	WATERBURY HOS	PITAL			
	TWELVE MONTHS ACT	UAL FILING			
	FISCAL YEAR	2011			
	REPORT 100 - HOSPITAL BALANCE	SHEET INFORM	ATION		
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 <u>ACTUAL</u>	FY 2011 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE
Ι.	ASSETS				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$16,243,349	\$10,101,423	(\$6,141,926)	-38%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$27,764,677	\$30,992,121	\$3,227,444	12%
4	Current Assets Whose Use is Limited for Current Liabilities	\$582,693	\$0	(\$582,693)	-100%
5	Due From Affiliates	\$752,190	\$5,247,541	\$4,495,351	598%
6	Due From Third Party Payers	\$0	\$2,858,086	\$2,858,086	0%
7	Inventories of Supplies	\$634,324	\$709,790	\$75,466	12%
8	Prepaid Expenses	\$1,161,757	\$1,449,521	\$287,764	25%
9	Other Current Assets	\$1,773,357	\$2,247,488	\$474,131	27%
	Total Current Assets	\$48,912,347	\$53,605,970	\$4,693,623	10%
в.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$39,561,090	\$37,339,264	(\$2,221,826)	-6%
2	Board Designated for Capital Acquisition	\$2,787,502	\$2,615,009	(\$172,493)	-6%
3	Funds Held in Escrow	\$2,020,082	\$3,958,301	\$1,938,219	96%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$44,368,674	\$43,912,574	(\$456,100)	-1%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$12,235,187	\$8,719,340	(\$3,515,847)	-29%
7	Other Noncurrent Assets	\$6,407,782	\$564,396	(\$5,843,386)	-91%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$243,761,756	\$253,871,558	\$10,109,802	4%
2	Less: Accumulated Depreciation	\$206,294,646	\$214,304,472	\$8,009,826	4%
	Property, Plant and Equipment, Net	\$37,467,110	\$39,567,086	\$2,099,976	6%
3	Construction in Progress	\$1,070,830	\$2,883,755	\$1,812,925	169%
	Total Net Fixed Assets	\$38,537,940	\$42,450,841	\$3,912,901	10%
	Total Assets	\$150,461,930	\$149,253,121	(\$1,208,809)	-19
	Total Assets	\$150,461,930	\$149,253,121	(\$1,208,809)	-

	WATERBURY	Y HOSPITAL				
	TWELVE MONTHS	S ACTUAL FILING				
	FISCAL	YEAR 2011				
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2) (3) (4) (5)					
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 <u>ACTUAL</u>	AMOUNT DIFFERENCE	% DIFFERENCE	
II.	LIABILITIES AND NET ASSETS					
Α.	Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$18,516,046	\$26,681,066	\$8,165,020	44%	
2	Salaries, Wages and Payroll Taxes	\$7,688,690	\$7,272,613	(\$416,077)	-5%	
3	Due To Third Party Payers	\$230,310	\$0	(\$230,310)	-100%	
4	Due To Affiliates	\$0	\$0	\$0	0%	
5	Current Portion of Long Term Debt	\$865,000	\$423,779	(\$441,221)	-51%	
6	Current Portion of Notes Payable	\$64,625	\$370,853	\$306,228	4749	
7	Other Current Liabilities	\$0	\$0	\$0	0%	
	Total Current Liabilities	\$27,364,671	\$34,748,311	\$7,383,640	27%	
В.	Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$18,142,716	\$25,207,100	\$7,064,384	39%	
2	Notes Payable (Net of Current Portion)	\$0	\$973,089	\$973,089	0%	
	Total Long Term Debt	\$18,142,716	\$26,180,189	\$8,037,473	44%	
3	Accrued Pension Liability	\$0	\$0	\$0	0%	
4	Other Long Term Liabilities	\$14,200,723	\$19,365,945	\$5,165,222	36%	
	Total Long Term Liabilities	\$32,343,439	\$45,546,134	\$13,202,695	419	
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%	
C.	Net Assets:					
1	Unrestricted Net Assets or Equity	\$40,084,846	\$22,349,947	(\$17,734,899)	-44%	
2	Temporarily Restricted Net Assets	\$8,315,873	\$6,477,454	(\$1,838,419)	-229	
3	Permanently Restricted Net Assets	\$42,353,101	\$40,131,275	(\$2,221,826)	-5%	
	Total Net Assets	\$90,753,820	\$68,958,676	(\$21,795,144)	-24%	
	Total Liabilities and Net Assets	\$150,461,930	\$149,253,121	(\$1,208,809)	-19	

	WATERBU	RY HOSPITAL			
	TWELVE MONT	HS ACTUAL FILING			
	FISCA	L YEAR 2011			
	REPORT 150 - HOSPITAL STATEM	ENT OF OPERATION	IS INFORMATION		
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6)
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$815,767,934	\$821,229,348	\$5,461,414	1%
2	Less: Allowances	\$583,675,151	\$588,036,303	\$4,361,152	1%
3	Less: Charity Care	\$3,081,465	\$3,361,605	\$280,140	9%
4	Less: Other Deductions	\$0	\$2,071,934	\$2,071,934	0%
	Total Net Patient Revenue	\$229,011,318	\$227,759,506	(\$1,251,812)	-1%
5	Other Operating Revenue	\$2,460,675	\$2,698,433	\$237,758	10%
6	Net Assets Released from Restrictions	\$5,405,414	\$5,919,545	\$514,131	10%
	Total Operating Revenue	\$236,877,407	\$236,377,484	(\$499,923)	0%
в.	Operating Expenses:				
1	Salaries and Wages	\$98,804,093	\$99,160,311	\$356,218	0%
2	Fringe Benefits	\$28,853,399	\$30,355,478	\$1,502,079	5%
3	Physicians Fees	\$11,608,202	\$13,414,585	\$1,806,383	16%
4	Supplies and Drugs	\$33,658,593	\$31,860,140	(\$1,798,453)	-5%
5	Depreciation and Amortization	\$9,226,011	\$8,117,962	(\$1,108,049)	-12%
6	Bad Debts	\$14,985,815	\$10,912,386	(\$4,073,429)	-27%
7	Interest	\$1,188,449	\$989,771	(\$198,678)	-17%
8	Malpractice	\$3,538,376	\$4,836,142	\$1,297,766	37%
9	Other Operating Expenses	\$35,656,638	\$36,056,222	\$399,584	1%
	Total Operating Expenses	\$237,519,576	\$235,702,997	(\$1,816,579)	-1%
	Income/(Loss) From Operations	(\$642,169)	\$674,487	\$1,316,656	-205%
C.	Non-Operating Revenue:				
1	Income from Investments	\$684,910	\$1,468,313	\$783,403	114%
2	Gifts, Contributions and Donations	\$157,191	\$276,737	\$119,546	76%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	Total Non-Operating Revenue	\$842,101	\$1,745,050	\$902,949	107%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$199,932	\$2,419,537	\$2,219,605	1110%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$127,424	(\$528,630)	(\$656,054)	-515%
	All Other Adjustments	\$0	(\$1,082,212)	(\$1,082,212)	0%
	Total Other Adjustments	\$127,424	(\$1,610,842)	(\$1,738,266)	-1364%
	Excess/(Deficiency) of Revenue Over Expenses	\$327,356	\$808,695	\$481,339	147%
	Principal Payments	\$1,334,228	\$678,817	(\$655,411)	-49%

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

5 CHAMPUS/TRICARE \$433,901 \$356,969 (\$77 6 COMMERCIAL INSURANCE \$805,748,935 \$\$59,302,191 (\$8,44 7 NON-GOVERNMENT MANAGED CARE \$70,482,780 \$\$69,092,435 (\$17,57 8 WORKER'S COMPENSATION \$4,858,298 \$4,591,752 (\$2,90 9 SELF- PAY/UNINSURED \$7,496,163 \$6,170,836 (\$1,32) 10 SAGA \$21,017,773 \$0 \$50 7 TOTAL INPATIENT GROSS REVENUE \$517,372,674 \$513,441,416 (\$3,93) 8 OUTPATIENT GROSS REVENUE \$166 \$10 \$10 \$10 1 MEDICARE TRADITIONAL \$82,839,262 \$84,642,842 \$1,800 2 MEDICARE MANAGED CARE \$15,701,399 \$35,235,265 \$19,533 3 MEDICAID MANAGED CARE \$35,299,813 \$34,044,566 \$17,52 6 COMMERCIAL INSURANCE \$53,292,716 \$52,005,831 \$1,92 7 NON-GOVERNMENT MANAGED CARE \$62,245,649 \$60,023,781 \$6,767	(6)
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3 MEDICAID \$6,135,697 \$11,166,487 \$5,03. 4 MEDICAID \$4,557,807 \$5,463,014 \$903	,
	,794) -19%
6 COMMERCIAL INSURANCE \$100,309 \$01,775 (\$100,309 \$23,237,154 (\$2,315)	
7 NON-GOVERNMENT MANAGED CARE \$21,481,559 \$22,493,734 \$1,012	
	,025) -10%
	,236 4119
10 SAGA \$2,291,206 \$0 (\$2,29	,
11 OTHER \$0 \$0	\$0 09
TOTAL INPATIENT NET REVENUE \$144,865,310 \$143,460,074 (\$1,40	* · · · · · · · · · · · · · · · · · · ·

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$15,861,616	\$16,837,072	\$975,456	6%
2	MEDICARE MANAGED CARE	\$2,734,587	\$3,123,040	\$388,453	14%
3	MEDICAID	\$2,315,210	\$5,569,047	\$3,253,837	141%
4	MEDICAID MANAGED CARE	\$6,478,768	\$6,586,470	\$107,702	2%
5		\$97,339	\$100,224	\$2,885	3%
6		\$17,988,289	\$17,503,723	(\$484,566)	-3%
7		\$14,021,147	\$16,138,655	\$2,117,508	15%
9	WORKER'S COMPENSATION SELF- PAY/UNINSURED	\$5,657,003 \$608,463	\$4,820,529 \$1,011,201	(\$836,474) \$402,738	-15% 66%
10	SAGA	\$1,314,373	<u>\$1,011,201</u> \$0	(\$1,314,373)	-100%
11	OTHER	\$1,314,373	<u>\$0</u> \$0	(\$1,314,373) \$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$67,076,795	\$71,689,961	\$4,613,166	7%
		ψ01,010,133	Ψ/1,003,301	φ4,013,100	170
c.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$85,078,617	\$82,655,288	(\$2,423,329)	-3%
2		\$14,439,530	\$14,441,894	\$2,364	0%
3		\$8,450,907	\$16,737,534	\$8,286,627	98%
4	MEDICAID MANAGED CARE	\$11,036,575	\$12,049,484	\$1,012,909	9%
5	CHAMPUS/TRICARE	\$197,908	\$181,999	(\$15,909)	-8%
6	COMMERCIAL INSURANCE	\$43,541,188	\$40,740,877	(\$2,800,311)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$35,502,706	\$38,632,389	\$3,129,683	9%
8	WORKER'S COMPENSATION	\$9,374,994	\$8,159,495	(\$1,215,499)	-13%
9	SELF- PAY/UNINSURED	\$714,101	\$1,551,075	\$836,974	117%
10	SAGA	\$3,605,579	\$0	(\$3,605,579)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$211,942,105	\$215,150,035	\$3,207,930	2%
III.	STATISTICS BY PAYER				
•	DISCUAROES				
A.		E 017	E 027	(100)	40/
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	5,217	5,027	(190) 85	-4%
3	MEDICARE MANAGED CARE	860 926	945 1,527	601	10% 65%
4	MEDICAID MEDICAID MANAGED CARE	1,485	1,532	47	3%
5	CHAMPUS/TRICARE	10	1,332	(2)	-20%
6	COMMERCIAL INSURANCE	1,709	1,538	(171)	-10%
7	NON-GOVERNMENT MANAGED CARE	1,955	1,962	7	0%
8	WORKER'S COMPENSATION	88	61	(27)	-31%
9	SELF- PAY/UNINSURED	216	158	(58)	-27%
10	SAGA	580	0	(580)	
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	13,046	12,758	(288)	-2%
В.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	28,405	27,893	(512)	-2%
2	MEDICARE MANAGED CARE	4,489	4,906	417	9%
3	MEDICAID	4,631	7,858	3,227	70%
4	MEDICAID MANAGED CARE	4,781	4,889	108	2%
5	CHAMPUS/TRICARE	42	37	(5)	-12%
6	COMMERCIAL INSURANCE	6,796	5,738	(1,058)	-16%
7	NON-GOVERNMENT MANAGED CARE	6,363	6,621	258	4%
8	WORKER'S COMPENSATION	276	157	(119)	-43%
9	SELF- PAY/UNINSURED	824	681	(143)	
10	SAGA	2,664	0	(2,664)	-100%
11	OTHER	0 59,271	0 58,780	0 (491)	0% -1%
	TOTAL PATIENT DAYS	E0 974	58 780	(404)	

