258,121,071		\$259,811,962
17	Average Payment Period		51		37		41
18	Total Current Liabilities		\$37,113,057		\$27,555,049		\$30,587,072
19	Total Operating Expenses		\$273,973,251		\$281,577,387		\$279,944,679
20	Depreciation Expense		\$10,474,375		\$9,919,723		\$9,815,349
21	Total Operating Expenses less Depreciation Expense		\$263,498,876		\$271,657,664		\$270,129,330

GREATER WATERBURY HEALTH NETWORK TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2010 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS** (1) (2) (3) (4) (5) **ACTUAL ACTUAL** ACTUAL LINE DESCRIPTION FY 2008 FY 2009 FY 2010 E. Solvency Measures Summary 64.9 64.2 62.8 **Equity Financing Ratio** Total Net Assets \$128,225,998 \$117,677,159 \$115,859,015 Total Assets \$197,535,542 \$183,309,567 \$184,442,310 4 **Cash Flow to Total Debt Ratio** (12.4)13.6 14.4 Excess/(Deficiency) of Revenues Over Expenses (\$17,827,387) (\$3,304,136)(\$2,481,064)\$9,919,723 6 Depreciation Expense \$10,474,375 \$9,815,349 Excess of Revenues Over Expenses and Depreciation Expense (\$7,353,012) \$6,615,587 \$7,334,285 \$30,587,072 Total Current Liabilities \$37,113,057 \$27,555,049 9 Total Long Term Debt \$21,953,034 \$21,181,850 \$20,398,749 10 Total Current Liabilities and Total Long Term Debt \$59,066,091 \$48,736,899 \$50,985,821 11 Long Term Debt to Capitalization Ratio 14.6 15.3 15.0 12 Total Long Term Debt \$21,953,034 \$20,398,749 \$21,181,850 13 Total Net Assets \$128,225,998 \$117,677,159 \$115,859,015

14 Total Long Term Debt and Total Net Assets

\$150,179,032

\$136,257,764

\$138,859,009

			ERBURY HOSPITA			
			MONTHS ACTUAL F			
			FISCAL YEAR 2010			
	REPOR	T 400 - HOSPITAL INP	ATIENT BED UTILIZ	ATION BY DEPART	MENT	
(1)	(2)	(3)	(4)	(5)	(6)	(7)
(.,	(-)	(0)	1.7	(0)	OCCUPANCY	OCCUPANCY
		PATIENT	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	39,527	118	171	91.8%	63.3%
2	ICU/CCU (Excludes Neonatal ICU)	4,890	16	20	83.7%	67.0%
3	Psychiatric: Ages 0 to 17	1.145	5	5	62.7%	62.7%
4	Psychiatric: Ages 18+	5,588	25	25	61.2%	61.2%
	TOTAL PSYCHIATRIC	6,733	30	30	61.5%	61.5%
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	3,095	10	27	84.8%	31.4%
7	Newborn	2,166	10	36	59.3%	16.5%
8	Neonatal ICU	1,386	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0.0%	0.0%
10	Other	1,474	8	8	50.5%	50.5%
	TOTAL EXCLUDING NEWBORN	57,105	182	256	86.0%	61.1%
	TOTAL INPATIENT BED UTILIZATION	59,271	192	292	84.6%	55.6%
	TOTAL INPATIENT REPORTED YEAR	59,271	192	292	84.6%	55.6%
	TOTAL INPATIENT PRIOR YEAR	67,682	214	292	86.6%	63.5%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-8,411	-22	0	-2.1%	-7.9%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-12%	-10%	0%	-2%	-12%
	Total Licensed Beds and Bassinets	393				
(A) T	his number may not exceed the number of available	beds for each departr	ment or in total			
(/-1/	no named. May not exceed the named of available	Date for each acparti	or in total			

		TERBURY HOSPITA			
	TWELVE	MONTHS ACTUAL			
		FISCAL YEAR 2010			
	REPORT 450 - HOSPITAL INPATIENT AN	ID OUTPATIENT OTI	HER SERVICES UTIL	IZATION AND FTE	8
(4)	(2)	(2)	(4)	(E)	(6)
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
Α.	CT Scans (A)				
1	Inpatient Scans	9,426	8,278	-1,148	-12%
	Outpatient Scans (Excluding Emergency Department				
	Scans)	4,514	3,581	-933	-21%
	Emergency Department Scans	8,495	9,405	910	11%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	22,435	21,264	-1,171	-5%
_	MDI O (A)				
	MRI Scans (A)	0	0	0	00/
	Inpatient Scans Outpatient Scans (Excluding Emergency Department	0	0	0	0%
	Scans)	0	0	0	0%
	Emergency Department Scans	0	0	0	0%
	Other Non-Hospital Providers' Scans (A)	2,631	2,361	-270	-10%
	Total MRI Scans	2,631	2,361	-270	-10%
		•	,		
C.	PET Scans (A)				
	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A) Total PET Scans	0	0	0 0	0%
	Total PET Scans	0	0	U	0%
D.	PET/CT Scans (A)				
	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department	0	0	0	070
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	0	0	0	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	the scans.		
_	I Sanan Asan Israelan Burasa Israelan				
	Linear Accelerator Procedures	0	0	0	00/
	Inpatient Procedures Outpatient Procedures	0	0	0	0% 0%
	Total Linear Accelerator Procedures	0			0%
	1 Star Enious Accommunity 1 Tooledules	0			U /0
F.	Cardiac Catheterization Procedures				
	Inpatient Procedures	681	608	-73	-11%
2	Outpatient Procedures	278	318	40	14%
	Total Cardiac Catheterization Procedures	959	926	-33	-3%
	Cardiac Angioplasty Procedures				
	Primary Procedures	156	122	-34	-22%
2	Elective Procedures	206			17%
	Total Cardiac Angioplasty Procedures	362	362	0	0%
LI LI	Electrophysiology Studios				
H. 1	Electrophysiology Studies Inpatient Studies	0	0	0	0%
	Outpatient Studies	0		0	0%
-	Total Electrophysiology Studies	0	0	0	0%
			,		370
l.	Surgical Procedures				
	Inpatient Surgical Procedures	3,557	3,272	-285	-8%
2	Outpatient Surgical Procedures	5,156	4,504	-652	-13%
	Total Surgical Procedures	8,713	7,776	-937	-11%
J.	Endoscopy Procedures				

		TERBURY HOSPITAL MONTHS ACTUAL FIL	ING		
	IWELVE	FISCAL YEAR 2010	LING		
	REPORT 450 - HOSPITAL INPATIENT AN		D SEDVICES LITIL I	ZATION AND ETES	
	REFORT 430 - HOSFITAE INFAILENT AN	D OOT ATIENT OTTE	K SERVICES OTIEI	ZATION AND ITES	
(1)	(2)	(3)	(4)	(5)	(6)
(-)	(-/	(-)	\-7	(-)	(0)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	859	869	10	1%
	Outpatient Endoscopy Procedures	2,474	2,455	-19	-1%
	Total Endoscopy Procedures	3,333	3,324	-9	0%
	Hospital Emergency Room Visits				
	Emergency Room Visits: Treated and Admitted	8,895	8,340	-555	-6%
	Emergency Room Visits: Treated and Discharged	49,237	49,393	156	0%
	Total Emergency Room Visits	58,132	57,733	-399	-1%
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
	Dental Clinic Visits	0	0	0	0%
	Psychiatric Clinic Visits	29,060	27,272	-1,788	-6%
	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	0	0	0	0%
	Total Hospital Clinic Visits	29,060	27,272	-1,788	-6%
М.	Other Hospital Outpatient Visits				
	Rehabilitation (PT/OT/ST)	0	0	0	0%
	Cardiology	3,625	3,635	10	0%
	Chemotherapy	0	0	0	0%
	Gastroenterology	2,181	2,015	-166	-8%
5	Other Outpatient Visits	120,220	109,945	-10,275	-9%
	Total Other Hospital Outpatient Visits	126,026	115,595	-10,431	-8%
N.	Hospital Full Time Equivalent Employees				
	Total Nursing FTEs	381.0	361.5	-19.5	-5%
2	Total Physician FTEs	120.8	86.7	-34.1	-28%
3	Total Non-Nursing and Non-Physician FTEs	1,087.4	1,064.9	-22.5	-2%
	Total Hospital Full Time Equivalent Employees	1,589.2	1,513.1	-76.1	-5%