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	56,054	57,470	1,416	3%
2	MEDICARE MANAGED CARE	9,777	11,604	1,827	19%
3	MEDICAID	11,593	24,735	13,142	113%
4	MEDICAID MANAGED CARE	27,847	27,310	(537)	-2%
5	CHAMPUS/TRICARE	18	349	331	1839%
6	COMMERCIAL INSURANCE	32,091	31,892	(199)	-1%
7	NON-GOVERNMENT MANAGED CARE	35,056	37,989	2,933	8%
8	WORKER'S COMPENSATION	1,696	1,551	(145)	-9%
9	SELF- PAY/UNINSURED	6,946	7,078	132	2%
10	SAGA	11,182	0	(11,182)	-100%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	192,260	199,978	7,718	4%
	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVE		* • • • • • • • • •	(*	
1	MEDICARE TRADITIONAL	\$22,936,805	\$18,462,518	(\$4,474,287)	-20%
2	MEDICARE MANAGED CARE	\$3,698,099	\$3,380,921	(\$317,178)	
3	MEDICAID	\$7,907,888	\$16,936,884	\$9,028,996	114%
4	MEDICAID MANAGED CARE	\$18,799,530	\$16,645,089	(\$2,154,441)	-11%
5	CHAMPUS/TRICARE	\$0	\$0	\$0	0%
6	COMMERCIAL INSURANCE	\$13,095,381	\$10,267,398	(\$2,827,983)	-22%
7	NON-GOVERNMENT MANAGED CARE	\$14,950,188	\$11,847,032	(\$3,103,156)	-21%
8	WORKER'S COMPENSATION	\$1,057,505	\$875,588	(\$181,917)	
9	SELF- PAY/UNINSURED	\$6,432,195	\$5,986,613	(\$445,582)	-7%
10	SAGA	\$8,852,059	\$0	(\$8,852,059)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$97,729,650	\$84,402,043	(\$13,327,607)	-14%
В.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENU				
1	MEDICARE TRADITIONAL	\$4,509,331	\$3,698,301	(\$811,030)	-18%
2	MEDICARE MANAGED CARE	\$675,700	\$684,739	\$9,039	1%
3	MEDICAID	\$1,414,808	\$3,132,632	\$1,717,824	121%
4	MEDICAID MANAGED CARE	\$3,962,158	\$3,637,913	(\$324,245)	-8%
5	CHAMPUS/TRICARE	\$0	\$0	\$0	0%
6	COMMERCIAL INSURANCE	\$3,984,280	\$3,388,474	(\$595,806)	-15%
7	NON-GOVERNMENT MANAGED CARE	\$4,687,164	\$4,126,081	(\$561,083)	-12%
8	WORKER'S COMPENSATION	\$781,376	\$564.970	(\$216,406)	-28%
9	SELF- PAY/UNINSURED	\$209.419	\$189,626	(\$19,793)	-9%
10	SAGA	\$1,178,469	\$0	(\$1,178,469)	
11	OTHER	\$0	\$0 \$0	(\u03c01,170,409) \$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	φυ	ψυ	ψυ	070
	NET REVENUE	\$21,402,705	\$19,422,736	(\$1,979,969)	-9%
	EMERGENCY DEPARTMENT OUTPATIENT VISITS	<i>+=</i> -,,,,,,,,,	, , . ,. 	(+ -,,,,,,, -	570
1	MEDICARE TRADITIONAL	8,254	7,834	(420)	-5%
2	MEDICARE MANAGED CARE	1,219	1,457	238	20%
3	MEDICAID	3,761	9,042	5,281	140%
4	MEDICAID MANAGED CARE	12,789	11,962	(827)	-6%
5	CHAMPUS/TRICARE	0	0	021)	0%
6	COMMERCIAL INSURANCE	6,296	5,866	(430)	-7%
7	NON-GOVERNMENT MANAGED CARE	7,065	7,007	(430)	-1%
8	WORKER'S COMPENSATION	915	863	(52)	-6%
9	SELF- PAY/UNINSURED	4,699	4,529	(170)	
-	SAGA	4,899	4,529	(170) (4,395)	-4%
10		4,395	-		
10	OTHER	<u>^</u>	∩	^	//0/
10 11	OTHER TOTAL EMERGENCY DEPARTMENT OUTPATIENT	0	0	0	0%

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
Α.	Salaries & Wages:				
1	Nursing Salaries	\$31,968,760	\$32,142,636	\$173,876	1%
2	Physician Salaries	\$8,044,219	\$6,033,313	(\$2,010,906)	-25%
3	Non-Nursing, Non-Physician Salaries	\$58,791,114	\$60,984,362	\$2,193,248	4%
	Total Salaries & Wages	\$98,804,093	\$99,160,311	\$356,218	0%
В.	Fringe Benefits:				
<u>в</u> . 1	Nursing Fringe Benefits	\$9,335,720	\$9,839,673	\$503,953	5%
2	Physician Fringe Benefits	\$2,349,124	\$1,846,950	(\$502,174)	-21%
3	Non-Nursing, Non-Physician Fringe Benefits	\$17,168,555	\$18,668,855	\$1,500,300	9%
	Total Fringe Benefits	\$28,853,399	\$30,355,478	\$1,502,079	5%
С.	Contractual Labor Fees:	A A 4A AA 4	A 4 4 4 T A	(0004050)	000/
1	Nursing Fees	\$648,834	\$444,178	(\$204,656)	-32%
2	Physician Fees Non-Nursing, Non-Physician Fees	\$11,608,202 \$219,763	\$13,414,585 \$1,199,342	\$1,806,383 \$979,579	16% 446%
3	Total Contractual Labor Fees	\$12,476,799	\$15,058,105	\$2,581,306	<u>440%</u> 21%
		ψ12, 4 70,733	\$13,030,103	ψ2,301,300	2170
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$26,740,221	\$24,980,775	(\$1,759,446)	-7%
2	Pharmaceutical Costs	\$6,918,372	\$6,879,365	(\$39,007)	-1%
	Total Medical Supplies and Pharmaceutical Cost	\$33,658,593	\$31,860,140	(\$1,798,453)	-5%
_					
E.	Depreciation and Amortization:	¢0,000,000	¢0.074.005	(\$400 777)	40/
1	Depreciation-Building Depreciation-Equipment	\$2,998,382 \$5,707,547	\$2,871,605 \$5,122,191	(\$126,777) (\$585,356)	-4% -10%
3	Amortization	\$520,082	\$124,166	(\$395,916)	-76%
0	Total Depreciation and Amortization	\$9,226,011	\$8,117,962	(\$1,108,049)	-12%
		<i>v</i> , <u>-</u> v , v	<i>vo</i> ,, <i>vo</i> _	(\$1,100,010)	
F.	Bad Debts:				
1	Bad Debts	\$14,985,815	\$10,912,386	(\$4,073,429)	-27%
G.	Interest Expense:	<u> </u>	A aaa ((\$ 1 0 0 0 0 0)	
1	Interest Expense	\$1,188,449	\$989,771	(\$198,678)	-17%
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$3,538,376	\$4,836,142	\$1,297,766	37%
		<i>†<i>0</i>,000,010</i>	•••••••••••	* ·) = * ·) · * ·	
I.	Utilities:				
1	Water	\$234,580	\$216,972	(\$17,608)	-8%
2	Natural Gas	\$1,270,286	\$1,267,329	(\$2,957)	0%
3	Oil	\$22,283	\$20,988	(\$1,295)	-6%
4	Electricity	\$1,924,957	\$2,000,208	\$75,251	4%
5	Telephone Other Utilities	\$263,540 \$0	\$304,572 \$0	\$41,032 \$0	<u>16%</u> 0%
0	Total Utilities	\$3,715,646	\$3,810,069	\$94,423	3%
		¥0,1 10,040	\$2,010,000	¥0-1,-120	370
J.	Business Expenses:				
1	Accounting Fees	\$197,916	\$211,765	\$13,849	7%
2	Legal Fees	\$737,229	\$962,480	\$225,251	31%
3	Consulting Fees	\$3,353,342	\$857,193	(\$2,496,149)	-74%
4	Dues and Membership	\$372,137	\$352,163	(\$19,974)	-5%
5 6	Equipment Leases Building Leases	\$1,775,534 \$785,428	\$1,868,754 \$779,835	<u>\$93,220</u> (\$5,593)	<u>5%</u> -1%
7	Repairs and Maintenance	\$2,470,458	\$2,328,541	(\$5,593) (\$141,917)	-1%
8	Insurance	\$312,904	\$301,079	(\$11,825)	-0%
9	Travel	\$158,907	\$126,235	(\$32,672)	-21%
10	Conferences	\$212,030	\$178,636	(\$33,394)	-16%
11	Property Tax	\$174,437	\$99,056	(\$75,381)	-43%
12	General Supplies	\$2,939,202	\$3,178,103	\$238,901	8%
13	Licenses and Subscriptions	\$0 \$107.070	\$0 \$120.477	\$0	0%
14 15	Postage and Shipping Advertising	\$137,973 \$714,990	\$139,177 \$860,559	\$1,204 \$145,569	1% 20%
15	Other Business Expenses	\$12,570,210	\$13,196,775	\$626,565	<u> </u>
	Total Business Expenses	\$26,912,697	\$25,440,351	(\$1,472,346)	-5%
h		,	, ,	(, , , , =,,, , •,•)	570

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
к.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$4,159,698	\$5,162,282	\$1,002,584	24%
	Total Operating Expenses - All Expense Categories*	\$237,519,576	\$235,702,997	(\$1,816,579)	-1%
	*A K. The total operating expenses amount abov		the total energin		t on Bonort 150
	A K. The total operating expenses amount abov	e must agree with	i the total operatin	g expenses amour	it on Report 150.
II.	OPERATING EXPENSE BY DEPARTMENT				
А.	General Services:				
1	General Administration	\$28,511,639	\$23,647,870	(\$4,863,769)	-17%
2	General Accounting	\$1,577,079	\$1,768,756	\$191,677	12%
3	Patient Billing & Collection	\$1,298,907	\$1,211,841	(\$87,066)	-7%
4 5	Admitting / Registration Office Data Processing	\$1,711,458 \$7,936,887	\$1,644,722 \$9,055,216	<u>(\$66,736)</u> \$1,118,329	-4% 14%
6	Communications	\$7,930,007	\$9,055,216	\$1,110,329 \$0	0%
7	Personnel	\$1,630,347	\$1,908,530	\$278,183	17%
8	Public Relations	\$742,171	\$685,863	(\$56,308)	-8%
9	Purchasing	\$991,769	\$982,717	(\$9,052)	-1%
10	Dietary and Cafeteria	\$2,973,208	\$3,018,725	\$45,517	2%
11 12	Housekeeping	\$4,481,885	\$4,540,799	\$58,914	1%
12	Laundry & Linen Operation of Plant	\$1,136,096 \$5,669,978	\$1,211,251 \$6,727,201	\$75,155 \$1,057,223	<u>7%</u> 19%
13	Security	\$1,185,368	\$1,210,538	\$25,170	2%
15	Repairs and Maintenance	\$918,253	\$2.819	(\$915,434)	-100%
16	Central Sterile Supply	\$1,373,863	\$1,539,671	\$165,808	12%
17	Pharmacy Department	\$9,325,729	\$9,602,963	\$277,234	3%
18	Other General Services	\$40,164,452	\$41,882,100	\$1,717,648	4%
	Total General Services	\$111,629,089	\$110,641,582	(\$987,507)	-1%
В.	Professional Services:				
1	Medical Care Administration	\$7,813,659	\$9,806,153	\$1,992,494	26%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,960,468	\$2,018,914	\$58,446	3%
4	Medical Records	\$1,827,372	\$1,780,907	(\$46,465)	-3%
5 6	Social Service Other Professional Services	\$1,751,926	\$2,025,502	\$273,576 \$322,198	16%
0	Total Professional Services	\$7,622,581 \$20,976,006	\$7,944,779 \$23,576,255	\$322,198 \$2,600,249	4% 12%
C.	Special Services:				
1	Operating Room	\$20,392,668	\$18,435,238	(\$1,957,430)	-10%
2	Recovery Room	\$1,019,896	\$1,810,404	\$790,508	78%
3	Anesthesiology	\$530,545	\$466,378	(\$64,167)	-12%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$3,676,421	\$2,938,820	(\$737,601)	-20%
6	Diagnostic Ultrasound	\$467,943	\$515,072	\$47,129	10%
7	Radiation Therapy Radioisotopes	\$21,164 \$615,711	\$120,585 \$686,735	\$99,421 \$71.024	470% 12%
9	CT Scan	\$938,232	\$886,691	(\$51,541)	-5%
10	Laboratory	\$7,977,901	\$8,276,332	\$298,431	4%
11	Blood Storing/Processing	\$2,148,844	\$2,025,035	(\$123,809)	-6%
12	Cardiology	\$5,753,018	\$6,939,691	\$1,186,673	21%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$518,496	\$461,922	(\$56,574)	-11%
15 16	Occupational Therapy Speech Pathology	\$0 \$1,950	\$0 \$6,731	\$0 \$4,781	0% 245%
17	Audiology	\$1,950 \$0	\$0,731 \$0	<u>\$4,781</u> \$0	0%
18	Respiratory Therapy	\$1,507,972	\$1,542,744	\$34,772	2%
19	Pulmonary Function	\$19,356	\$18,692	(\$664)	-3%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0 \$0 424 259	\$0 \$0 202 227	\$0	0%
22	Psychiatry / Psychology Services Renal Dialysis	\$6,431,358 \$452,659	\$6,392,327 \$407,300	(\$39,031) (\$45,359)	-1% -10%
23 24	Emergency Room	\$452,659	\$407,300 \$7,113,051	(\$45,359) (\$1,614,728)	-10%
24	MRI	\$1,132,157	\$1,114,550	(\$17,607)	-19%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,352,519	\$1,809,440	\$456,921	34%
29	Sleep Center	\$1,015,547	\$812,513	(\$203,034)	-20%
30	Lithotripsy	\$0	\$0	\$0	0%

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(2) ESCRIPTION Eardiac Catheterization/Rehabilitation Eccupational Therapy / Physical Therapy Iental Clinic Other Special Services Total Special Services	FY 2010 ACTUAL \$234,020 \$1,254,223 \$0 \$466,722	FY 2011 ACTUAL \$237,238 \$1,245,247 \$0	AMOUNT DIFFERENCE \$3,218 (\$8,976)	% DIFFERENCE 1% -1%
ardiac Catheterization/Rehabilitation Occupational Therapy / Physical Therapy Dental Clinic Other Special Services	\$234,020 \$1,254,223 \$0 \$466,722	\$237,238 \$1,245,247 \$0	\$3,218 (\$8,976)	1%
occupational Therapy / Physical Therapy Iental Clinic Ither Special Services	\$1,254,223 \$0 \$466,722	\$1,245,247 \$0	(\$8,976)	
occupational Therapy / Physical Therapy Iental Clinic Ither Special Services	\$1,254,223 \$0 \$466,722	\$1,245,247 \$0	(\$8,976)	
ental Clinic ther Special Services	\$0 \$466,722	\$0	(+ -))	10/
Other Special Services	\$466,722		A A	-170
•	. ,		\$0	0%
Total Special Services		\$471,196	\$4,474	1%
	\$66,657,101	\$64,733,932	(\$1,923,169)	-3%
autine Serviceou				
	¢17 455 402	¢17 /06 110	\$40,627	0%
				-4%
		* / - /		-4 %
	. , ,	. , ,	(; , , ,	16%
		. , ,	. ,	0%
				-3%
				2%
	. , ,	. , ,	. ,	0%
ehabilitation Unit	\$0	\$0 \$0	\$0	0%
mbulatory Surgery	\$2,129,184	\$1.312.613	(\$816.571)	-38%
lome Care		. , ,	(, , ,	0%
Outpatient Clinics	\$0	\$0	\$0	0%
ther Routine Services	\$0	\$0	\$0	0%
Total Routine Services	\$35,257,817	\$34,606,532	(\$651,285)	-2%
ther Departments:				
liscellaneous Other Departments	\$2,999,563	\$2,144,696	(\$854,867)	-28%
otal Operating Expenses - All Departments*	\$237,519,576	\$235,702,997	(\$1,816,579)	-1%
*A 0. The total operating expenses amount ab	ove must agree with	the total operating	g expenses amoun	t on Report 150.
	mbulatory Surgery ome Care utpatient Clinics ther Routine Services Total Routine Services ther Departments: iscellaneous Other Departments otal Operating Expenses - All Departments*	edical & Surgical Units \$17,455,492 tensive Care Unit \$5,127,742 oronary Care Unit \$1,732,194 sychiatric Unit \$3,267,693 ediatric Unit \$4,198,709 ewborn Nursery Unit \$1,346,803 eonatal ICU \$0 ehabilitation Unit \$0 mbulatory Surgery \$2,129,184 ome Care \$0 uptatient Clinics \$0 ther Routine Services \$0 Total Routine Services \$0 iscellaneous Other Departments \$2,999,563 otal Operating Expenses - All Departments* \$237,519,576	edical & Surgical Units \$17,455,492 \$17,496,119 tensive Care Unit \$5,127,742 \$4,912,684 oronary Care Unit \$1,732,194 \$1,644,456 sychiatric Unit \$3,267,693 \$3,795,076 ediatric Unit \$0 \$0 aternity Unit \$4,198,709 \$4,071,847 ewborn Nursery Unit \$1,346,803 \$1,373,737 eonatal ICU \$0 \$0 some care \$0 \$0 mbulatory Surgery \$2,129,184 \$1,312,613 orne Care \$0 \$0 uptatient Clinics \$0 \$0 ther Routine Services \$0 \$0 ther Departments: \$2,999,563 \$2,144,696 otal Operating Expenses - All Departments* \$237,519,576 \$235,702,997	outine Services: outine edical & Surgical Units \$17,455,492 \$17,496,119 \$40,627 tensive Care Unit \$5,127,742 \$4,912,684 (\$215,058) oronary Care Unit \$1,732,194 \$1,644,456 (\$87,738) sychiatric Unit \$3,267,693 \$3,795,076 \$527,383 ediatric Unit \$0 \$0 \$0 aternity Unit \$4,198,709 \$4,071,847 (\$126,862) ewborn Nursery Unit \$1,346,803 \$1,373,737 \$26,934 eonatal ICU \$0 \$0 \$0 mbulatory Surgery \$2,129,184 \$1,312,613 (\$816,571) ome Care \$0 \$0 \$0 \$0 utpatient Clinics \$0 \$0 \$0 \$0 ther Routine Services \$0 \$0 \$0 \$0 iscellaneous Other Departments: \$2,999,563 \$2,144,696 (\$854,867)

	WATE	RBURY HOSPITAL						
	TWELVE M	ONTHS ACTUAL FILING						
	FISCAL YEAR 2011							
	REPORT 185 - HOSPITAL FINA	NCIAL AND STATISTICAL E	DATA ANALYSIS					
(1)	(2)	(3)	(4)	(5)				
. ,		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011				
<u></u>								
Α.	Statement of Operations Summary							
1	Total Net Patient Revenue	\$239,928,524	\$ 229,011,318	\$227,759,506				
2	Other Operating Revenue	8,617,813	7,866,089	8,617,978				
3	Total Operating Revenue	\$248,546,337	\$236,877,407	\$236,377,484				
4	Total Operating Expenses	253,532,594	237,519,576	235,702,997				
5	Income/(Loss) From Operations	(\$4,986,257)	(\$642,169)	\$674,487				
6	Total Non-Operating Revenue	3,066,686	969,525	134,208				
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,919,571)	\$327,356	\$808,695				
		(+.,)						
в.	Profitability Summary							
1	Hospital Operating Margin	-1.98%	-0.27%	0.29%				
2	Hospital Non Operating Margin	1.22%	0.41%	0.06%				
3	Hospital Total Margin	-0.76%	0.14%	0.34%				
4	Income/(Loss) From Operations	(\$4,986,257)	(\$642,169)	\$674,487				
5	Total Operating Revenue	\$248,546,337	\$236,877,407	\$236,377,484				
6	Total Non-Operating Revenue	\$3,066,686	\$969,525	\$134,208				
7	Total Revenue	\$251,613,023	\$237,846,932	\$236,511,692				
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,919,571)	\$327,356	\$808,695				
C.	Net Assets Summary							
1	Hospital Unrestricted Net Assets	\$44,636,663	\$40,084,846	\$22,349,947				
2	Hospital Total Net Assets	\$93,058,584	\$90,753,820	\$68,958,676				
3	Hospital Change in Total Net Assets	(\$6,937,716)	(\$2,304,764)	(\$21,795,144)				
4	Hospital Change in Total Net Assets %	93.1%	-2.5%	-24.0%				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.30	0.29	0.28				
2	Total Operating Expenses	\$253,532,594	\$237,519,576	\$235,702,997				
3	Total Gross Revenue	\$844,914,267	\$815,767,927	\$821,229,348				
4	Total Other Operating Revenue	\$13,073,722	\$10,576,444	\$12,417,187				
5	Private Payment to Cost Ratio	1.09	1.16	1.19				
6	Total Non-Government Payments	\$93,517,673	\$89,132,989	\$89,083,836				
7	Total Uninsured Payments	\$4,673,624	\$714,101	\$1,551,075				
8	Total Non-Government Charges	\$295,361,960	\$280,737,111	\$274,617,886				
9	Total Uninsured Charges	\$19,996,563	\$16,351,062	\$14,635,747				

	WATERBU	RY HOSPITAL						
	TWELVE MONTI	HS ACTUAL FILING						
	FISCAL YEAR 2011							
	REPORT 185 - HOSPITAL FINANCIA	L AND STATISTICAL DA	ATA ANALYSIS					
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011				
10	Medicare Payment to Cost Ratio	0.88	0.89	0.88				
11	Total Medicare Payments	\$105,422,025	\$99,518,147	\$97,097,182				
12	Total Medicare Charges	\$404,726,863	\$388,396,855	\$391,166,003				
13	Medicaid Payment to Cost Ratio	0.68	0.62	0.66				
14	Total Medicaid Payments	\$21,623,564	\$19,487,482	\$28,787,018				
15	Total Medicaid Charges	\$107,535,583	\$108,682,556	\$154,611,265				
16	Uncompensated Care Cost	\$4,766,186	\$4,856,677	\$3,779,820				
17	Charity Care	\$1,809,921	\$1,910,845	\$2,456,277				
18	Bad Debts	\$14,319,487	\$14,985,815	\$10,912,386				
19	Total Uncompensated Care	\$16,129,408	\$16,896,660	\$13,368,663				
20	Uncompensated Care % of Total Expenses	1.9%	2.0%	1.6%				
21	Total Operating Expenses	\$253,532,594	\$237,519,576	\$235,702,997				
E.	Liquidity Measures Summary							
1	Current Ratio	2.00	1.79	1.54				
2	Total Current Assets	\$49,565,466	\$48,912,347	\$53,605,970				
3	Total Current Liabilities	\$24,823,818	\$27,364,671	\$34,748,311				
4	Days Cash on Hand	22	26	16				
5	Cash and Cash Equivalents	\$14,657,330	\$16,243,349	\$10,101,423				
6	Short Term Investments	0	0	0				
7	Total Cash and Short Term Investments	\$14,657,330	\$16,243,349	\$10,101,423				
8	Total Operating Expenses	\$253,532,594	\$237,519,576	\$235,702,997				
9	Depreciation Expense	\$9,056,904	\$9,226,011	\$8,117,962				
10	Operating Expenses less Depreciation Expense	\$244,475,690	\$228,293,565	\$227,585,035				

	WATERBU	RY HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011							
	REPORT 185 - HOSPITAL FINANCIA	AL AND STATISTICAL DA	TA ANALYSIS					
(1)	(2)	(3)	(4)	(5)				
.,		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011				
11	Days Revenue in Patient Accounts Receivable	44.68	43.88	54.25				
12	Net Patient Accounts Receivable	\$ 30,390,471 \$	27,764,677	\$ 30,992,121				
13	Due From Third Party Payers	\$0	\$0	\$2,858,08				
14	Due To Third Party Payers	\$1,023,178	\$230,310	\$				
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 29,367,293 \$	27,534,367	\$ 33,850,207				
16	Total Net Patient Revenue	\$239,928,524 \$	229,011,318	\$ 227,759,506				
17	Average Payment Period	37.06	43.75	55.73				
18	Total Current Liabilities	\$24,823,818	\$27,364,671	\$34,748,311				
19	Total Operating Expenses	\$253,532,594	\$237,519,576	\$235,702,997				
20	Depreciation Expense	\$9,056,904	\$9,226,011	\$8,117,96				
21	Total Operating Expenses less Depreciation Expense	\$244,475,690	\$228,293,565	\$227,585,035				
F.	Solvency Measures Summary							
1	Equity Financing Ratio	61.5	60.3	46.2				
2	Total Net Assets	\$93,058,584	\$90,753,820	\$68,958,676				
3	Total Assets	\$151,297,119	\$150,461,930	\$149,253,12 ⁻				
4	Cash Flow to Total Debt Ratio	16.3	21.0	14.7				
5	Excess/(Deficiency) of Revenues Over Expenses	(\$1,919,571)	\$327,356	\$808,695				
6	Depreciation Expense	\$9,056,904	\$9,226,011	\$8,117,96				
7	Excess of Revenues Over Expenses and Depreciation Expense	\$7,137,333	\$9,553,367	\$8,926,657				
8	Total Current Liabilities	\$24,823,818	\$27,364,671	\$34,748,311				
9	Total Long Term Debt	\$19,049,553	\$18,142,716	\$26,180,18				
10	Total Current Liabilities and Total Long Term Debt	\$43,873,371	\$45,507,387	\$60,928,500				
11	Long Term Debt to Capitalization Ratio	17.0	16.7	27.				
12	Total Long Term Debt	\$19,049,553	\$18,142,716	\$26,180,189				
13	Total Net Assets	\$93,058,584	\$90,753,820	\$68,958,676				
14	Total Long Term Debt and Total Net Assets	\$112,108,137	\$108,896,536	\$95,138,865				
15	Debt Service Coverage Ratio	3.4	4.3	5.9				
16	Excess Revenues over Expenses	(\$1,919,571)	\$327,356	\$808,695				
17	Interest Expense	\$1,281,962	\$1,188,449	\$989,771				
18	Depreciation and Amortization Expense	\$9,056,904	\$9,226,011	\$8,117,962				
19	Principal Payments	\$1,162,266	\$1,334,228	\$678,817				

	WATERBUR							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(-)		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011				
		<u>F1 2009</u>	<u></u>	<u> </u>				
G.	Other Financial Ratios							
20	Average Age of Plant	21.8	22.4	26.4				
21	Accumulated Depreciation	\$197.380.797	\$206.294.646	\$214,304,472				
22	Depreciation and Amortization Expense	\$9,056,904	\$9,226,011	\$8,117,962				
Н.	Utilization Measures Summary							
1	Patient Days	67,682	59,271	58,780				
2	Discharges	13,916	13,046	12,758				
3	ALOS	4.9	4.5	4.6				
4	Staffed Beds	214	192	190				
5	Available Beds	214	292	284				
-		-						
6	Licensed Beds	393	393	393				
6	Occupancy of Staffed Beds	86.6%	84.6%	84.8%				
7	Occupancy of Available Beds	63.5%	55.6%	56.7%				
8	Full Time Equivalent Employees	1,589.2	1,513.1	1,512.7				
Ι.	Hospital Gross Revenue Payer Mix Percentage							
1	Non-Government Gross Revenue Payer Mix Percentage	32.6%	32.4%	31.7%				
2	Medicare Gross Revenue Payer Mix Percentage Medicaid Gross Revenue Payer Mix Percentage	47.9% 12.7%	47.6% 13.3%	47.6% 18.8%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	4.3%	4.5%	0.0%				
5	Uninsured Gross Revenue Payer Mix Percentage	2.4%	2.0%	1.8%				
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)	\$275,365,397	\$264,386,049	\$259,982,139				
9	Medicare Gross Revenue (Charges)	\$404,726,863	\$388,396,855	\$391,166,003				
10	Medicaid Gross Revenue (Charges)	\$107,535,583	\$108,682,556	\$154,611,265				
11	Other Medical Assistance Gross Revenue (Charges)	\$36,022,959	\$37,077,529	\$0				
12	Uninsured Gross Revenue (Charges)	\$19,996,563	\$16,351,062	\$14,635,747				
13 14	CHAMPUS / TRICARE Gross Revenue (Charges) Total Gross Revenue (Charges)	\$1,266,902 \$844,914,267	\$873,876 \$815,767,927	\$834,194 \$821,229,348				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	39.7%	41.7%	40.7%				
2	Medicare Net Revenue Payer Mix Percentage	47.1%	47.0%	45.1%				
3	Medicaid Net Revenue Payer Mix Percentage	9.7%	9.2%	13.4%				
4 5	Other Medical Assistance Net Revenue Payer Mix Percentage Uninsured Net Revenue Payer Mix Percentage	<u>1.3%</u> 2.1%	<u> </u>	0.0%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.3%	0.1%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				