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2010** REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION (1) (2) (3) (4) (5) (6) ACTUAL ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2009 FY 2010 DIFFERENCE DIFFERENCE A. **Outpatient Surgical Procedures** Waterbury Hospital 5,156 4,504 -652 -13% Total Outpatient Surgical Procedures(A) 5,156 4,504 -652 -13% В. **Outpatient Endoscopy Procedures** Waterbury Hospital 2,474 2,455 -19 -1% Total Outpatient Endoscopy Procedures(B) 2,474 2,455 -19 -1% **Outpatient Hospital Emergency Room Visits** C. 49,237 49,393 156 0% Waterbury Hospital **Total Outpatient Hospital Emergency Room Visits(** 49,237 49,393 156 0% (A) Must agree with Total Outpatient Surgical Procedures on Report 450. (B) Must agree with Total Outpatient Endoscopy Procedures on Report 450. (C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND DAGLLINE ONDERN ATT	ILITI DATA. COMI ANA	IVE ANALIO	10	
		ACTUAL	ACTUAL	AMOUNT	%
	DECODIDATION				
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
Α.	MEDICARE				
	MEDIO/ACE				
	MEDICARE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$306,685,830	\$289,293,480	(\$17,392,350)	-6%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$85,316,492	\$80,921,944	(\$4,394,548)	-5%
	INPATIENT PAYMENTS / INPATIENT CHARGES	27.82%	27.97%	0.15%	1%
	DISCHARGES	6.496	6.077	(419)	-6%
5	CASE MIX INDEX (CMI)	1.59270	1.66675	0.07405	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	10,346.17920	10,128.83975	(217.33945)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,246.18	\$7,989.26	(\$256.92)	-3%
8	PATIENT DAYS	38,627	32,894	(5,733)	-15%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,208.73	\$2,460.08	\$251.36	11%
10	AVERAGE LENGTH OF STAY	5.9	5.4	(0.5)	-9%
				` '	
	MEDICARE OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$98,041,033	\$99,103,375	\$1,062,342	1%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$20,105,533	\$18,596,203	(\$1,509,330)	-8%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.51%	18.76%	-1.74%	-8%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	31.97%	34.26%	2.29%	7%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,076.63507	2,081.80015	5.16508	0%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,681.78	\$8,932.75	(\$749.03)	-8%
			-		-
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)		<u>-</u>		
17	TOTAL ACCRUED CHARGES	\$404,726,863	\$388,396,855	(\$16,330,008)	-4%
18	TOTAL ACCRUED PAYMENTS	\$105,422,025	\$99,518,147	(\$5,903,878)	-6%
19	TOTAL ALLOWANCES	\$299,304,838	\$288,878,708	(\$10,426,130)	-3%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
B.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)				
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$151,040,234	\$148,946,176	(\$2,094,058)	-1%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$51,625,908	\$50,858,087	(\$767,821)	-1%
3	INPATIENT ACCROED FATMENTS (IN FINIT)	34.18%	34.15%	-0.03%	0%
	DISCHARGES	4.524	3.968	(556)	-12%
	CASE MIX INDEX (CMI)	1.29365	1.31516	0.02151	2%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,852.47260	5,218.55488	(633.91772)	-11%
	INPATIENT ACCRUED PAYMENT / CMAD	\$8,821.21	\$9,745.63	\$924.41	10%
	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$575.03)	(\$1,756.37)	(\$1,181.34)	205%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,365,345)	(\$9,165,690)	(\$5,800,345)	172%
	PATIENT DAYS	16,368	14,259	(2,109)	-13%
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,154.08	\$3,566.74	\$412.66	13%
	AVERAGE LENGTH OF STAY	3.6	3.6	(0.0)	-1%
				(5.5)	.,,
	NON-GOVERNMENT OUTPATIENT				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$144,321,726	\$131,790,935	(\$12,530,791)	-9%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$41,891,765	\$38,274,902	(\$3,616,863)	-9%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.03%	29.04%	0.02%	0%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	95.55%	88.48%	-7.07%	-7%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,322.76534	3,510.97587	(811.78947)	-19%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,690.96	\$10,901.50	\$1,210.54	12%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$9.18)	(\$1,968.75)	(\$1,959.57)	21346%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$39,683)	(\$6,912,228)	(\$6,872,545)	17319%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$295,361,960	\$280,737,111	(\$14,624,849)	-5%
22	TOTAL ACCRUED PAYMENTS	\$93,517,673	\$89,132,989	(\$4,384,684)	-5%
23	TOTAL ALLOWANCES	\$201,844,287	\$191,604,122	(\$10,240,165)	-5%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2.40E.020)	(ft4C 077 040)	(040 C70 000)	2720/
24	TOTAL OFFER LIMIT (OVER) / UNDERFATIMENT	(\$3,405,028)	(\$16,077,918)	(\$12,672,890)	372%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$275,365,397	\$264,386,049	(\$10,979,348)	-4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$89,650,520	\$89,678,587	\$28,067	0%
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	‡30,000,0 <u>2</u> 0	\$22,070,000	\$20,007	
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$185,714,877	\$174,707,462	(\$11,007,415)	-6%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	67.44%	66.08%		