	WATER	BURY HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2011								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011					
8	Non-Government Net Revenue (Payments)	\$88,844,049	\$88,418,888	\$87,532,761					
9	Medicare Net Revenue (Payments)	\$105,422,025	\$99,518,147	\$97,097,182					
10	Medicaid Net Revenue (Payments)	\$21,623,564	\$19,487,482	\$28,787,018					
11	Other Medical Assistance Net Revenue (Payments)	\$2,939,438	\$3,605,579	\$0					
12	Uninsured Net Revenue (Payments)	\$4,673,624	\$714,101	\$1,551,075					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$244,955	\$197,908	\$181,999					
14	Total Net Revenue (Payments)	\$223,747,655	\$211,942,105	\$215,150,035					
К.	Discharges								
1	Non-Government (Including Self Pay / Uninsured)	4,524	3,968	3,719					
2	Medicare	6,496	6,077	5,972					
3	Medical Assistance	2,881	2,991	3,059					
4	Medicaid	2,363	2,411	3,059					
5	Other Medical Assistance	518	580	-					
6	CHAMPUS / TRICARE	15	10	8					
7	Uninsured (Included In Non-Government)	265	216	158					
8	Total	13,916	13,046	12,758					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.293650	1.315160	1.273500					
2	Medicare	1.592700	1.666750	1.561000					
3	Medical Assistance	1.755999	1.032599	0.978100					
4	Medicaid	1.886300	0.998800	0.978100					
5	Other Medical Assistance	1.161600	1.173100	0.000000					
6	CHAMPUS / TRICARE	1.660100	1.715000	1.387400					
7	Uninsured (Included In Non-Government)	1.146600	1.160900	1.164200					
8	Total Case Mix Index	1.529361	1.414460	1.337321					
м.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	8,895	8,340	8,462					
2	Emergency Room - Treated and Discharged	49,237	49,393	48,560					
3	Total Emergency Room Visits	58,132	57,733	57,022					

DESCRIPTION	FY 2010	FY 2011	AMOUNT	%
DESCRIPTION				
	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
MEDICARE MANAGED CARE				
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	1, ,	1 / /	1 /	50%
				21% 59%
Disatient Payments				75%
				35%
				24%
				33%
	-			48%
				33%
				52%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$704,900	\$907,811	\$202,911	29%
	^	* •	^	
				0%
				0%
				0%
				0%
		-	-	0%
				0%
		0		0%
		0	-	0%
	-	-		0%
				0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
			.	
				69%
				58%
				23%
				26%
	84	173	89	106%
				59%
	1,403		547	39%
		202	80	66%
Emergency Department Inpatient Admissions		115	65	130%
TOTAL INPATIENT & OUTPATIENT CHARGES	\$8,322,414		\$4,312,939	52%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,879,988	\$2,808,303	\$928,315	49%
	TOTAL INPATIENT & OUTPATIENT CHARGES	Inpatient Charges\$1,985,732Inpatient Payments\$599,367Outpatient Charges\$563,100Outpatient Payments\$105,533Discharges43Patient Days241Outpatient Visits (Excludes ED Visits)293Emergency Department Outpatient Visits46Emergency Department Inpatient Admissions33TOTAL INPATIENT & OUTPATIENT CHARGES\$2,548,832TOTAL INPATIENT & OUTPATIENT PAYMENTS\$704,900CIGNA HEALTHCARE1Inpatient Charges\$0Inpatient Charges\$0Outpatient Payments\$0Outpatient Payments\$0Outpatient Visits (Excludes ED Visits)0Emergency Department Outpatient Visits0Patient Days0Outpatient Payments\$0Discharges0Patient Days0Outpatient Visits (Excludes ED Visits)0Emergency Department Outpatient Visits0Emergency Department Outpatient Visits0CONNECTICARE, INC.1Inpatient Charges\$5,277,689Inpatient Charges\$5,277,689Inpatient Payments\$517,539Discharges84Patient Days513Outpatient Payments\$1,362,449Outpatient Payments\$1,362,449Outpatient Payments\$1,362,449Outpatient Payments\$1,362,449Outpatient Visits (Excludes ED Visits)1,403Emergency Department Outpatient Visits122Emergen	Inpatient Charges \$1,985,732 \$2,980,263 Inpatient Payments \$559,367 \$723,635 Outpatient Charges \$105,533 \$184,176 Discharges 43 58 Patient Days 241 298 Outpatient Visits (Excludes ED Visits) 293 390 Emergency Department Outpatient Visits 46 68 Emergency Department Inpatient Admissions 33 44 TOTAL INPATIENT & OUTPATIENT CHARGES \$2,548,832 \$3,878,197 TOTAL INPATIENT & OUTPATIENT PAYMENTS \$704,900 \$907,811 CIGNA HEALTHCARE Inpatient Charges \$0 \$0 Inpatient Payments \$0 \$0 Outpatient Payments \$0 \$0 Discharges 0 0 0 Outpatient Payments \$0 \$0 \$0 Discharges 0 0 0 0 Outpatient Payments \$0 \$0 0 0 Discharges 0 0 <td< td=""><td>Inpatient Charges \$1,985,732 \$2,980,263 \$994,531 Inpatient Payments \$563,100 \$897,334 \$334,834 Outpatient Payments \$105,533 \$184,176 \$78,643 Discharges 43 58 15 Patient Days 241 298 57 Outpatient Visits (Excludes ED Visits) 293 390 97 Emergency Department Inpatient Admissions 33 44 11 TOTAL INPATIENT & OUTPATIENT CHARGES \$2,548,832 \$3,878,197 \$1,329,365 TOTAL INPATIENT & OUTPATIENT CHARGES \$2,548,832 \$3,878,197 \$1,329,365 TOTAL INPATIENT & OUTPATIENT PAYMENTS \$704,900 \$907,811 \$202,911 CIGNA HEALTHCARE Inpatient Charges \$0 \$0 \$0 Inpatient Payments \$0 \$0 \$0 Outpatient Payments \$0 \$0 \$0 Discharges 0 0 0 0 Outpatient Payments \$0 0 0</td></td<>	Inpatient Charges \$1,985,732 \$2,980,263 \$994,531 Inpatient Payments \$563,100 \$897,334 \$334,834 Outpatient Payments \$105,533 \$184,176 \$78,643 Discharges 43 58 15 Patient Days 241 298 57 Outpatient Visits (Excludes ED Visits) 293 390 97 Emergency Department Inpatient Admissions 33 44 11 TOTAL INPATIENT & OUTPATIENT CHARGES \$2,548,832 \$3,878,197 \$1,329,365 TOTAL INPATIENT & OUTPATIENT CHARGES \$2,548,832 \$3,878,197 \$1,329,365 TOTAL INPATIENT & OUTPATIENT PAYMENTS \$704,900 \$907,811 \$202,911 CIGNA HEALTHCARE Inpatient Charges \$0 \$0 \$0 Inpatient Payments \$0 \$0 \$0 Outpatient Payments \$0 \$0 \$0 Discharges 0 0 0 0 Outpatient Payments \$0 0 0

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$22,852,409	\$5,555,677	(\$17,296,732)	-76%
2	Inpatient Payments	\$6,077,233	\$1,460,834	(\$4,616,399)	-76%
3	Outpatient Charges	\$7,204,954	\$1,878,513	(\$5,326,441)	-74%
4	Outpatient Payments	\$1,221,290	\$309,875	(\$911,415)	-75%
5	Discharges	451	108	(343)	-76%
6	Patient Days	2,257	569	(1,688)	-75%
7	Outpatient Visits (Excludes ED Visits)	3,924	969	(2,955)	-75%
8	Emergency Department Outpatient Visits	474	135	(339)	-72%
9	Emergency Department Inpatient Admissions	337	82	(255)	-76%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$30,057,363	\$7,434,190	(\$22,623,173)	-75%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,298,523	\$1,770,709	(\$5,527,814)	-76%
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Ε.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$1,836,208	\$569,176	(\$1,267,032)	-69%
2	Inpatient Payments	\$458,731	\$131,122	(\$327,609)	-71%
3	Outpatient Charges	\$397,667	\$119,838	(\$277,829)	-70%
4	Outpatient Payments	\$65,956	\$25,574	(\$40,382)	-61%
5	Discharges	36	11	(25)	-69%
	Patient Days	208	61	(147)	-71%
7	Outpatient Visits (Excludes ED Visits)	186	58	(128)	-69%
8	Emergency Department Outpatient Visits	50	50	0	0%
9	Emergency Department Inpatient Admissions	32	11	(21)	-66%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,233,875	\$689,014	(\$1,544,861)	-69%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$524,687	\$156,696	(\$367,991)	-70%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVAN				
1	Inpatient Charges	\$4,156,536	\$5,178,839	\$1,022,303	25%
2	Inpatient Payments	\$1,075,104	\$1,217,553	\$142,449	13%
3	Outpatient Charges	\$1,163,006	\$1,947,740	\$784,734	67%
	Outpatient Payments	\$155,592	\$310,999	\$155,407	100%
5	Discharges	85	114	29	34%
6	Patient Days	443	659	216	49%
-	Outpatient Visits (Excludes ED Visits)	795	1,197	402	51%
	Emergency Department Outpatient Visits	97	157	60	62%
9	Emergency Department Inpatient Admissions	69	101	32	46%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,319,542	\$7,126,579	\$1,807,037	34%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,230,696	\$1,528,552	\$297,856	24%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$332,570	\$15,664,905	\$15,332,335	4610%
2	Inpatient Payments	\$92,997	\$4,006,824	\$3,913,827	4209%
3	Outpatient Charges	\$241,003	\$6,342,581	\$6,101,578	2532%
4	Outpatient Payments	\$47,519	\$1,129,063	\$1,081,544	2276%
5	Discharges	5	336	331	6620%
	Patient Days	29	1,757	1,728	5959%
7	Outpatient Visits (Excludes ED Visits)	37	3,866	3,829	10349%
8	Emergency Department Outpatient Visits	4	413	409	10225%
9	Emergency Department Inpatient Admissions	5	286	281	5620%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$573,573	\$22,007,486	\$21,433,913	3737%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$140,516	\$5,135,887	\$4,995,371	3555%
Н.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$2,555,226	\$3,658,540	\$1,103,314	43%
2	Inpatient Payments	\$709,085	\$817,644	\$108,559	15%
	Outpatient Charges	\$1,439,997	\$1,546,573	\$106,576	7%
4	Outpatient Payments	\$242,040	\$256,480	\$14,440	6%
	Discharges	60	72	12	20%
	Patient Days	293	398	105	36%
	Outpatient Visits (Excludes ED Visits)	867	911	44	5%
8	Emergency Department Outpatient Visits	189	260	71	38%
9	Emergency Department Inpatient Admissions	54	61	7	13%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,995,223	\$5,205,113	\$1,209,890	30%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$951,125	\$1,074,124	\$122,999	13%
Ι.	AETNA				
1	Inpatient Charges	\$3,149,502	\$1,687,003	(\$1,462,499)	-46%
2	Inpatient Payments	\$879,180	\$436,591	(\$442,589)	-50%
3	Outpatient Charges	\$1,342,822	\$871,125	(\$471,697)	-35%
	Outpatient Payments	\$240,838	\$147,384	(\$93,454)	-39%
5	Discharges	61	39	(22)	-36%
	Patient Days	337	170	(167)	-50%
	Outpatient Visits (Excludes ED Visits)	572	509	(63)	-11%
	Emergency Department Outpatient Visits	81	69	(12)	-15%
9	Emergency Department Inpatient Admissions	42	33	(9)	-21%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,492,324	\$2,558,128	(\$1,934,196)	-43%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,120,018	\$583,975	(\$536,043)	-48%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	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%
К.	SECURE HORIZONS				
		¢0.	۴۵	¢0	00/
1	Inpatient Charges	\$0 \$0	\$0	\$0 \$0	0%
2	Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0%
3	Outpatient Charges		\$0 \$0		0%
4	Outpatient Payments	\$0		\$0	0%
	Discharges	0	0	0	0%
	Patient Days	-	-	-	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 9	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0 \$0	0 \$0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES				0%
	TOTAL INPATIENT & OUTPATIENT PATMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
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(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMÓÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
				Γ	
М.		^	* *	<u>^</u>	
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0 \$0	\$0	\$0 \$0	0%
4 5	Outpatient Payments Discharges	\$U 0	\$0 0	\$0 0	0% 0%
5 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%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	<u>\$0</u> \$0	\$0	0%
		ΨŪ	ΨŪ	ΨŪ	U 70
N.	EVERCARE				
1	Inpatient Charges	\$1,295,788	\$1,343,419	\$47,631	4%
2	Inpatient Payments	\$450,797	\$369,868	(\$80,929)	-18%
3	Outpatient Charges	\$866,839	\$584,948	(\$281,891)	-33%
4	Outpatient Payments	\$138,280	\$105,969	(\$32,311)	-23%
5	Discharges	35	34	(1)	-3%
6	Patient Days	168	176	8	5%
7	Outpatient Visits (Excludes ED Visits)	481	297	(184)	-38%
8	Emergency Department Outpatient Visits	156	103	(53)	-34%
9	Emergency Department Inpatient Admissions	32	32	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,162,627	\$1,928,367	(\$234,260)	-11%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$589,077	\$475,837	(\$113,240)	-19%
п.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$43,441,660	\$45,535,065	\$2,093,405	5%
	TOTAL INPATIENT PAYMENTS	\$11,704,943	\$11,318,854	(\$386,089)	-3%
	TOTAL OUTPATIENT CHARGES	\$16,264,113	\$17,927,362	\$1,663,249	10%
	TOTAL OUTPATIENT PAYMENTS	\$2,734,587	\$3,123,040	\$388,453	14%
	TOTAL DISCHARGES	860	945	85	10%
	TOTAL PATIENT DAYS	4,489	4,906	417	9%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	8,558	10,147	1,589	19%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	1,219	1,457	238	20%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	654	765	111	17%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$59,705,773	\$63,462,427	\$3,756,654	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$14,439,530	\$14,441,894	\$2,364	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD				
Α.	OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$533	\$0	(\$533)	-100%
4	Outpatient Payments	\$57	\$0	(\$57)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	2	0	(2)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$533	\$0	(\$533)	-100%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$57	\$0	(\$57)	-100%
В.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$17,439,330	\$15,264,591	(\$2,174,739)	-12%
2	Inpatient Payments	\$3,207,142	\$3,267,610	\$60,468	2%
3	Outpatient Charges	\$25,266,627	\$22,821,543	(\$2,445,084)	-10%
4	Outpatient Payments	\$4,610,218	\$4,287,629	(\$322,589)	-7%
5	Discharges	1,033	952	(81)	-8%
6	Patient Days	3,334	2,859	(475)	-14%
7	Outpatient Visits (Excludes ED Visits)	11,355	10,656	(699)	-6%
8	Emergency Department Outpatient Visits	8,569	7,661	(908)	-11%
9	Emergency Department Inpatient Admissions	244	200	(44)	-18%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$42,705,957	\$38,086,134	(\$4,619,823)	-11%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$7,817,360	\$7,555,239	(\$262,121)	-3%
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0 \$0	\$0	\$0	0%
3	Outpatient Charges	\$1,141	\$0	(\$1,141)	-100%
4	Outpatient Payments	\$69	\$0	(\$69)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	2	0	(2)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
~	TOTAL INPATIENT & OUTPATIENT		0	0	570
	CHARGES	\$1,141	\$0	(\$1,141)	-100%
	TOTAL INPATIENT & OUTPATIENT	· · · ·	, -		
	PAYMENTS	\$69	\$0	(\$69)	-100%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$2,217,568	\$3,641,319	\$1,423,751	64%
2	Inpatient Payments	\$375,655	\$594,590	\$218,935	58%
3	Outpatient Charges	\$2,453,042	\$3,132,486	\$679,444	28%
4	Outpatient Payments	\$449,212	\$617,856	\$168,644	38%
5	Discharges	118	162	44	37%
6	Patient Days	426	602	176	41%
7	Outpatient Visits (Excludes ED Visits)	809	1,269	460	57%
8	Emergency Department Outpatient Visits	1,273	1,324	51	4%
9	Emergency Department Inpatient Admissions	37	51	14	38%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$4,670,610	\$6,773,805	\$2,103,195	45%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$824,867	\$1,212,446	\$387,579	47%
Ε.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT				
	PAYMENTS	\$0	\$0	\$0	0%
	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				
	CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT	÷,,	÷÷		570
	PAYMENTS	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
•					
G.		\$ 2	*	* 0	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%
Н.	AETNA				
1	Inpatient Charges	\$5,394,816	\$7,142,164	\$1,747,348	32%
2	Inpatient Payments	\$975,010	\$1,600,814	\$625,804	64%
3	Outpatient Charges	\$7,578,470	\$8,090,537	\$512,067	7%
4	Outpatient Payments	\$1,419,212	\$1,680,985	\$261,773	18%
5	Discharges	334	418	84	25%
6	Patient Days	1,021	1,428	407	40%
7	Outpatient Visits (Excludes ED Visits)	2,890	3,423	533	18%
8	Emergency Department Outpatient Visits	2,947	2,977	30	1%
9	Emergency Department Inpatient Admissions	76	91	15	20%
-	TOTAL INPATIENT & OUTPATIENT				
	CHARGES	\$12,973,286	\$15,232,701	\$2,259,415	17%
	TOTAL INPATIENT & OUTPATIENT	<i>••=,•••</i> , <i>-••</i>	<i>+···</i> ,- <i>·</i> ,···	<i> </i>	
	PAYMENTS	\$2,394,222	\$3,281,799	\$887,577	37%
		,	<i>\\\\\\\\\\\\\</i>	***	0170
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$25,051,714	\$26,048,074	\$996,360	4%
	TOTAL INPATIENT PAYMENTS	\$4,557,807	\$5,463,014	\$905,207	20%
	TOTAL OUTPATIENT CHARGES	\$35,299,813	\$34,044,566	(\$1,255,247)	-4%
	TOTAL OUTPATIENT PAYMENTS	\$6,478,768	\$6,586,470	\$107,702	2%
	TOTAL DISCHARGES	1,485	1,532	47	3%
	TOTAL PATIENT DAYS	4,781	4,889	108	2%
	TOTAL OUTPATIENT VISITS		-,		
	(EXCLUDES ED VISITS)	15,058	15,348	290	2%
	TOTAL EMERGENCY DEPARTMENT		,		
		12,789	11,962	(827)	-6%
	TOTAL EMERGENCY DEPARTMENT	12,700	11,002	(021)	070
	INPATIENT ADMISSIONS	357	342	(15)	-4%
	TOTAL INPATIENT & OUTPATIENT	537	572	(13)	-7/0
ı.	CHARGES	\$60,351,527	\$60,092,640	(\$258,887)	0%
	TOTAL INPATIENT & OUTPATIENT	ψ00,331,321	ψ00,032,0 4 0	(#230,007)	0 /8
	PAYMENTS	\$11 026 575	\$12 040 494	\$1 012 000	00/
	FAIWENIS	\$11,036,575	\$12,049,484	\$1,012,909	9%

	GREATER W	ATERBURY HEALTH NET	WORK		
	TWELVE	MONTHS ACTUAL FILIN	IG		
	FISCAL YEAR 2011				
	REPORT 300 - HOSP	ITAL BALANCE SHEET I	NFORMATION		
(1) <u>LINE</u>	(2) DESCRIPTION	(3) FY 2010 <u>ACTUAL</u>	(4) FY 2011 <u>ACTUAL</u>	(5) AMOUNT <u>DIFFERENCE</u>	(6) % <u>DIFFERENCE</u>
Ι.	ASSETS				
Α.	Current Assets:				
1	Cash and Cash Equivalents	\$22,269,814	\$16,661,759	(\$5,608,055)	-25%
2	Short Term Investments	\$920,291	\$1,034,841	\$114,550	12%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$32,604,849	\$36,954,627	\$4,349,778	13%
4	Current Assets Whose Use is Limited for Current Liabilities	\$582,693	\$0	(\$582,693)	-100%
5	Due From Affiliates	\$197.863	\$205,399	(\$382,093)	4%
6	Due From Third Party Payers	\$0	\$2,634,481	\$2,634,481	0%
7	Inventories of Supplies	\$812,360	\$858,762	\$46,402	6%
8	Prepaid Expenses	\$1,423,516	\$1,784,333	\$360,817	25%
9	Other Current Assets	\$1,728,061	\$2,466,833	\$738,772	43%
	Total Current Assets	\$60,539,447	\$62,601,035	\$2,061,588	3%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$39,561,090	\$37,339,264	(\$2,221,826)	-6%
2	Board Designated for Capital Acquisition	\$2,787,502	\$2,615,009	(\$172,493)	-6%
3	Funds Held in Escrow	\$2,051,129	\$3,987,589	\$1,936,460	94%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
4	Total Noncurrent Assets Whose Use is Limited:	\$44,399,721	\$43,941,862	(\$457,859)	-1%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$32,295,430	\$29,021,464	(\$3,273,966)	-10%
7	Other Noncurrent Assets	\$1,369,618	\$2,488,856	\$1,119,238	82%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$259,813,818	\$274,105,636	\$14,291,818	6%
2	Less: Accumulated Depreciation	\$215,664,310	\$225,120,225	\$9,455,915	\$0
	Property, Plant and Equipment, Net	\$44,149,508	\$48,985,411	\$4,835,903	11%
3	Construction in Progress	\$1,688,586	\$3,023,126	\$1,334,540	79%
	Total Net Fixed Assets	\$45,838,094	\$52,008,537	\$6,170,443	13%
	Total Assets	\$184,442,310	\$190,061,754	\$5,619,444	3%
		Ţ 10 I, I / 12,0 I U	÷.00,001,704	<i>40,010,111</i>	570

	GREATER W	ATERBURY HEALTH NET	TWORK		
	TWELVE	MONTHS ACTUAL FILIN	NG		
		FISCAL YEAR 2011			
	REPORT 300 - HOSP	ITAL BALANCE SHEET I	NFORMATION		
(1)	(2)	(3) FY 2010	(4) FY 2011	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
II.	LIABILITIES AND NET ASSETS				
Α.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$28,749,242	\$38,843,422	\$10,094,180	35%
2	Salaries, Wages and Payroll Taxes	\$0	\$0	\$0	0%
3	Due To Third Party Payers	\$414,546	\$0	(\$414,546)	-100%
4	Due To Affiliates	\$10,409	\$9,984	(\$425)	-4%
5	Current Portion of Long Term Debt	\$910,000	\$488,779	(\$421,221)	-46%
6	Current Portion of Notes Payable	\$502,875	\$584,216	\$81,341	16%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$30,587,072	\$39,926,401	\$9,339,329	31%
B.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$19,661,864	\$26,647,100	\$6,985,236	36%
2	Notes Payable (Net of Current Portion)	\$736,885	\$1,499,034	\$762,149	103%
	Total Long Term Debt	\$20,398,749	\$28,146,134	\$7,747,385	38%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$14,667,421	\$19,806,617	\$5,139,196	35%
	Total Long Term Liabilities	\$35,066,170	\$47,952,751	\$12,886,581	37%
5	Interest in Net Assets of Affiliates or Joint	\$2,930,053	\$3,182,177	\$252,124	9%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$65,190,041	\$52,391,696	(\$12,798,345)	-20%
2	Temporarily Restricted Net Assets	\$8,315,873	\$6,477,454	(\$1,838,419)	-22%
3	Permanently Restricted Net Assets	\$42,353,101	\$40,131,275	(\$2,221,826)	-5%
	Total Net Assets	\$115,859,015	\$99,000,425	(\$16,858,590)	-15%
	Total Liabilities and Net Assets	\$184,442,310	\$190,061,754	\$5,619,444	3%

		TERBURY HEALTH			
		MONTHS ACTUAL I FISCAL YEAR 2011			
	REPORT 350 - HOSPITAL ST				
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT	%
	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$872,701,324	\$906,251,993	\$33,550,669	4%
2	Less: Allowances	\$609,807,896	\$630,086,056	\$20,278,160	3%
	Less: Charity Care	\$3,081,466	\$3,361,605	\$280,139	9%
4	Less: Other Deductions	\$0	\$2,071,934	\$2,071,934	0%
	Total Net Patient Revenue	\$259,811,962	\$270,732,398	\$10,920,436	4%
5	Other Operating Revenue	\$10,350,069	\$9,574,835	(\$775,234)	-7%
6	Net Assets Released from Restrictions	\$5,405,414	\$5,919,545	\$514,131	10%
	Total Operating Revenue	\$275,567,445	\$286,226,778	\$10,659,333	4%
В.	Operating Expenses:				
1	Salaries and Wages	\$125,222,159	\$137,097,628	\$11,875,469	9%
2	Fringe Benefits	\$33,635,302	\$37,221,865	\$3,586,563	11%
3	Physicians Fees	\$12,680,633	\$14,477,169	\$1,796,536	14%
4	Supplies and Drugs	\$73,500,923	\$75,748,740	\$2,247,817	3%
5	Depreciation and Amortization	\$9,815,349	\$9,490,443	(\$324,906)	-3%
6	Bad Debts	\$15,713,175	\$11,672,243	(\$4,040,932)	-26%
7	Interest	\$1,915,699	\$1,303,514	(\$612,185)	-32%
8	Malpractice	\$4,766,005	\$6,570,244	\$1,804,239	38%
9	Other Operating Expenses	\$2,695,434	\$285,998	(\$2,409,436)	-89%
	Total Operating Expenses	\$279,944,679	\$293,867,844	\$13,923,165	5%
	Income/(Loss) From Operations	(\$4,377,234)	(\$7,641,066)	(\$3,263,832)	75%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,308,292	\$1,534,896	\$226,604	17%
2	Gifts, Contributions and Donations	\$198,765	\$312,248	\$113,483	57%
3	Other Non-Operating Gains/(Losses)	(\$1,030,015)	(\$1,111,268)	(\$81,253)	8%
	Total Non-Operating Revenue	\$477,042	\$735,876	\$258,834	54%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$3,900,192)	(\$6,905,190)	(\$3,004,998)	77%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	(\$1,720,752)	(\$1,720,752)	0%
	All Other Adjustments	\$0	(\$1,149,155)	(\$1,149,155)	0%
	Total Other Adjustments	\$0	(\$2,869,907)	(\$2,869,907)	0%
	Excess/(Deficiency) of Revenue Over Expenses	(\$3,900,192)	(\$9,775,097)	(\$5,874,905)	151%

	GREATER WATERBURY H	EALTH NETWORK								
	TWELVE MONTHS AC	TUAL FILING								
	FISCAL YEA	R 2011								
	REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS									
(1)	(1) (2) (3) (4) (
	(2)	ACTUAL	ACTUAL	(5) ACTUAL						
LINE	DESCRIPTION	<u>FY 2009</u>	<u>FY 2010</u>	FY 2011						
A.	Parent Corporation Statement of Operations Summary									
1	Net Patient Revenue	\$258,121,071	\$259,811,962	\$270,732,398						
2	Other Operating Revenue	18,263,331	15,755,483	15,494,380						
3	Total Operating Revenue	\$276,384,402	\$275,567,445	\$286,226,778						
4	Total Operating Expenses	281,577,387	279,944,679	293,867,844						
5	Income/(Loss) From Operations	(\$5,192,985)	(\$4,377,234)	(\$7,641,066)						
6	Total Non-Operating Revenue	1,888,849	477,042	(2,134,031)						
7	Excess/(Deficiency) of Revenue Over Expenses	(\$3,304,136)	(\$3,900,192)	(\$9,775,097)						
В.	Parent Corporation Profitability Summary									
1	Parent Corporation Operating Margin	-1.87%	-1.59%	-2.69%						
2	Parent Corporation Non-Operating Margin	0.68%	0.17%	-0.75%						
3	Parent Corporation Total Margin	-1.19%	-1.41%	-3.44%						
4	Income/(Loss) From Operations	(\$5,192,985)	(\$4,377,234)	(\$7,641,066)						
5	Total Operating Revenue	\$276,384,402	\$275,567,445	\$286,226,778						
6	Total Non-Operating Revenue	\$1,888,849	\$477,042	(\$2,134,031)						
7	Total Revenue	\$278,273,251	\$276,044,487	\$284,092,747						
8	Excess/(Deficiency) of Revenue Over Expenses	(\$3,304,136)	(\$3,900,192)	(\$9,775,097)						
C.	Parent Corporation Net Assets Summary									
1	Parent Corporation Unrestricted Net Assets	\$69,255,238	\$65,190,041	\$52,391,696						
2	Parent Corporation Total Net Assets	\$117,677,159	\$115,859,015	\$99,000,425						
3	Parent Corporation Change in Total Net Assets	(\$10,548,839)	(\$1,818,144)	(\$16,858,590)						
4	Parent Corporation Change in Total Net Assets %	91.8%	-1.5%	-14.6%						