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

FISCAL YEAR 2010

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$8,867,028	\$7,496,163	(\$1,370,865)	-15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,031,285	\$105,638	(\$925,647)	-90%
-	INPATIENT PAYMENTS / INPATIENT CHARGES	11.63%	1.41%	-10.22%	-88%
	DISCHARGES	265	216	(49)	-18%
	CASE MIX INDEX (CMI)	1.14660	1.16090	0.01430	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	303.84900	250.75440	(53.09460)	-17%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,394.07	\$421.28	(\$2,972.79)	-88%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$5,427.14	\$9,324.35	\$3,897.20	72%
	MEDICARE - UNINSURED IP PMT / CMAD	\$4,852.11	\$7,567.98	\$2,715.87	56%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,474,310	\$1,897,704	\$423,395	29%
	PATIENT DAYS	1,146	824	(322)	-28%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$899.90	\$128.20	(\$771.70)	-86%
13	AVERAGE LENGTH OF STAY	4.3	3.8	(0.5)	-12%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$11,129,535	\$8,854,899	(\$2,274,636)	-20%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,642,339	\$608,463	(\$3,033,876)	-83%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.73%	6.87%	-25.86%	-79%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	125.52%	118.13%	-7.39%	-6%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	332.61728	255.15163	(77.46566)	-23%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,950.54	\$2,384.71	(\$8,565.83)	-78%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	(\$1,259.58)	\$8,516.79	\$9,776.36	-776%
21	MEDICARE - UNINSURED OP PMT / OPED	(\$1,268.76)	\$6,548.04	\$7,816.80	-616%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$422,010)	\$1,670,743	\$2,092,753	-496%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$19,996,563	\$16,351,062	(\$3,645,501)	-18%
24	TOTAL ACCRUED PAYMENTS	\$4,673,624	\$714,101	(\$3,959,523)	-85%
25	TOTAL ALLOWANCES	\$15,322,939	\$15,636,961	\$314,022	2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1.052.299	\$3.568.447	\$2.516.148	239%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
D.	STATE OF CONNECTICUT MEDICAID				
	MEDICAID INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$56,278,557	\$57,681,344	\$1,402,787	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,098,394	\$10,693,504	(\$1,404,890)	-12%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.50%	18.54%	-2.96%	-14%
	DISCHARGES	2,363	2,411	48	2%
	CASE MIX INDEX (CMI)	1.88630	0.99880	(0.88750)	-47%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,457.32690	2,408.10680	(2,049.22010)	-46%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,714.27	\$4,440.63	\$1,726.36	64%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,106.94	\$5,305.00	(\$801.94)	-13%
	MEDICARE - MEDICAID IP PMT / CMAD	\$5,531.91	\$3,548.63	(\$1,983.28)	-36%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$24,657,541	\$8,545,490	(\$16,112,052)	-65%
	PATIENT DAYS	9,943	9,412	(531)	-5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,216.78	\$1,136.16	(\$80.62)	-7%
13	AVERAGE LENGTH OF STAY	4.2	3.9	(0.3)	-7%
	MEDICAID OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$51,257,026	\$51,001,212	(\$255,814)	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,525,170	\$8,793,978	(\$731,192)	-8%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.58%	17.24%	-1.34%	-7%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	91.08%	88.42%	-2.66%	-3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,152.15810	2,131.77977	(20.37833)	-1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,425.87	\$4,125.18	(\$300.69)	-7%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,265.10	\$6,776.32	\$1,511.22	29%
21	MEDICARE - MEDICAID OP PMT / OPED	\$5,255.92	\$4,807.57	(\$448.35)	-9%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,311,561	\$10,248,681	(\$1,062,880)	-9%
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$107,535,583	\$108,682,556	\$1,146,973	1%
24	TOTAL ACCRUED PAYMENTS	\$21,623,564	\$19,487,482	(\$2,136,082)	-10%
25	TOTAL ALLOWANCES	\$85,912,019	\$89,195,074	\$3,283,055	4%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$35,969,102	\$18,794,170	(\$17,174,932)	-48%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)				
	OTHER MEDICAL ASSISTANCE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$19,981,018	\$21,017,773	\$1,036,755	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,538,371	\$2,291,206	\$752,835	49%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	7.70%	10.90%	3.20%	42%
4	DISCHARGES	518	580	62	12%
5	CASE MIX INDEX (CMI)	1.16160	1.17310	0.01150	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	601.70880	680.39800	78.68920	13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,556.67	\$3,367.45	\$810.78	32%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$6,264.54	\$6,378.18	\$113.63	2%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$5,689.51	\$4,621.81	(\$1,067.70)	-19%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,423,430	\$3,144,671	(\$278,759)	-8%
11	PATIENT DAYS	2,625	2,664	39	1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$586.05	\$860.06	\$274.02	47%
13	AVERAGE LENGTH OF STAY	5.1	4.6	(0.5)	-9%
	OTHER MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$16,041,941	\$16,059,756	\$17,815	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,401,067	\$1,314,373	(\$86,694)	-6%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	8.73%	8.18%	-0.55%	-6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	80.29%	76.41%	-3.88%	-5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	415.88098	443.18009	27.29910	7%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,368.91	\$2,965.78	(\$403.14)	-12%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$6,322.05	\$7,935.72	\$1,613.67	26%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$6,312.87	\$5,966.98	(\$345.90)	-5%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,625,403	\$2,644,445	\$19,041	1%
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$36,022,959	\$37,077,529	\$1,054,570	3%
24	TOTAL ACCRUED PAYMENTS	\$2,939,438	\$3,605,579	\$666,141	23%
25	TOTAL ALLOWANCES	\$33,083,521	\$33,471,950	\$388,429	1%
	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$6.048.833	\$5.789.116	(\$259.718)	-4%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDIC	CAL ASSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$76,259,575	\$78,699,117	\$2,439,542	30
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,636,765	\$12,984,710	(\$652,055)	-5°
3	INPATIENT PAYMENTS / INPATIENT CHARGES	17.88%	16.50%	-1.38%	-89
4	DISCHARGES	2,881	2,991	110	49
5	CASE MIX INDEX (CMI)	1.75600	1.03260	(0.72340)	-419
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,059.03570	3,088.50480	(1,970.53090)	-399
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,695.53	\$4,204.21	\$1,508.68	569
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,125.69	\$5,541.42	(\$584.27)	-109
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,550.66	\$3,785.06	(\$1,765.60)	-329
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$28,080,972	\$11,690,161	(\$16,390,811)	-589
11	PATIENT DAYS	12,568	12,076	(492)	-49
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,085.04	\$1,075.25	(\$9.79)	-19
13	AVERAGE LENGTH OF STAY	4.4	4.0	(0.3)	-7%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$67,298,967	\$67,060,968	(\$237,999)	0%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$10,926,237	\$10,108,351	(\$817,886)	-7%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.24%	15.07%	-1.16%	-7%
	OUTPATIENT CHARGES / INPATIENT CHARGES	88.25%	85.21%	-3.04%	-3%
	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,568.03909	2,574.95986	6.92077	09
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,254.70	\$3,925.63	(\$329.07)	-89
	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,436.26	\$6,975.87	\$1,539.60	289
	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,427.08	\$5,007.12	(\$419.97)	-89
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$13,936,964	\$12,893,125	(\$1,043,839)	-79
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$143,558,542	\$145,760,085	\$2,201,543	29
	TOTAL ACCRUED PAYMENTS	\$24,563,002	\$23,093,061	(\$1,469,941)	-6%
25	TOTAL ALLOWANCES	\$118,995,540	\$122,667,024	\$3,671,484	39

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$803,012	\$433,901	(\$369,111)	-46%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$106,979	\$100.569	(\$6,410)	-40%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	13.32%	23.18%	9.86%	74%
4	DISCHARGES	15.52 %	23.10%	9.00%	-33%
5	CASE MIX INDEX (CMI)	1.66010	1.71500	0.05490	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	24.90150	17.15000	(7.75150)	-31%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,296.09	\$5,864.08	\$1,568.00	36%
8	PATIENT DAYS	119	42	(77)	-65%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$898.98	\$2,394.50	\$1,495.52	166%
10	AVERAGE LENGTH OF STAY	7.9	4.2	(3.7)	-47%
10	WEIGHOL ELHOTT OF WITH	7.5	7.2	(5.7)	-47 70
	CHAMPUS / TRICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$463,890	\$439,975	(\$23,915)	-5%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$137,976	\$97,339	(\$40,637)	-29%
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
13	TOTAL ACCRUED CHARGES	\$1,266,902	\$873,876	(\$393,026)	-31%
14	TOTAL ACCRUED PAYMENTS	\$244,955	\$197,908	(\$47,047)	-19%
15	TOTAL ALLOWANCES	\$1,021,947	\$675,968	(\$345,979)	-34%
Н.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$13,073,722	\$10,576,444	(\$2,497,278)	-19%
2	TOTAL OPERATING EXPENSES	\$253,532,594	\$237,519,576	(\$16,013,018)	-6%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$1,753,777	\$1,673,113	(\$80,664)	-5%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$1,809,921	\$1,910,845	\$100.924	6%
5	BAD DEBTS (CHARGES)	\$14,319,487	\$14,985,815	\$666,328	5%
6	UNCOMPENSATED CARE (CHARGES)	\$16,129,408	\$16,896,660	\$767,252	5%
7	COST OF UNCOMPENSATED CARE	\$4,304,821	\$4,424,523	\$119,702	3%
'	OSS. O. G.	ψτ,500τ,021	ψτ,τ∠τ,323	ψ113,702	3/6
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)				
8	TOTAL ACCRUED CHARGES	\$143,558,542	\$145,760,085	\$2,201,543	2%
9	TOTAL ACCRUED PAYMENTS	\$24,563,002	\$23,093,061	(\$1,469,941)	-6%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$38,314,724	\$38,168,419	(\$146,305)	0%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$13,751,722	\$15,075,358	\$1,323,636	10%

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

		ACTUAL	ACTUAL	AMOUNT	%
INE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
II.	AGGREGATE DATA				
Α.	TOTALS - ALL PAYERS				
1	TOTAL INPATIENT CHARGES	\$534,788,651	\$517,372,674	(\$17,415,977)	-3'
2	TOTAL INPATIENT PAYMENTS	\$150.686.144	\$144,865,310	(\$5,820,834)	-4
3	TOTAL INPATIENT PAYMENTS / CHARGES	28.18%	28.00%	-0.18%	-1
4	TOTAL DISCHARGES	13,916	13,046	(870)	-6
5	TOTAL CASE MIX INDEX	1.52936	1.41446	(0.11490)	-8
6	TOTAL CASE MIX ADJUSTED DISCHARGES	21,282,58900	18.453.04943	(2.829.53957)	-13
7	TOTAL OUTPATIENT CHARGES	\$310,125,616	\$298,395,253	(\$11,730,363)	-4
8	OUTPATIENT CHARGES / INPATIENT CHARGES	57.99%	57.68%	-0.32%	-1
9	TOTAL OUTPATIENT PAYMENTS	\$73,061,511	\$67,076,795	(\$5,984,716)	-8
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.56%	22.48%	-1.08%	-5
11	TOTAL CHARGES	\$844,914,267	\$815,767,927	(\$29,146,340)	-3
12	TOTAL PAYMENTS	\$223.747.655	\$211.942.105	(\$11.805.550)	
13	TOTAL PAYMENTS / TOTAL CHARGES	26.48%	25.98%	-0.50%	-2
14	PATIENT DAYS	67.682	59.271	(8,411)	-12 -12
14	FAILINI DAIS	67,002	39,271	(0,411)	-12
B.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$383,748,417	\$368,426,498	(\$15,321,919)	-4
2	INPATIENT PAYMENTS	\$99,060,236	\$94,007,223	(\$5,053,013)	
3	GOVT. INPATIENT PAYMENTS / CHARGES	25.81%	25.52%	-0.30%	
4	DISCHARGES	9,392	9,078	(314)	-<
5	CASE MIX INDEX	1.64290	1.45786	(0.18504)	-11
6	CASE MIX ADJUSTED DISCHARGES	15,430.11640	13,234.49455	(2,195.62185)	-14
7	OUTPATIENT CHARGES	\$165,803,890	\$166,604,318	\$800,428	(
8	OUTPATIENT CHARGES / INPATIENT CHARGES	43.21%	45.22%	2.01%	
9	OUTPATIENT PAYMENTS	\$31,169,746	\$28,801,893	(\$2,367,853)	-8
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.80%	17.29%	-1.51%	-{
11	TOTAL CHARGES	\$549,552,307	\$535,030,816	(\$14,521,491)	-3
12	TOTAL PAYMENTS	\$130,229,982	\$122,809,116	(\$7,420,866)	-(
13	TOTAL PAYMENTS / CHARGES	23.70%	22.95%	-0.74%	-<
14	PATIENT DAYS	51,314	45,012	(6,302)	-12
15	TOTAL GOVERNMENT DEDUCTIONS	\$419,322,325	\$412,221,700	(\$7,100,625)	-2
C.	AVERAGE LENGTH OF STAY				
	MEDICARE	5.9	5.4	(0.5)	-6
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.6	(0.0)	-1
3	UNINSURED	4.3	3.8	(0.0)	- -12
_	MEDICAID	4.3	3.8	(0.3)	- 12 -7
	OTHER MEDICAL ASSISTANCE			. ,	
-	CHAMPUS / TRICARE	5.1	4.6	(0.5)	
6	TOTAL AVERAGE LENGTH OF STAY	7.9	4.2	(3.7)	-47
7	TOTAL AVERAGE LENGTH OF STAY	4.9	4.5	(0.3)	-

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS							
		4071141	4071141	****				
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	<u>DESCRIPTION</u>	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE			
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION							
	TOTAL CHARGES	\$844,914,267	\$815,767,927	(\$29,146,340)	-3%			
2	TOTAL GOVERNMENT DEDUCTIONS	\$419,322,325	\$412,221,700	(\$7,100,625)	-2%			
3	UNCOMPENSATED CARE	\$16,129,408	\$16,896,660	\$767,252				
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$185,714,877	\$174,707,462	(\$11,007,415)	-6%			
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%			
6	TOTAL ADJUSTMENTS	\$621,166,610	\$603,825,822	(\$17,340,788)	-3%			
7	TOTAL ACCRUED PAYMENTS	\$223,747,657	\$211,942,105	(\$11,805,552)	-5%			
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$1,753,777	\$1,673,113	(\$80,664)	-5%			
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$225,501,434	\$213,615,218	(\$11,886,216)	-5%			
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2668926811	0.2618578286	(0.0050348525)	-2%			
11	COST OF UNCOMPENSATED CARE	\$4,304,821	\$4,424,523	\$119,702	3%			
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$13,751,722	\$15,075,358	\$1,323,636	10%			
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%			
	TOTAL COST OF UNCOMPENSATED CARE AND	Ψ	Ψ0	Ψ0	0,0			
	MEDICAL ASSISTANCE UNDERPAYMENT	\$18,056,543	\$19,499,881	\$1,443,338	8%			
		, ,,,,,,,,	* -,,	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)							
1	MEDICAID	\$11,311,561	\$10,248,681	(\$1,062,880)	-9%			
	OTHER MEDICAL ASSISTANCE	\$6,048,833	\$5,789,116	(\$259,718)	-4%			
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,052,299	\$3,568,447	\$2,516,148	239%			
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$18,412,693	\$19,606,244	\$1,193,550	6%			
	TOTAL GREEGE TIES GREEK ATTILLET (GIT EX EIIIIT IIIE THOSGEGOT)	¥10,11=,000	* · · · · · · · · · · · · · · · · · · ·	V 1,100,000				
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600							
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%			
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$14,427,091	\$15,396,099	\$969,008	6.72%			
	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$239,928,524	\$229.011.318	(\$10,917,206)	-4.55%			
-	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%			
	GROSS REVENUE FROM HOSP AUDIT. FINANCIAL STATEMENTS	\$844,914,262	\$815,767,934	(\$29,146,328)	-3.45%			
-	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$1,463,750	\$1,170,621	(\$293,129)	-20.03%			
-	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$17.593.158	\$18.067.281	\$474.123	2.69%			
	STOCKET TO STATE TO STATE ASSET TO STATE OF A STATE OF	ψ17,555,156	ψ10,007,201	Ψ1,123	2.0370			