	GREATER WATERBURY H	EALTH NETWORK						
	TWELVE MONTHS A	CTUAL FILING						
	FISCAL YE	AR 2011						
	REPORT 385 - PARENT CORPORATION CONS	OLIDATED FINANCIAL	DATA ANALYSIS					
(1)	(1) (2) (3) (4)							
. ,		ACTUAL	ACTUAL	(5) ACTUAL				
LINE	DESCRIPTION	<u> </u>	<u> </u>	<u> </u>				
D.	Liquidity Measures Summary							
1	Current Ratio	2.12	1.98	1.57				
2	Total Current Assets	\$58,536,223	\$60,539,447	\$62,601,035				
3	Total Current Liabilities	\$27,555,049	\$30,587,072	\$39,926,401				
4	Days Cash on Hand	27	31	23				
5	Cash and Cash Equivalents	\$19,343,506	\$22,269,814	\$16,661,759				
6	Short Term Investments	819,938	920,291	1,034,841				
7	Total Cash and Short Term Investments	\$20,163,444	\$23,190,105	\$17,696,600				
8	Total Operating Expenses	\$281,577,387	\$279,944,679	\$293,867,844				
9	Depreciation Expense	\$9,919,723	\$9,815,349	\$9,490,443				
10	Operating Expenses less Depreciation Expense	\$271,657,664	\$270,129,330	\$284,377,401				
11	Days Revenue in Patient Accounts Receivable	47	45	53				
12	Net Patient Accounts Receivable	\$ 34,132,488	\$ 32,604,849	\$ 36,954,627				
13	Due From Third Party Payers	\$0	\$0	\$2,634,481				
14	Due To Third Party Payers	\$1,195,037	\$414,546	\$0				
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 32,937,451	\$ 32,190,303	\$ 39,589,108				
16	Total Net Patient Revenue	\$258,121,071	\$259,811,962	\$270,732,398				
17	Average Payment Period	37	41	51				
18	Total Current Liabilities	\$27,555,049	\$30,587,072	\$39,926,401				
19	Total Operating Expenses	\$281,577,387	\$279,944,679	\$293,867,844				
20	Depreciation Expense	\$9,919,723	\$9,815,349	\$9,490,443				
21	Total Operating Expenses less Depreciation Expense	\$271,657,664	\$270,129,330	\$284,377,401				

	GREATER WATERBURY HEA	LTH NETWORK							
	TWELVE MONTHS ACTU	JAL FILING							
	FISCAL YEAR	2011							
	REPORT 385 - PARENT CORPORATION CONSOLI	DATED FINANCIAL D	ATA ANALYSIS						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	<u> </u>	<u> </u>	<u>FY 2011</u>					
E.	Solvency Measures Summary								
1	Equity Financing Ratio	64.2	62.8	52.1					
2	Total Net Assets	\$117,677,159	\$115,859,015	\$99,000,425					
3	Total Assets	\$183,309,567	\$184,442,310	\$190,061,754					
4	Cash Flow to Total Debt Ratio	13.6	11.6	(0.4)					
5	Excess/(Deficiency) of Revenues Over Expenses	(\$3,304,136)	(\$3,900,192)	(\$9,775,097)					
6	Depreciation Expense	\$9,919,723	\$9,815,349	\$9,490,443					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$6,615,587	\$5,915,157	(\$284,654)					
8	Total Current Liabilities	\$27,555,049	\$30,587,072	\$39,926,401					
9	Total Long Term Debt	\$21,181,850	\$20,398,749	\$28,146,134					
10	Total Current Liabilities and Total Long Term Debt	\$48,736,899	\$50,985,821	\$68,072,535					
11	Long Term Debt to Capitalization Ratio	15.3	15.0	22.1					
12	Total Long Term Debt	\$21,181,850	\$20,398,749	\$28,146,134					
13	Total Net Assets	\$117,677,159	\$115,859,015	\$99,000,425					
14	Total Long Term Debt and Total Net Assets	\$138,859,009	\$136,257,764	\$127,146,559					

\square			TERBURY HOSPIT	/				
		TWELVE	MONTHS ACTUA					
			FISCAL YEAR 20					
	REPORT 400) - HOSPITAL IN	PATIENT BED UTI	LIZATION BY DE	PARTMENT			
<i>.</i>			•()		(1)	(=)	(0)	(_)
(1)	(2)	(3)	3(a) DISCHARGES	3(b)	(4)	(5)	(6) OCCUPANCY	(7) OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
	DESCRIPTION	DAYS	# PATIENT	ADIVIISSIONS	BEDS (A)	BEDS	BEDS (A)	BEDS
	DESCRIPTION	DATS	<u>#FAIILNI</u>		BLD3 (A)	BLD3	BLD3 (A)	BLDS
1 /	Adult Medical/Surgical	39,219	9,065	8,149	118	163	91.1%	65.9%
- ť		00,210	0,000	0,140	110	100	01.170	00.070
2	ICU/CCU (Excludes Neonatal ICU)	4,681	253	0	16	20	80.2%	64.1%
		,						
	Psychiatric: Ages 0 to 17	1,133	142	102	5	5	62.1%	62.1%
4	Psychiatric: Ages 18+	5,690	717	720	25	25	62.4%	62.4%
	TOTAL PSYCHIATRIC	6,823	859	822	30	30	62.3%	62.3%
<u>5</u> I	Rehabilitation	0	0	0	0	0	0.0%	0.0%
	Nators to c	2,020	4 4 5 0	4 4 5 4	0	07	00.50/	20.00/
6 1	Maternity	3,039	1,150	1,151	9	27	92.5%	30.8%
7 1	Newborn	2,137	958	852	9	36	65.1%	16.3%
<u> </u>		2,107	550	002	5	50	00.170	10.070
8	Neonatal ICU	1,379	167	0	0	0	0.0%	0.0%
		.,					,.	
9 I	Pediatric	0	0	0	0	0	0.0%	0.0%
10 (Other	1,502	559	369	8	8	51.4%	51.4%
	TOTAL EXCLUDING NEWBORN	56,643	11,800	10,491	181	248	85.7%	62.6%
		50 700	40.750	11.010	100		0.4.00/	50 70/
	TOTAL INPATIENT BED UTILIZATION	58,780	12,758	11,343	190	284	84.8%	56.7%
	TOTAL INPATIENT REPORTED YEAR	58,780	12,758	11,343	190	284	84.8%	56.7%
	TOTAL INPATIENT PRIOR YEAR	59,271	12,750	11,343	190	204	84.6%	55.6%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-491	12,758	11,343	-2	-8	0.2%	
+'	DITERENCE #. REFORTED VO. TRIOR TEAR	-431	12,730	11,343	-2	-0	0.2 /0	1.1 /0
	DIFFERENCE %: REPORTED VS. PRIOR YEAF	-1%	0%	0%	-1%	-3%	0%	2%
	Total Licensed Beds and Bassinets	393						
(A)		- h l - h - d - f	h dement i i					
<u>A) Ih</u>	is number may not exceed the number of availa	able beds for eac	on department or in	n total.				

	WAT	ERBURY HOSPITAL			
	TWELVE	MONTHS ACTUAL FI	LING		
		FISCAL YEAR 2011			
	REPORT 450 - HOSPITAL INPATIENT AND	OUTPATIENT OTHE	R SERVICES UTILI	ZATION AND FTE	6
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
	CT Scans (A)				
1	Inpatient Scans	8,278	7,725	-553	-7
~	Outpatient Scans (Excluding Emergency Department	0.504	0.007		
2	Scans) Emergency Department Scans	3,581 9,405	3,287 8,115	-294	-8
4	Other Non-Hospital Providers' Scans (A)	9,405	0,115	-1,290 0	-14'
4	Total CT Scans	21,264	19,127	-2,137	-10
		21,204	19,127	-2,137	-10
В.	MRI Scans (A)				
	Inpatient Scans	0	0	0	0'
	Outpatient Scans (Excluding Emergency Department		0	0	0
2	Scans)	0	0	0	0
3	Emergency Department Scans	0	0	0	0
4	Other Non-Hospital Providers' Scans (A)	2,361	2,315	-46	-2
	Total MRI Scans	2,361	2,315	-46	-2
	PET Scans (A)				
1	Inpatient Scans	0	0	0	0
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	0	0	0	0
3	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	0	0	0	0
4	Total PET Scans	0	0	0	0
		0	0	0	0
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0
	Outpatient Scans (Excluding Emergency Department		, i i i i i i i i i i i i i i i i i i i	Ū	
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 these			scal year	
	volume of each of these types of scans from the	primary provider of the	ne scans.		
	Linear Assolateter Dressdures				
<u>Е.</u> 1	Linear Accelerator Procedures	0	0	0	0
	Outpatient Procedures	0	0	0	0
2	Total Linear Accelerator Procedures	0	0	0	0
		0	•	v	
F.	Cardiac Catheterization Procedures				
	Inpatient Procedures	608	591	-17	-3
	Outpatient Procedures	318	257	-61	-19
	Total Cardiac Catheterization Procedures	926	848	-78	-8
G.	Cardiac Angioplasty Procedures				
	Primary Procedures	122	166	44	36
2	Elective Procedures	240	213	-27	-11
	Total Cardiac Angioplasty Procedures	362	379	17	5
	Electrophysiology Studies		-		-
	Inpatient Studies	0	0	0	0
2	Outpatient Studies	0	0	0	
	Total Electrophysiology Studies	0	0	0	
	Surgical Procedures				
,	auruical Floceuures		0.070	000	40
I. 1		2 2 2 2			
1	Inpatient Surgical Procedures	3,272	2,873	-399	
1		3,272 4,504 7,776	2,873 4,644 7,517	-399 140 -259	-12 3 - 3

	W/A	TERBURY HOSPITAL									
		MONTHS ACTUAL FI	ING								
		FISCAL YEAR 2011									
	REPORT 450 - HOSPITAL INPATIENT AN		R SERVICES UTIL	ZATION AND FTES	3						
(1)	(2)	(3)	(4)	(5)	(6)						
		ACTUAL	ACTUAL	AMOUNT	%						
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE						
J.	Endoscopy Procedures										
	Inpatient Endoscopy Procedures	869	431	-438	-50%						
2	Outpatient Endoscopy Procedures	2,455	1,070	-1,385	-56%						
	Total Endoscopy Procedures	3,324	1,501	-1,823	-55%						
	Hospital Emergency Room Visits										
	Emergency Room Visits: Treated and Admitted	8,340	8,462	122	1%						
2	Emergency Room Visits: Treated and Discharged	49,393	48,560	-833	-2%						
	Total Emergency Room Visits	57,733	57,022	-711	-1%						
	Hospital Clinic Visits										
	Substance Abuse Treatment Clinic Visits	0	0	0	0%						
	Dental Clinic Visits	0	0	0	0%						
	Psychiatric Clinic Visits	27,272	27,297	25	0%						
	Medical Clinic Visits	0	0	0	0%						
5	Specialty Clinic Visits	0	0	0	0%						
	Total Hospital Clinic Visits	27,272	27,297	25	0%						
	Other Hospital Outpatient Visits				001						
	Rehabilitation (PT/OT/ST)	0	0	0	0%						
	Cardiology	3,635	3,402	-233	-6%						
	Chemotherapy	0	0	0	0%						
	Gastroenterology	2,015	3,038	1,023	51%						
5	Other Outpatient Visits Total Other Hospital Outpatient Visits	109,945 115,595	<u>117,702</u> 124,142	7,757 8.547	<u>7%</u>						
		115,595	124,142	0,547	1 70						
	Leonitel Full Time Faulusland Faulus -										
	Hospital Full Time Equivalent Employees	264 5	250.0	0.0	4.07						
	Total Nursing FTEs	361.5	359.2	-2.3	-1%						
	Total Physician FTEs Total Non-Nursing and Non-Physician FTEs	86.7 1.064.9	79.6 1,073.9	-7.1 9.0	-8% 1%						
3	Total Hospital Full Time Equivalent Employees	1,064.9	1,073.9	9.0 - 0.4	1% 0%						
	Total Hospital Full Time Equivalent Employees	1,010.1	1,312.7	-0.4	0%						

	WATERBUR								
	TWELVE MONTH		NG						
	FISCAL	YEAR 2011	_						
REP	ORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOS	SCOPY AND EM	IERGENCY RO	OM SERVICES	BY LOCATION				
(1)	(2)	(3)	(4)	(5)	(6)				
	DECODIDITION	ACTUAL	ACTUAL	AMOUNT					
LINE	DESCRIPTION	<u> </u>	<u>FY 2011</u>	DIFFERENCE	DIFFERENCE				
Α.	Outpatient Surgical Procedures								
1	Waterbury Hospital	4,504	4,644	140	3%				
	Total Outpatient Surgical Procedures(A)	4,504	4,644	140	3%				
В.	Outpatient Endoscopy Procedures								
1	Waterbury Hospital	2,455	1,070	,					
	Total Outpatient Endoscopy Procedures(B)	2,455	1,070	-1,385	-56%				
C.	Outpatient Hospital Emergency Room Visits								
1	Waterbury Hospital	49,393	48,560	-833	-2%				
	Total Outpatient Hospital Emergency Room Visits	49,393	48,560	-833	-2%				
	(A) Must agree with Total Outpatient Surgical Procedu	res on Report 4	50						
	(A) must agree with rotal outpatient ourgical roceau								
	(B) Must agree with Total Outpatient Endoscopy Proce	edures on Repo	ort 450.						
	(C) Must agree with Emergency Room Visits Treated a	nd Discharged	on Report 450	•					

	WATERBURY HOSPITAL								
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011								
	REPORT FORM 500 - CALCUL	ATION OF DSH LIPPER		ит					
	AND BASELINE UNDERPAYN	IENT DATA: COMPARAT	IVE ANALYS	15					
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE				
Ι.	DATA BY MAJOR PAYER CATEGORY								
Α.	MEDICARE								
	MEDICARE INPATIENT								
	INPATIENT ACCRUED CHARGES	\$289,293,480	\$288,595,799	(\$697.681)	0%				
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$80,921,944	\$77,137.070	(\$3,784,874)	-5%				
	INPATIENT PAYMENTS / INPATIENT CHARGES	27.97%	26.73%	-1.24%	-49				
4	DISCHARGES	6.077	5.972	(105)	-29				
5	CASE MIX INDEX (CMI)	1.66675	1.56100	(0.10575)	-6%				
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	10,128.83975	9,322.29200	(806.54775)	-8%				
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,989.26	\$8,274.47	\$285.21	4%				
	PATIENT DAYS	32,894	32,799	(95)	0%				
	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,460.08	\$2,351.81	(\$108.27)	-49				
10	AVERAGE LENGTH OF STAY	5.4	5.5	0.1	19				
	MEDICARE OUTPATIENT								
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$99,103,375	\$102.570.204	\$3,466,829	3%				
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$18,596,203	\$19,960,112	\$1,363,909	79				
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.76%	19.46%	0.70%	49				
14	OUTPATIENT CHARGES / INPATIENT CHARGES	34.26%	35.54%	1.28%	49				
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,081.80015	2,122.51620	40.71605	29				
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,932.75	\$9,403.99	\$471.23	5%				
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)								
	TOTAL ACCRUED CHARGES	\$388,396,855	\$391,166,003	\$2,769,148	19				
18	TOTAL ACCRUED PAYMENTS	\$99,518,147	\$97,097,182	(\$2,420,965)	-2%				
19	TOTAL ALLOWANCES	\$288,878,708	\$294,068,821	\$5,190,113	2%				