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	WATERBURY HOSPITAL	1	1	
	TWELVE MONTHS ACTUAL FILING	3		
	FISCAL YEAR 2010			
	REPORT 550 - CALCULATION OF DSH UPPER PAY			
	BASELINE UNDERPAYMENT DAT	A	T.	
(4)	(9)	(0)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
Α.	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$151,040,234	\$148,946,176	(\$2,094,058)
	MEDICARE	\$306,685,830	289,293,480	(\$17,392,350)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$76,259,575 \$56,278,557	78,699,117 57,681,344	\$2,439,542 \$1,402,787
	OTHER MEDICAL ASSISTANCE	\$19,981,018	21,017,773	\$1,036,755
6	CHAMPUS / TRICARE	\$803,012	433,901	(\$369,111)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,867,028	7,496,163	(\$1,370,865)
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$383,748,417 \$534,788,651	\$368,426,498 \$517,372,674	(\$15,321,919) (\$17,415,977)
		+	+	(4)+10,011)
	OUTPATIENT ACCRUED CHARGES	A	0.10.1 70.	(0.0.=====
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$144,321,726 \$98,041,033	\$131,790,935 99,103,375	(\$12,530,791) \$1,062,342
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$67,298,967	67,060,968	(\$237,999)
	MEDICAID	\$51,257,026	51,001,212	(\$255,814)
	OTHER MEDICAL ASSISTANCE	\$16,041,941	16,059,756	\$17,815
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$463,890 \$11,129,535	439,975 8,854,899	(\$23,915) (\$2,274,636)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$165,803,890	\$166,604,318	\$800,428
	TOTAL OUTPATIENT CHARGES	\$310,125,616	\$298,395,253	(\$11,730,363)
C.	TOTAL ACCRUED CHARGES			
1	TOTAL ACCROED CHARGES TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$295,361,960	\$280,737,111	(\$14,624,849)
2	TOTAL MEDICARE	\$404,726,863	\$388,396,855	(\$16,330,008)
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) TOTAL MEDICAID	\$143,558,542	\$145,760,085	\$2,201,543
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$107,535,583 \$36,022,959	\$108,682,556 \$37,077,529	\$1,146,973 \$1,054,570
6	TOTAL CHAMPUS / TRICARE	\$1,266,902	\$873,876	(\$393,026)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$19,996,563	\$16,351,062	(\$3,645,501)
	TOTAL GOVERNMENT CHARGES TOTAL CHARGES	\$549,552,307 \$844,914,267	\$535,030,816 \$815,767,927	(\$14,521,491) (\$29,146,340)
		\$011,011,201	40.10).10.1,02.	(+20): 10,0:10)
	INPATIENT ACCRUED PAYMENTS	ATI 007 000	*	(0=0=004)
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$51,625,908 \$85,316,492	\$50,858,087 80,921,944	(\$767,821) (\$4,394,548)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$13,636,765	12,984,710	(\$652,055)
	MEDICAID	\$12,098,394	10,693,504	(\$1,404,890)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$1,538,371 \$106,979	2,291,206 100,569	\$752,835 (\$6,410)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,031,285	105,638	(\$925,647)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$99,060,236	\$94,007,223	(\$5,053,013)
	TOTAL INPATIENT PAYMENTS	\$150,686,144	\$144,865,310	(\$5,820,834)
E.	OUTPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$41,891,765	\$38,274,902	(\$3,616,863)
	MEDICARE	\$20,105,533	18,596,203	(\$1,509,330)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$10,926,237 \$9,525,170	10,108,351 8,793,978	(\$817,886) (\$731,192)
	OTHER MEDICAL ASSISTANCE	\$1,401,067	1,314,373	(\$86,694)
	CHAMPUS / TRICARE	\$137,976	97,339	(\$40,637)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$3,642,339 \$31,169,746	608,463 \$28,801,893	(\$3,033,876) (\$2,367,853)
	TOTAL OUTPATIENT GOVERNMENT PATMENTS TOTAL OUTPATIENT PAYMENTS	\$73,061,511	\$67,076,795	(\$2,367,853) (\$5,984,716)
_		. , , , , , , , , , , , , , , , , , , ,	. , -,	
	TOTAL ACCRUED PAYMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$93,517,673	\$89,132,989	(\$4,384,684)
	TOTAL MEDICARE	\$105,422,025	\$99,518,147	(\$5,903,878)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$24,563,002	\$23,093,061	(\$1,469,941)
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$21,623,564 \$2,939,438	\$19,487,482 \$3,605,579	(\$2,136,082) \$666,141
	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$2,939,438 \$244,955	\$3,605,579	(\$47,047)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,673,624	\$714,101	(\$3,959,523)
	TOTAL GOVERNMENT PAYMENTS	\$130,229,982	\$122,809,116	(\$7,420,866)
\vdash	TOTAL PAYMENTS	\$223,747,655	\$211,942,105	(\$11,805,550)
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	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2010			
		FAIT I INNET AND		
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENI LIWIII AND		
	BASELINE UNDERPAYMENT DATA			
	(0)	(2)	(0)	(=)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
IINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE
LIIVL	DESCRIPTION	1 1 2005	1 1 2010	DITTERENOL
II.	PAYER MIX			
A.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.88%	18.26%	0.38%
	MEDICARE	36.30%	35.46%	-0.84%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.03%	9.65%	0.62%
	MEDICAID OTHER MEDICAL ASSISTANCE	6.66%	7.07%	0.41%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	2.36% 0.10%	2.58% 0.05%	0.21% -0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.05%	0.05%	-0.04%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	45.42%	45.16%	-0.16%
	TOTAL INPATIENT PAYER MIX	63.30%	63.42%	0.13%
B.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.08%	16.16%	-0.93%
	MEDICARE	11.60%	12.15%	0.54%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.97%	8.22%	0.26%
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	6.07% 1.90%	6.25% 1.97%	0.19% 0.07%
	CHAMPUS / TRICARE	0.05%	0.05%	0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.32%	1.09%	-0.23%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.62%	20.42%	0.80%
	TOTAL OUTPATIENT PAYER MIX	36.70%	36.58%	-0.13%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
4	NON COVERNMENT (INCLUDING CELE DAY (LININGLIDED)	23.07%	24.000/	0.000/
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	38.13%	24.00% 38.18%	0.92% 0.05%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.09%	6.13%	0.05%
	MEDICAID	5.41%	5.05%	-0.36%
	OTHER MEDICAL ASSISTANCE	0.69%	1.08%	0.39%
6	CHAMPUS / TRICARE	0.05%	0.05%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.46%	0.05%	-0.41%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	44.27%	44.36%	0.08%
	TOTAL INPATIENT PAYER MIX	67.35%	68.35%	1.00%
_	OUTDATIENT DAVED MIV DAGED ON ACCOURD DAVMENTS			
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.72%	18.06%	-0.66%
	MEDICARE	8.99%	8.77%	-0.0076
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.88%	4.77%	-0.11%
4	MEDICAID	4.26%	4.15%	-0.11%
5	OTHER MEDICAL ASSISTANCE	0.63%	0.62%	-0.01%
6	CHAMPUS / TRICARE	0.06%	0.05%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.63%	0.29%	-1.34%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	13.93%	13.59%	-0.34%
	TOTAL OUTPATIENT PAYER MIX	32.65%	31.65%	-1.00%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	400.000/	400.000/	0.000
	TOTAL FATEN WIN DASED ON ACCRUED FATMENTS	100.00%	100.00%	0.00%
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	WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2010			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(4)	(9)	(2)	(4)	(E)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	<u>DESCRIPTION</u>	FY 2009	FY 2010	DIFFERENCE
Ш	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
A.	<u>DISCHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,524	3,968	(556)
	MEDICARE	6,496	6,077	(419)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	2,881 2,363	2,991 2,411	110 48
_	OTHER MEDICAL ASSISTANCE	518	580	62
6	CHAMPUS / TRICARE	15	10	(5)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	265 9,392	216 9,078	(49) (314)
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	13,916	13,046	(870)
_	DATIFALT DAVE			
В.	PATIENT DAYS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16,368	14,259	(2,109)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	38,627 12,568	32,894 12,076	(5,733) (492)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,943	9,412	(531)
	OTHER MEDICAL ASSISTANCE	2,625	2,664	39
	CHAMPUS / TRICARE	119	42 824	(77)
- '-	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT PATIENT DAYS	1,146 51,314	45,012	(6,302)
	TOTAL PATIENT DAYS	67,682	59,271	(8,411)
C.	AVERAGE LENGTH OF STAY (ALOS)			
<u> </u>	AVERAGE LENGTH OF STAT (ALOS)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.6	(0.0)
_	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.9 4.4	5.4 4.0	(0.5)
	MEDICALD	4.2	3.9	(0.3)
	OTHER MEDICAL ASSISTANCE	5.1	4.6	(0.5)
6	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	7.9 4.3	4.2 3.8	(3.7)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.5	5.0	(0.5)
	TOTAL AVERAGE LENGTH OF STAY	4.9	4.5	(0.3)
D.	CASE MIX INDEX			
_	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.29365 1.59270	1.31516	0.02151
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.75600	1.66675 1.03260	0.07405 (0.72340)
4	MEDICAID	1.88630	0.99880	(0.88750)
	OTHER MEDICAL ASSISTANCE	1.16160	1.17310	0.01150
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.66010 1.14660	1.71500 1.16090	0.05490 0.01430
	TOTAL GOVERNMENT CASE MIX INDEX	1.64290	1.45786	(0.18504)
	TOTAL CASE MIX INDEX	1.52936	1.41446	(0.11490)
E.	OTHER REQUIRED DATA			
				(4
2	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$275,365,397 \$89,650,520	\$264,386,049 \$89,678,587	(\$10,979,348) \$28,067
Ľ	AGGREED I ATIVIENTO AGGOCIATED WITH NON-GOVERNIWENT CONTRACTORE ALLOWANCES	φοθ,οου,ο20	ψυσ,υτο,υστ	φ20,007
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	#405 744 07	0474707 105	(6
3 4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	\$185,714,877 67.44%	\$174,707,462 66.08%	(\$11,007,415) -1.36%
_	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	\$1,753,777	\$1,673,113	(000.000
8	ADJUSTMENT- OHCA INPUT) CHARITY CARE	\$1,809,921	\$1,910,845	(\$80,664) \$100,924
	BAD DEBTS	\$14,319,487	\$14,985,815	\$666,328
	TOTAL UNCOMPENSATED CARE	\$16,129,408	\$16,896,660	\$767,252
11 12	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$275,365,397 \$253,532,594	\$264,386,049 \$237,519,576	(\$10,979,348) (\$16,013,018)
		\$200,002,00 1	420.,010,010	(+ : 3,0 : 0,0 10)