	WATERBURY H	OSPITAL							
	TWELVE MONTHS A	CTUAL FILING							
	FISCAL YEAR 2011								
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT								
	AND BASELINE UNDERPAYMENT DA	TA: COMPARAT	IVE ANALYS	IS					
			_	-					
					0/				
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE				
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)								
	NON-GOVERNMENT INPATIENT								
	INPATIENT ACCRUED CHARGES	\$148,946,176	\$139,157,214	(\$9,788,962)	-7%				
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$50,858,087	\$49,609,728	(\$1,248,359)	-2%				
-	INPATIENT PAYMENTS / INPATIENT CHARGES	34.15%	35.65%	1.50%	4%				
		3,968	3,719	(249)	-6%				
-		1.31516	1.27350	(0.04166)	-3%				
-	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,218.55488	4,736.14650	(482.40838)	-9%				
	INPATIENT ACCRUED PAYMENT / CMAD	\$9,745.63	\$10,474.70	\$729.08	7%				
	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,756.37)	(\$2,200.23)	(\$443.86)	25%				
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT PATIENT DAYS	(\$9,165,690) 14,259	(\$10,420,603)	(\$1,254,913) (1.062)	14% -7%				
	INPATIENT DAYS	\$3,566.74	13,197 \$3,759.17	(1,062) \$192.43	-7% 5%				
12	AVERAGE LENGTH OF STAY	\$3,506.74	\$3,759.17	\$192.43	-1%				
12		3.0	3.5	(0.0)	-170				
	NON-GOVERNMENT OUTPATIENT								
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$131,790,935	\$135,460,672	\$3,669,737	3%				
-	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$38,274,902	\$39,474,108	\$1,199,206	3%				
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.04%	29.14%	0.10%	0%				
16	OUTPATIENT CHARGES / INPATIENT CHARGES	88.48%	97.34%	8.86%	10%				
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,510.97587	3,620.20929	109.23342	3%				
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,901.50	\$10,903.82	\$2.32	0%				
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,968.75)	(\$1,499.83)	\$468.91	-24%				
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,912,228)	(\$5,429,712)	\$1,482,516	-21%				
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)								
	TOTAL ACCRUED CHARGES	\$280,737,111	\$274,617,886	(\$6,119,225)	-2%				
22	TOTAL ACCRUED PAYMENTS	\$89,132,989	\$89,083,836	(\$49,153)	0%				
23	TOTAL ALLOWANCES	\$191,604,122	\$185,534,050	(\$6,070,072)	-3%				
		(0.10.077.0.10)	(\$15,050,015)	A007.000					
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$16,077,918)	(\$15,850,315)	\$227,603	-1%				
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA								
25		¢264,296,040	\$250 082 420	(\$4,402,040)	00/				
	ACCRUED CHARGES ASSOCIATED WITH NGCA ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$264,386,049 \$89,678,587	\$259,982,139 \$103,351,380	(\$4,403,910) \$13.672.793	-2% 15%				
20	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$03,070,587	\$103,301,380	\$13,072,793	15%				
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$174,707,462	\$156,630,759	(\$18,076,703)	-10%				
27	TOTAL ACTUAL DISCOUNT PERCENTAGE	\$174,707,482	60.25%	-5.83%	-10%				

	WATER	BURY HOSPITAL								
	TWELVE MON	THS ACTUAL FILING								
	FISCAL YEAR 2011									
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT									
	AND BASELINE UNDERPAYM	ENT DATA: COMPARAT	IVE ANALYS	IS						
		ACTUAL	ACTUAL	AMOUNT	%					
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE					
C.	UNINSURED									
	UNINSURED INPATIENT									
1	INPATIENT ACCRUED CHARGES	\$7,496,163	\$6,170,836	(\$1,325,327)	-189					
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$105,638	\$539,874	\$434,236	4119					
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.41%	8.75%	7.34%	5219					
4	DISCHARGES	216	158	(58)	-27%					
5	CASE MIX INDEX (CMI)	1.16090	1.16420	0.00330	09					
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	250.75440	183.94360	(66.81080)	-27%					
7	INPATIENT ACCRUED PAYMENT / CMAD	\$421.28	\$2,935.00	\$2,513.72	597%					
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$9,324.35	\$7,539.71	(\$1,784.64)	-19%					
9	MEDICARE - UNINSURED IP PMT / CMAD	\$7,567.98	\$5,339.48	(\$2,228.50)	-29%					
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,897,704	\$982,163	(\$915,542)	-48%					
11	PATIENT DAYS	824	681	(143)	-179					
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$128.20	\$792.77	\$664.57	518%					
13	AVERAGE LENGTH OF STAY	3.8	4.3	0.5	139					
	UNINSURED OUTPATIENT									
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$8,854,899	\$8,464,911	(\$389,988)	-49					
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$608,463	\$1,011,201	\$402,738	66%					
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	6.87%	11.95%	5.07%	749					
17	OUTPATIENT CHARGES / INPATIENT CHARGES	118.13%	137.18%	19.05%	169					
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	255.15163	216.73821	(38.41342)	-15%					
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,384.71	\$4,665.54	\$2,280.83	96%					
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$8,516.79	\$6,238.28	(\$2,278.51)	-279					
21	MEDICARE - UNINSURED OP PMT / OPED	\$6,548.04	\$4,738.44	(\$1,809.60)	-289					
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,670,743	\$1,027,002	(\$643,741)	-399					
23	UNINSURED TOTALS (INPATIENT AND OUTPATIENT) TOTAL ACCRUED CHARGES	\$16,351,062	\$14.635.747	(\$4.745.045)	-109					
23	TOTAL ACCRUED CHARGES	\$16,351,062 \$714,101	\$14,635,747	(\$1,715,315) \$836,974	-109					
24	TOTAL ACCROED PATMENTS	\$714,101	\$1,551,075	(\$2,552,289)	-169					
20		\$15,636,961	φ13,004,07Z	(\$2,332,289)	-10%					
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,568,447	\$2,009,165	(\$1,559,283)	-449					
20		φ0,000,447	ψ2,000,100	(\$1,000,200)	-++/					

	WATER	BURY HOSPITAL							
	TWELVE MO	NTHS ACTUAL FILING							
	FISCAL YEAR 2011 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT								
	AND BASELINE UNDERPAY	MENT DATA: COMPARAT	IVE ANALYS	IS					
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE				
D.	STATE OF CONNECTICUT MEDICAID								
	MEDICAID INPATIENT								
1	INPATIENT ACCRUED CHARGES	\$57,681,344	\$85,331,434	\$27,650,090	48%				
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$10,693,504	\$16,631,501	\$5,937,997	56%				
3	INPATIENT PAYMENTS / INPATIENT CHARGES	18.54%	19.49%	0.95%	5%				
4	DISCHARGES	2,411	3,059	648	279				
5	CASE MIX INDEX (CMI)	0.99880	0.97810	(0.02070)	-2%				
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,408.10680	2,992.00790	583.90110	249				
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4.440.63	\$5.558.64	\$1,118.02	25%				
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,305.00	\$4,916.06	(\$388.94)	-7%				
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,548.63	\$2,715.83	(\$832.80)	-23%				
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,545,490	\$8,125,793	(\$419,697)	-5%				
11	PATIENT DAYS	9,412	12,747	3,335	35%				
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,136.16	\$1,304.74	\$168.58	15%				
13	AVERAGE LENGTH OF STAY	3.9	4.2	0.3	79				
	MEDICAID OUTPATIENT								
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$51,001,212	\$69,279,831	\$18,278,619	36%				
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$8,793,978	\$12,155,517	\$3,361,539	38%				
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.24%	17.55%	0.30%	29				
	OUTPATIENT CHARGES / INPATIENT CHARGES	88.42%	81.19%	-7.23%	-89				
-	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,131.77977	2,483.57485	351.79508	179				
	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,125.18	\$4,894.36	\$769.18	199				
	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,776.32	\$6,009.46	(\$766.86)	-119				
	MEDICARE - MEDICAID OP PMT / OPED	\$4,807.57	\$4,509.62	(\$297.95)	-69				
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,248,681	\$11,199,985	\$951,305	99				
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)	* 100.000 550	ALE 4 044 005	¢45,000,700	100				
23	TOTAL ACCRUED CHARGES TOTAL ACCRUED PAYMENTS	\$108,682,556	\$154,611,265	\$45,928,709	429				
24	TOTAL ACCRUED PAYMENTS	\$19,487,482	\$28,787,018	\$9,299,536	489				
25		\$89,195,074	\$125,824,247	\$36,629,173	419				
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$18,794,170	\$19,325,778	\$531.608	3%				
20	I UTAL UFFER LIVITI (UVER) / UNDERPATIVIENT	\$18,794,170	\$19,323,778	800,1506	3%				

	WATERBUR	Y HOSPITAL				
	TWELVE MONTH	S ACTUAL FILING				
FISCAL YEAR 2011						
	REPORT FORM 500 - CALCULATIO					
	AND BASELINE UNDERPAYMENT	DATA: COMPARAT	IVE ANALYS	IS		
		ACTUAL	ACTUAL	AMOUNT	%	
	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE	
			112011	DITTERENCE	DITERENCE	
Е.	OTHER MEDICAL ASSISTANCE (O.M.A.)					
4	OTHER MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES	¢04.047.770	* ^	(004 047 770)	4000	
1	INPATIENT ACCRUED CHARGES INPATIENT ACCRUED PAYMENTS (IP PMT)	\$21,017,773 \$2,291,206	\$0 \$0	(\$21,017,773) (\$2,291,206)	-100%	
2	INPATIENT ACCROED PAYMENTS (IP PMT)	\$2,291,206	0.00%	(\$2,291,206) -10.90%	-100%	
4	DISCHARGES	580	0.00 %	(580)	-1007	
5	CASE MIX INDEX (CMI)	1.17310	0.00000	(1.17310)	-1007	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	680.39800	0.00000	(680.39800)	-100%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3.367.45	\$0.00	(\$3,367.45)	-1009	
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$6.378.18	\$10,474.70	\$4.096.53	649	
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,621.81	\$8,274.47	\$3,652.66	79%	
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,144,671	\$0	(\$3,144,671)	-100%	
11	PATIENT DAYS	2,664	0	(2,664)	-100%	
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$860.06	\$0.00	(\$860.06)	-100%	
13	AVERAGE LENGTH OF STAY	4.6	-	(4.6)	-100%	
	OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$16,059,756	\$0	(\$16,059,756)	-100%	
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,314,373	\$0	(\$1,314,373)	-100%	
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	8.18%	0.00%	-8.18%	-100%	
17	OUTPATIENT CHARGES / INPATIENT CHARGES	76.41%	0.00%	-76.41%	-100%	
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	443.18009	0.00000	(443.18009)	-100%	
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,965.78	\$0.00	(\$2,965.78)	-100%	
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$7,935.72	\$10,903.82	\$2,968.10	379	
21	MEDICARE - O.M.A. OP PMT / CMAD	\$5,966.98	\$9,403.99	\$3,437.01	58%	
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,644,445	\$0	(\$2,644,445)	-100%	
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$37,077,529	\$0	(\$37,077,529)	-100%	
24	TOTAL ACCRUED PAYMENTS	\$3,605,579	\$0	(\$3,605,579)	-100%	
25	TOTAL ALLOWANCES	\$33,471,950	\$0	(\$33,471,950)	-100%	
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$5,789,116	\$0	(\$5,789,116)	-100%	

	WATERBURY H	OSPITAL			
	TWELVE MONTHS AC	TUAL FILING			
	FISCAL YE	AR 2011			
	REPORT FORM 500 - CALCULATION O			міт	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
_					
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL A	SSISTANCE)			
	TOTAL MEDICAL ASSISTANCE INPATIENT				
	INPATIENT ACCRUED CHARGES	\$78,699,117	\$85,331,434	\$6,632,317	8%
-	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,984,710	\$16,631,501	\$3,646,791	28%
v	INPATIENT PAYMENTS / INPATIENT CHARGES	16.50%	19.49%	2.99%	18%
	DISCHARGES	2,991	3,059	68	2%
	CASE MIX INDEX (CMI)	1.03260	0.97810	(0.05450)	-5%
	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,088.50480	2,992.00790	(96.49690)	-3%
	INPATIENT ACCRUED PAYMENT / CMAD	\$4,204.21	\$5,558.64	\$1,354.44	32%
	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,541.42	\$4,916.06	(\$625.36)	-11%
	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,785.06	\$2,715.83	(\$1,069.22)	-28%
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,690,161	\$8,125,793	(\$3,564,368)	-30%
	PATIENT DAYS	12,076	12,747	671	6%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,075.25	\$1,304.74	\$229.49	21%
13	AVERAGE LENGTH OF STAY	4.0	4.2	0.1	3%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$67,060,968	\$69,279,831	\$2,218,863	3%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$10,108,351	\$12,155,517	\$2,047,166	20%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.07%	17.55%	2.47%	16%
	OUTPATIENT CHARGES / INPATIENT CHARGES	85.21%	81.19%	-4.02%	-5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,574.95986	2.483.57485	(91,38501)	-4%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,925,63	\$4,894,36	\$968.73	25%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,975.87	\$6,009,46	(\$966.41)	-14%
	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,007.12	\$4,509.62	(\$497.49)	-10%
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,893,125	\$11,199,985	(\$1,693,140)	-13%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
	TOTAL ACCRUED CHARGES	\$145,760,085	\$154,611,265	\$8,851,180	6%
	TOTAL ACCRUED PAYMENTS	\$23,093,061	\$28,787,018	\$5,693,957	25%
	TOTAL ALLOWANCES	\$122,667,024	\$125.824.247	\$3,157,223	3%
20		ψ122,001,024	ψ120,02-7,2 4 1	ψ0,107,220	570