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2010			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	
LINE	DESCRIPTION	FY 2009	FY 2010	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,852.47260	5,218.55488	(633.91772
	MEDICARE	10,346.17920	10,128.83975	(217.33945
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,059.03570	3,088.50480	(1,970.53090
4	MEDICAID	4,457.32690	2,408.10680	(2,049.22010
	OTHER MEDICAL ASSISTANCE	601.70880	680.39800	78.68920
	CHAMPUS / TRICARE	24.90150	17.15000	(7.75150
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	303.84900	250.75440	(53.09460
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES TOTAL CASE MIX ADJUSTED DISCHARGES	15,430.11640 21,282.58900	13,234.49455 18.453.04943	(2,195.62185
	TOTAL CASE MIX ADJUSTED DISCHARGES	21,202.30900	10,433.04943	(2,029.33937
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,322.76534	3,510.97587	-811.7894
	MEDICARE	2,076.63507	2,081.80015	5.1650
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,568.03909	2,574.95986	6.9207
	MEDICAID	2,152.15810 415.88098	2,131.77977	-20.3783 27.2991
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	8.66531	443.18009 10.13999	1.4746
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	332.61728	255.15163	-77.4656
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	4,653.33947	4,666.89999	13.5605
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	8,976.10481	8,177.87586	-798.2289
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,821.21	\$9,745.63	\$924.41
	MEDICARE	\$8,246.18	\$7,989.26	(\$256.92
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,695.53	\$4,204.21	\$1,508.68
	MEDICAID	\$2,714.27	\$4,440.63	\$1,726.36
	OTHER MEDICAL ASSISTANCE	\$2,556.67	\$3,367.45	\$810.78
_	CHAMPUS / TRICARE	\$4,296.09	\$5,864.08	\$1,568.00
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,394.07	\$421.28	(\$2,972.79
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,419.93	\$7,103.20	\$683.27
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,080.25	\$7,850.48	\$770.23
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
	NON COVERNMENT (INCLUDING SELE DAY / LININGLIDED)	\$9,690.96	\$10,901.50	\$1,210.54
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$9,681.78	\$8,932.75	(\$749.03
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,254.70	\$3,925.63	(\$329.07
	MEDICAL ASSISTANCE (INCLUDING OTTER MEDICAL ASSISTANCE)	\$4,425.87	\$4,125.18	(\$300.69
	OTHER MEDICAL ASSISTANCE	\$3,368.91	\$2,965.78	(\$403.14
	CHAMPUS / TRICARE	\$15,922.80	\$9,599.52	(\$6,323.28
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,950.54	\$2,384.71	(\$8,565.83
7		·		****
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	I	l	
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,698.36 \$8,139.56	\$6,171.53 \$8,202.23	(<mark>\$526.83</mark> \$62.67

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2010			
	REPORT 550 - CALCULATION OF DSH UPPER PAYN	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT <u>DIFFERENCE</u>
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
٧.	CALCOLATED UNDERFATMENT (OFFER LIMIT METHODOLOGY)			
1	MEDICAID	\$11,311,561	\$10,248,681	(\$1,062,880)
	OTHER MEDICAL ASSISTANCE	\$6,048,833	\$5,789,116	(\$259,718)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,052,299	\$3,568,447	\$2,516,148
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$18,412,693	\$19,606,244	\$1,193,550
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	LOGY)		
1	TOTAL CHARGES	\$844,914,267	\$815,767,927	(\$29,146,340)
	TOTAL GOVERNMENT DEDUCTIONS	\$419,322,325	\$412,221,700	(\$7,100,625)
	UNCOMPENSATED CARE	\$16,129,408	\$16,896,660	\$767,252
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$185,714,877	\$174,707,462	(\$11,007,415)
5 6	EMPLOYEE SELF INSURANCE ALLOWANCE TOTAL ADJUSTMENTS	\$0 \$621,166,610	\$0 \$603,825,822	\$0 (\$17.340.788)
7	TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS	\$223,747,657	\$211,942,105	(\$11,805,552)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$1,753,777	\$1,673,113	(\$80,664)
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$225,501,434	\$213,615,218	(\$11,886,216)
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2668926811	0.2618578286	(0.0050348525)
	COST OF UNCOMPENSATED CARE MEDICAL ASSISTANCE UNDERPAYMENT	\$4,304,821 \$13,751,722	\$4,424,523 \$15,075,358	\$119,702 \$1,323,636
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$13,731,722	\$13,073,338	\$1,323,030
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$18,056,543	\$19,499,881	\$1,443,338
VII.	RATIOS			
	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	0.4.4007	04.450/	0.000/
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	34.18% 27.82%	34.15% 27.97%	-0.03% 0.15%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17.88%	16.50%	-1.38%
	MEDICAID	21.50%	18.54%	-2.96%
	OTHER MEDICAL ASSISTANCE	7.70%	10.90%	3.20%
	CHAMPUS / TRICARE	13.32%	23.18%	9.86%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	11.63%	1.41%	-10.22%
	TOTAL GOVERNMENT NATIO OF INFATIENT FAIMENTO TO INFATIENT GRANGED	25.81%	25.52%	-0.30%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	28.18%	28.00%	-0.18%
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29.03%	29.04%	0.02%
	MEDICARE	20.51%	18.76%	-1.74%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.24%	15.07%	-1.16%
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	18.58% 8.73%	17.24% 8.18%	-1.34% -0.55%
6	CHAMPUS / TRICARE	29.74%	22.12%	-0.55% -7.62%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	32.73%	6.87%	-25.86%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1		18.80%	17.29%	-1.51%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	23.56%	22.48%	-1.08%

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2010			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	TIONS		
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	3		
4	TOTAL ACCOLLED DAVMENTS	¢222 747 655	¢244 042 405	(\$44 DOE EEO
2	TOTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	\$223,747,655	\$211,942,105	(\$11,805,550 (\$80,664
~	(OHCA INPUT)	\$1,753,777	\$1,673,113	(ψου,ου4
	OHCA DEFINED NET REVENUE	\$225,501,432	\$213,615,218	(\$11,886,214
<u>3</u> 4	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE CALCULATED NET REVENUE	\$14,427,091 \$239,928,523	\$15,396,099 \$229,011,317	\$969,008
4	CALCULATED NET REVENUE	\$239,926,523	\$229,011,317	(\$10,917,206
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$239,928,524	\$229,011,318	(\$10,917,206
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	(\$1)	\$0
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS		
1	OHCA DEFINED GROSS REVENUE	\$844,914,267	\$815,767,927	(\$29,146,340
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$044,914,207	\$0	(\$29,140,340 \$0
	CALCULATED GROSS REVENUE	\$844,914,267	\$815,767,927	(\$29,146,340
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$844,914,262	\$815,767,934	(\$29,146,328
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$5	(\$7)	(\$12
		-	(+-)	(4.1
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	TS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,129,408	\$16,896,660	\$767,252
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,463,750	\$1,170,621	(\$293,129
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$17,593,158	\$18,067,281	\$474,123
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$17,593,158	\$18,067,281	\$474,123
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2010** REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND **BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES** (1) (2)(3) **ACTUAL** LINE DESCRIPTION FY 2010 ACCRUED CHARGES AND PAYMENTS **INPATIENT ACCRUED CHARGES** A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$148,946,176 1 289,293,480 **MEDICARE** MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 78,699,117 3 **MEDICAID** 57,681,344 OTHER MEDICAL ASSISTANCE 5 21,017,773 CHAMPUS / TRICARE 433,901 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 7,496,163 TOTAL INPATIENT GOVERNMENT CHARGES \$368,426,498 TOTAL INPATIENT CHARGES \$517,372,674 В. **OUTPATIENT ACCRUED CHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$131,790,935 **MEDICARE** 99,103,375 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 67,060,968 **MEDICAID** 4 51,001,212 OTHER MEDICAL ASSISTANCE 5 16,059,756 CHAMPUS / TRICARE 439,975 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 8,854,899 TOTAL OUTPATIENT GOVERNMENT CHARGES \$166,604,318 \$298,395,253 TOTAL OUTPATIENT CHARGES C. TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED) 1 \$280,737,111 TOTAL GOVERNMENT ACCRUED CHARGES 2 535,030,816 **TOTAL ACCRUED CHARGES** \$815,767,927 INPATIENT ACCRUED PAYMENTS D. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$50,858,087 MEDICARE 80,921,944 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 12,984,710 **MEDICAID** 10,693,504 OTHER MEDICAL ASSISTANCE 5 2,291,206 6 CHAMPUS / TRICARE 100,569 UNINSURED (INCLUDED IN NON-GOVERNMENT) 105,638 7 TOTAL INPATIENT GOVERNMENT PAYMENTS \$94,007,223 **TOTAL INPATIENT PAYMENTS** \$144,865,310 **OUTPATIENT ACCRUED PAYMENTS** E NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$38,274,902 2 **MEDICARE** 18,596,203 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 10,108,351 **MEDICAID** 8,793,978 OTHER MEDICAL ASSISTANCE 5 1,314,373 CHAMPUS / TRICARE 6 97,339 UNINSURED (INCLUDED IN NON-GOVERNMENT) 7 608,463 TOTAL OUTPATIENT GOVERNMENT PAYMENTS \$28,801,893 TOTAL OUTPATIENT PAYMENTS \$67,076,795 TOTAL ACCRUED PAYMENTS F. TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED) \$89,132,989 2 TOTAL GOVERNMENT ACCRUED PAYMENTS 122,809,116 TOTAL ACCRUED PAYMENTS \$211,942,105

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2010** REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (1) (2)(3) **ACTUAL** LINE **DESCRIPTION** FY 2010 II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA A. **ACCRUED DISCHARGES** NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 3,968 1 **MEDICARE** 6,077 3 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 2,991 **MEDICAID** 2,411 580 OTHER MEDICAL ASSISTANCE 5 CHAMPUS / TRICARE 10 UNINSURED (INCLUDED IN NON-GOVERNMENT) 216 7 **TOTAL GOVERNMENT DISCHARGES** 9,078 TOTAL DISCHARGES 13,046 В. CASE MIX INDEX NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 1.31516 1.66675 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 1.03260 **MEDICAID** 0.99880 4 OTHER MEDICAL ASSISTANCE 5 1.17310 CHAMPUS / TRICARE 1.71500 7 UNINSURED (INCLUDED IN NON-GOVERNMENT) 1.16090 **TOTAL GOVERNMENT CASE MIX INDEX** 1.45786 TOTAL CASE MIX INDEX 1.41446 OTHER REQUIRED DATA C. TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 1 \$264,386,049 ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES 2 \$89,678,587 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 3 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$174,707,462 TOTAL ACTUAL DISCOUNT PERCENTAGE 4 66.08% 5 EMPLOYEE SELF INSURANCE GROSS REVENUE \$0 6 EMPLOYEE SELF INSURANCE ALLOWANCE \$0 7 UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT) \$1,673,113 CHARITY CARE 8 \$1,910,845 9 **BAD DEBTS** \$14,985,815 10 TOTAL UNCOMPENSATED CARE \$16,896,660 TOTAL OTHER OPERATING REVENUE 11 \$10,576,444 TOTAL OPERATING EXPENSES 12 \$237,519,576

	WATERBURY HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2010	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
LINE	<u>DESCRIPTION</u>	11 2010
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	\$211,942,105
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$1,673,113
	OHCA DEFINED NET REVENUE	\$213,615,218
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$15,396,099
	CALCULATED NET REVENUE	\$229,011,317
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$229,011,318
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$815,767,927
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE	\$0 \$815,767,927
	CALCULATED GROSS REVENUE	\$615,767,927
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$815,767,934
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$7
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,896,660
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,170,621
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$18,067,281
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$18,067,281
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2010 REPORT 650 - HOSPITAL UNCOMPENSATED CARE** (1) (2) (3) (4) (5) (6)ACTUAL **ACTUAL AMOUNT** % LINE DESCRIPTION FY 2009 FY 2010 DIFFERENCE DIFFERENCE Hospital Charity Care (from HRS Report 500) A. Number of Applicants 498 359 (139)-28% 2 Number of Approved Applicants 277 -26% 376 (99)**Total Charges (A)** \$1,809,921 \$1,910,845 \$100,924 6% 3 4 **Average Charges** \$4,814 \$6,898 \$2,085 43% Ratio of Cost to Charges (RCC) 5 0.314690 0.295497 (0.019193)-6% **Total Cost** \$569,564 \$564,649 (\$4,915) -1% 6 **Average Cost** \$1,515 \$524 7 \$2,038 35% Charity Care - Inpatient Charges \$1,222,220 \$1,448,349 \$226,129 19% 8 Charity Care - Outpatient Charges (Excludes ED Charges) 9 203,011 197,043 (5,968)-3% 10 Charity Care - Emergency Department Charges 384,690 265,453 (119,237) -31% 11 **Total Charges (A)** \$1,809,921 \$1,910,845 \$100,924 6% Charity Care - Number of Patient Days 456 71 18% 12 385 13 Charity Care - Number of Discharges -45% 167 92 (75)14 Charity Care - Number of Outpatient ED Visits 216 (106)-33% 322 15 Charity Care - Number of Outpatient Visits (Excludes ED Visits) 242 149 (93)-38% Hospital Bad Debts (from HRS Report 500) В. **Bad Debts - Inpatient Services** \$7,302,938 \$7,514,456 \$211,518 3% Bad Debts - Outpatient Services (Excludes ED Bad Debts) 2 2,455,792 2,540,262 84,470 3% 3 Bad Debts - Emergency Department 4.560.757 4.931.097 370.340 8% 4 Total Bad Debts (A) \$14,319,487 \$14,985,815 \$666,328 5% Hospital Uncompensated Care (from HRS Report 500) C. Charity Care (A) 1 \$1,809,921 \$1,910,845 \$100,924 6% 2 Bad Debts (A) 14,319,487 14,985,815 666,328 5% **Total Uncompensated Care (A)** 3 \$16,129,408 \$16,896,660 \$767,252 5% 4 Uncompensated Care - Inpatient Services 5% \$8,525,158 \$8,962,805 \$437,647 5 Uncompensated Care - Outpatient Services (Excludes ED Unc. Care) 2,737,305 78,502 3% 2,658,803 4,945,447 251,103 Uncompensated Care - Emergency Department 5,196,550 5% 6 **Total Uncompensated Care (A)** \$16,129,408 \$16,896,660 \$767,252 5% (A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

2 Total Contractual Allowances \$185,714,877 \$174,707,462 (\$11,007,415) -6 Total Accrued Payments (A) \$89,650,520 \$89,678,587 \$28,067 0						
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1)		Total Discount Percentage	67.44%	66.08%	-1.36%	-2%
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1)		lotal Accrued Payments (A)	\$89,650,520	\$89,678,587	\$28,067	0%
FISCAL YEAR 2010		T-t-l A D t- (A)	400.5=2.5=2	A00.070.707	A 00.557	
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2009 FY 2010 ACTUAL TOTAL ACTUAL TOTAL AMOUNT % INE DESCRIPTION NON-GOVERNMENT NON-GOVERNMENT DIFFERENCE DIFFERENCE COMMERCIAL - ALL PAYERS	2	Total Contractual Allowances	\$185,714,877	\$174,707,462	(\$11,007,415)	-6%
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2009 FY 2010 ACTUAL TOTAL ACTUAL TOTAL AMOUNT % INE DESCRIPTION NON-GOVERNMENT DIFFERENCE DIFFERENCE	1	Total Gross Revenue	\$275,365,397	\$264,386,049	(\$10,979,348)	-4%
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2009 FY 2010 ACTUAL TOTAL ACTUAL TOTAL AMOUNT % INE DESCRIPTION NON-GOVERNMENT DIFFERENCE DIFFERENCE		COMMERCIAL - ALL PAYERS				
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2009 FY 2010 ACTUAL TOTAL ACTUAL TOTAL AMOUNT %						
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6) FY 2009 FY 2010	LINE	DESCRIPTION				
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE (1) (2) (3) (4) (5) (6)					AMOUNT	0/2
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE	(1)	(2)			(5)	(6)
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,	(4)	(0)	(2)	(4)	(5)	(0)
FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,		Α(CCRUED PAYMENTS AND DISCO	UNT PERCENTAGE		
		REPORT 685 - HOSPITA	L NON-GOVERNMENT GROSS RE	VENUE, CONTRACTUAL	ALLOWANCES,	
TWELVE MONTHS ACTUAL FILING						
WATERBURY HOSPITAL						

WATERBURY HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2008 FY 2009 FY 2010 **Gross and Net Revenue** A. Inpatient Gross Revenue \$447,560,841 \$534,788,651 \$517,372,674 1 2 Outpatient Gross Revenue \$262,008,277 \$310,125,616 \$298,395,253 3 Total Gross Patient Revenue \$709,569,118 \$844,914,267 \$815,767,927 Net Patient Revenue \$221,441,319 \$239,928,524 \$229,011,318 В. **Total Operating Expenses** 1 Total Operating Expense \$245,407,419 \$253,532,594 \$237,519,576 C. **Utilization Statistics** Patient Days 70,997 67,682 59,271 13,046 2 Discharges 14,736 13,916 3 Average Length of Stay 4.8 4.9 4.5 112,560 106,931 Equivalent (Adjusted) Patient Days (EPD) 93,456 4 Equivalent (Adjusted) Discharges (ED) 23,363 21,986 20,570 0 **Case Mix Statistics** D. 1.32525 1.52936 1.41446 1 Case Mix Index 94,089 103,510 83,836 2 Case Mix Adjusted Patient Days (CMAPD) 3 Case Mix Adjusted Discharges (CMAD) 19,529 21,283 18,453 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 149,170 163,536 132,189 Case Mix Adjusted Equivalent Discharges (CMAED) 30,961 33,624 29,096 5 E. **Gross Revenue Per Statistic** 1 Total Gross Revenue per Patient Day \$9,994 \$12,484 \$13,763 2 Total Gross Revenue per Discharge \$48,152 \$60,715 \$62,530 Total Gross Revenue per EPD \$6,304 \$7,901 \$8,729 3 \$39,658 4 Total Gross Revenue per ED \$30,372 \$38,430 Total Gross Revenue per CMAEPD \$4,757 \$5,167 \$6,171 Total Gross Revenue per CMAED \$22,918 \$25,128 \$28,037 6 7 Inpatient Gross Revenue per EPD \$3,976 \$5,001 \$5,536 Inpatient Gross Revenue per ED \$19,157 \$24,324 \$25,151

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2010** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (5) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2008 FY 2009 FY 2010 **Net Revenue Per Statistic** F. Net Patient Revenue per Patient Day \$3,119 \$3,545 \$3,864 2 Net Patient Revenue per Discharge \$15,027 \$17,241 \$17,554 3 Net Patient Revenue per EPD \$1,967 \$2,244 \$2,450 Net Patient Revenue per ED \$9,478 \$10,913 \$11,133 4 5 Net Patient Revenue per CMAEPD \$1,484 \$1,467 \$1,732 Net Patient Revenue per CMAED \$7,152 \$7,136 \$7,871 G. Operating Expense Per Statistic Total Operating Expense per Patient Day \$3,457 \$3,746 \$4,007 1 \$16,654 \$18,219 \$18,206 2 Total Operating Expense per Discharge \$2,180 3 Total Operating Expense per EPD \$2,371 \$2,542 Total Operating Expense per ED \$10,504 \$11,532 \$11,547 4 Total Operating Expense per CMAEPD \$1,645 \$1,550 \$1,797 5 Total Operating Expense per CMAED \$7,926 \$7,540 \$8,163 6 H. Nursing Salary and Fringe Benefits Expense Nursing Salary Expense \$33,893,598 \$33,017,306 \$31,968,760 1 \$9,335,720 2 Nursing Fringe Benefits Expense \$9,032,365 \$8,798,841 \$41,816,147 \$41,304,480 Total Nursing Salary and Fringe Benefits Expense \$42,925,963 I. Physician Salary and Fringe Expense 1 Physician Salary Expense \$14,395,769 \$14,446,788 \$8,044,219 Physician Fringe Benefits Expense \$3,836,354 \$3,948,037 \$2,349,124 2 Total Physician Salary and Fringe Benefits Expense \$18,232,123 \$18,394,825 \$10,393,343 3 J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense Non-Nursing, Non-Physician Salary Expense \$60,406,391 \$58,531,193 \$58,791,114 1 2 Non-Nursing, Non-Physician Fringe Benefits Expense \$16,097,807 \$17,348,785 \$17,168,555 Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense \$76.504.198 \$75.879.978 \$75,959,669 K. **Total Salary and Fringe Benefits Expense** 1 Total Salary Expense \$108,695,758 \$105,995,287 \$98,804,093 2 Total Fringe Benefits Expense \$28,966,526 \$30,095,663 \$28,853,399

\$137,662,284

\$136,090,950

\$127,657,492

Total Salary and Fringe Benefits Expense

WATERBURY HOSPITAL **TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010** REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (3) ACTUAL ACTUAL **ACTUAL** LINE **DESCRIPTION** FY 2008 FY 2009 FY 2010 Total Full Time Equivalent Employees (FTEs) L. Total Nursing FTEs 393.8 381.0 361.5 1 2 Total Physician FTEs 109.4 120.8 86.7 3 Total Non-Nursing, Non-Physician FTEs 1121.8 1087.4 1064.9 1,589.2 Total Full Time Equivalent Employees (FTEs) 1,625.0 1,513.1 Μ. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$86,068 \$86,660 \$88,434 Nursing Fringe Benefits Expense per FTE \$22,936 \$23,094 \$25,825 2 3 Total Nursing Salary and Fringe Benefits Expense per FTE \$109,004 \$109,754 \$114,259 N. Physician Salary and Fringe Expense per FTE Physician Salary Expense per FTE \$131,588 \$119,593 \$92,782 1 Physician Fringe Benefits Expense per FTE \$35,067 \$32,682 \$27,095 2 Total Physician Salary and Fringe Benefits Expense per FTE \$166,656 \$119,877 3 \$152,275 Ο. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Non-Nursing, Non-Physician Salary Expense per FTE \$53,848 \$53,827 \$55,208 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$15,954 \$14,350 \$16,122 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE 3 \$68,198 \$69,781 \$71,330 Ρ. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$66,890 \$66,697 \$65,299 1 Total Fringe Benefits Expense per FTE \$17,826 \$18,938 \$19,069 2 Total Salary and Fringe Benefits Expense per FTE \$84,715 \$85,635 \$84,368 3 Total Salary and Fringe Ben. Expense per Statistic Total Salary and Fringe Benefits Expense per Patient Day \$1,939 \$2,011 \$2,154 \$9,785 2 Total Salary and Fringe Benefits Expense per Discharge \$9,342 \$9,779 3 Total Salary and Fringe Benefits Expense per EPD \$1,223 \$1,273 \$1,366 Total Salary and Fringe Benefits Expense per ED \$6,190 \$6,206 \$5,892 4 Total Salary and Fringe Benefits Expense per CMAEPD \$923 \$832 \$966 5

Total Salary and Fringe Benefits Expense per CMAED

\$4,047

\$4,446

\$4,387