	WATERBURY F	IOSPITAL			
	TWELVE MONTHS A	CTUAL FILING			
	FISCAL Y	EAR 2011			
	REPORT FORM 500 - CALCULATION (
	AND BASELINE UNDERPAYMENT DA	ATA: COMPARAT	IVE ANALYS	IS	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
G.	CHAMPUS / TRICARE				
0.	ONAM OUT TRIDARE				
	CHAMPUS / TRICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$433,901	\$356,969	(\$76,932)	-18%
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$100,569	\$81,775	(\$18,794)	-19%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.18%	22.91%	-0.27%	-1%
	DISCHARGES	10	8	(2)	-20%
	CASE MIX INDEX (CMI)	1.71500	1.38740	(0.32760)	-19%
-	CASE MIX ADJUSTED DISCHARGES (CMAD)	17.15000	11.09920	(6.05080)	-35%
	INPATIENT ACCRUED PAYMENT / CMAD	\$5,864.08	\$7,367.65	\$1,503.57	26%
Ÿ	PATIENT DAYS	42	37	(5)	-12%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,394.50	\$2,210.14	(\$184.36)	-8%
10	AVERAGE LENGTH OF STAY	4.2	4.6	0.4	10%
	CHAMPUS / TRICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$439.975	\$477.225	\$37.250	8%
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$97,339	\$100.224	\$2,885	3%
12		φ01,000	\$100,224	ψ2,000	070
	CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)				
13	TOTAL ACCRUED CHARGES	\$873,876	\$834,194	(\$39,682)	-5%
14	TOTAL ACCRUED PAYMENTS	\$197,908	\$181,999	(\$15,909)	-8%
15	TOTAL ALLOWANCES	\$675,968	\$652,195	(\$23,773)	-4%
Н.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$10,576,444	\$12,417,187	\$1,840,743	17%
2	TOTAL OPERATING EXPENSES	\$237,519,576	\$235,702,997	(\$1,816,579)	-1%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$1,673,113	\$0	(\$1,673,113)	-100%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$1,910,845	\$2.456.277	\$545.432	29%
	BAD DEBTS (CHARGES)	\$1,910,845	\$10,912,386	(\$4,073,429)	-27%
6	UNCOMPENSATED CARE (CHARGES)	\$16,896,660	\$13,368,663	(\$3,527,997)	-21%
7	COST OF UNCOMPENSATED CARE	\$4,424,523	\$3,755,279	(\$669,243)	-15%
		, .,,		(++++,= 10)	10,0
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)				
8	TOTAL ACCRUED CHARGES	\$145,760,085	\$154,611,265	\$8,851,180	6%
9	TOTAL ACCRUED PAYMENTS	\$23,093,061	\$28,787,018	\$5,693,957	25%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$38,168,419	\$43,430,556	\$5,262,137	14%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$15,075,358	\$14,643,538	(\$431,820)	-3%

	WATER	BURY HOSPITAL				
	TWELVE MON	NTHS ACTUAL FILING				
FISCAL YEAR 2011						
	REPORT FORM 500 - CALCUL	ATION OF DSH LIPPER P		МІТ		
	AND BASELINE UNDERPAYM	ENT DATA: COMPARAT	IVE ANALYS	15		
		ACTUAL	ACTUAL	AMOUNT	%	
INE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE	
II.	AGGREGATE DATA					
Α.	TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$517,372,674	\$513,441,416	(\$3,931,258)	-	
	TOTAL INPATIENT PAYMENTS	\$144,865,310	\$143,460,074	(\$1,405,236)	-	
	TOTAL INPATIENT PAYMENTS / CHARGES	28.00%	27.94%	-0.06%		
	TOTAL DISCHARGES	13,046	12,758	(288)	-	
-	TOTAL CASE MIX INDEX	1.41446	1.33732	(0.07714)		
6	TOTAL CASE MIX ADJUSTED DISCHARGES	18,453.04943	17,061.54560	(1,391.50383)		
		\$298,395,253	\$307,787,932	\$9,392,679		
	OUTPATIENT CHARGES / INPATIENT CHARGES TOTAL OUTPATIENT PAYMENTS	57.68% \$67,076,795	59.95% \$71,689,961	2.27% \$4,613,166		
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.48%	23.29%	\$4,613,166 0.81%		
-	TOTAL CHARGES	\$815,767,927	\$821,229,348	\$5,461,421		
• •	TOTAL PAYMENTS	\$211,942,105	\$215,150,035	\$3,207,930		
	TOTAL PAYMENTS / TOTAL CHARGES	25.98%	26.20%	0.22%		
	PATIENT DAYS	59,271	58,780	(491)		
в.	TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$368,426,498	\$374,284,202	\$5,857,704		
2	INPATIENT PAYMENTS	\$94,007,223	\$93,850,346	(\$156,877)		
3	GOVT. INPATIENT PAYMENTS / CHARGES	25.52%	25.07%	-0.44%		
4	DISCHARGES	9,078	9,039	(39)		
5	CASE MIX INDEX	1.45786	1.36358	(0.09428)		
-	CASE MIX ADJUSTED DISCHARGES	13,234.49455	12,325.39910	(909.09545)		
7	OUTPATIENT CHARGES	\$166,604,318	\$172,327,260	\$5,722,942		
8	OUTPATIENT CHARGES / INPATIENT CHARGES	45.22%	46.04%	0.82%		
9	OUTPATIENT PAYMENTS	\$28,801,893	\$32,215,853	\$3,413,960		
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES TOTAL CHARGES	17.29%	18.69%	1.41%		
	TOTAL CHARGES	\$535,030,816	\$546,611,462	\$11,580,646		
	TOTAL PAYMENTS / CHARGES	\$122,809,116 22.95%	\$126,066,199 23.06%	\$3,257,083 0.11%		
	PATIENT DAYS	45,012	45,583	571		
	TOTAL GOVERNMENT DEDUCTIONS	\$412,221,700	\$420,545,263	\$8,323,563		
C.	AVERAGE LENGTH OF STAY					
1	MEDICARE	5.4	5.5	0.1		
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.5	(0.0)		
3	UNINSURED	3.8	4.3	0.5		
4	MEDICAID	3.9	4.2	0.3		
-	OTHER MEDICAL ASSISTANCE	4.6	-	(4.6)	-1	
•	CHAMPUS / TRICARE	4.2	4.6	0.4		
7	TOTAL AVERAGE LENGTH OF STAY	4.5	4.6	0.1		

	WATERBURY HO					
	TWELVE MONTHS AC	TUAL FILING				
	FISCAL YE	AR 2011				
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT						
	AND BASELINE UNDERPAYMENT DA					
		ACTUAL	ACTUAL	AMOUNT	0/	
	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT		
LINE	DESCRIPTION	<u> </u>	<u>FT 2011</u>	DIFFERENCE	DIFFERENCE	
Ш.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
	DATA 052D IN DASELINE ONDER ATMENT CALCOLATION					
1	TOTAL CHARGES	\$815,767,927	\$821,229,348	\$5,461,421	1	
2	TOTAL GOVERNMENT DEDUCTIONS	\$412,221,700	\$420,545,263	\$8,323,563	2	
3	UNCOMPENSATED CARE	\$16,896,660	\$13,368,663	(\$3,527,997)		
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$174,707,462	\$156,630,759	(\$18,076,703)	-10	
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0	
6	TOTAL ADJUSTMENTS	\$603,825,822	\$590,544,685	(\$13,281,137)	-2	
7	TOTAL ACCRUED PAYMENTS	\$211,942,105	\$230,684,663	\$18,742,558	ç	
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$1,673,113	\$0	(\$1,673,113)	-100	
	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$213,615,218	\$230,684,663	\$17,069,445	8	
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2618578286	0.2809016307	0.0190438021	7	
	COST OF UNCOMPENSATED CARE	\$4,424,523	\$3,755,279	(\$669,243)	-15	
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$15,075,358	\$14,643,538	(\$431,820)	-3	
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	C	
14	TOTAL COST OF UNCOMPENSATED CARE AND					
	MEDICAL ASSISTANCE UNDERPAYMENT	\$19,499,881	\$18,398,818	(\$1,101,063)	-6	
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY	2				
1	MEDICAID	¢40.040.004	\$11,199,985	¢054.205	g	
	OTHER MEDICAL ASSISTANCE	\$10,248,681 \$5,789,116	\$11,199,985	\$951,305 (\$5,789,116)	-100	
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,568,447	\$2,009,165	(\$1,559,283)	-100	
-	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$19.606.244	\$13,209,150	(\$1,339,283)	-4-	
		\$10,000,211	\$10,200,100	(\$0,001,001)		
۷.	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	\$15,396,099	\$12,609,466	(\$2,786,633)	-18.10%	
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$229,011,318	\$227,759,503	(\$1,251,815)	-0.55%	
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%	
-	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$815,767,934	\$821,229,348	\$5,461,414	0.67%	
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$1,170,621	\$905,329	(\$265,292)	-22.66%	
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$18,067,281	\$14,273,991	(\$3,793,290)	-21.00%	
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	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILIN	IG		
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PA BASELINE UNDERPAYMENT DA			
	BASELINE UNDERFATMENT DA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$148,946,176 \$289,293,480	\$139,157,214 288,595,799	(\$9,788,962) (\$697,681)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$78,699,117	85,331,434	\$6,632,317
	MEDICAID OTHER MEDICAL ASSISTANCE	\$57,681,344 \$21,017,773	85,331,434 0	\$27,650,090 (\$21,017,773)
-	CHAMPUS / TRICARE	\$433,901	356,969	(\$21,017,773)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$7,496,163 \$368,426,498	6,170,836 \$374,284,202	(\$1,325,327) \$5,857,704
	TOTAL INPATIENT GOVERNMENT CHARGES	\$517,372,674	\$513,441,416	\$5,857,704 (\$3,931,258)
	OUTPATIENT ACCRUED CHARGES			
	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$131,790,935	\$135,460,672	\$3,669,737
2	MEDICARE	\$99,103,375	102,570,204	\$3,466,829
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$67,060,968 \$51,001,212	69,279,831 69,279,831	\$2,218,863 \$18,278,619
	OTHER MEDICAL ASSISTANCE	\$16,059,756	0	(\$16,059,756)
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$439,975 \$8,854,899	477,225 8,464,911	\$37,250 (\$389,988)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$166,604,318	\$172,327,260	\$5,722,942
	TOTAL OUTPATIENT CHARGES	\$298,395,253	\$307,787,932	\$9,392,679
	TOTAL ACCRUED CHARGES			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED) TOTAL MEDICARE	\$280,737,111 \$388,396,855	\$274,617,886 \$391,166,003	(\$6,119,225) \$2,769,148
_	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$145,760,085	\$154,611,265	\$8,851,180
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$108,682,556 \$37,077,529	\$154,611,265 \$0	\$45,928,709 (\$37,077,529)
	TOTAL CHAMPUS / TRICARE	\$873,876	\$834,194	(\$39,682)
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$16,351,062 \$535,030,816	\$14,635,747 \$546,611,462	<u>(\$1,715,315)</u> \$11,580,646
	TOTAL GOVERNMENT CHARGES	\$815,767,927	\$821,229,348	\$5,461,421
	INPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$50,858,087	\$49,609,728	(\$1,248,359)
		\$80,921,944	77,137,070	(\$3,784,874)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$12,984,710 \$10,693,504	16,631,501 16,631,501	\$3,646,791 \$5,937,997
5	OTHER MEDICAL ASSISTANCE	\$2,291,206	0	(\$2,291,206)
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$100,569 \$105,638	81,775 539,874	(\$18,794) \$434,236
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$94,007,223	\$93,850,346	(\$156,877)
	TOTAL INPATIENT PAYMENTS	\$144,865,310	\$143,460,074	(\$1,405,236)
	OUTPATIENT ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$38,274,902 \$18,596,203	\$39,474,108 19,960,112	\$1,199,206 \$1,363,909
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$10,108,351	12,155,517	\$2,047,166
	MEDICAID	\$8,793,978	12,155,517	\$3,361,539
	OTHER MEDICAL ASSISTANCE	\$1,314,373	0	(\$1,314,373)
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$97,339 \$608,463	100,224 1,011,201	\$2,885 \$402,738
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$28,801,893	\$32,215,853	\$3,413,960
	TOTAL OUTPATIENT PAYMENTS	\$67,076,795	\$71,689,961	\$4,613,166
	TOTAL ACCRUED PAYMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$20,422,000	\$89,083,836	(\$40.452)
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$89,132,989 \$99,518,147	\$89,083,836 \$97,097,182	(\$49,153) (\$2,420,965)
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$23,093,061	\$28,787,018	\$5,693,957
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$19,487,482 \$3,605,579	\$28,787,018 \$0	\$9,299,536 (\$3,605,579)
6	TOTAL CHAMPUS / TRICARE	\$197,908	\$181,999	(\$15,909)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT PAYMENTS	\$714,101 \$122,809,116	\$1,551,075 \$126,066,199	\$836,974 \$3,257,083
	TOTAL GOVERNMENT PATMENTS	\$122,809,116 \$211,942,105	\$126,066,199 \$215,150,035	\$3,207,930
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	WATERBURY HOSPIT	AL	I				
	TWELVE MONTHS ACTUAL	. FILING					
	FISCAL YEAR 20	11					
	REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND						
	BASELINE UNDERPAYMEN	IT DATA					
(1)	(2)	(3)	(4)	(5)			
	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE			
	DESCRIPTION	<u><u><u> </u></u></u>	<u>F1 2011</u>	DIFFERENCE			
II.	PAYER MIX						
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.26%	16.94%	-1.31%			
2	MEDICARE	35.46%	35.14%	-0.32%			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.65%	10.39%	0.74%			
	MEDICAID OTHER MEDICAL ASSISTANCE	7.07%	10.39%	3.32%			
	CHAMPUS / TRICARE	2.58%	0.00%	-2.58% -0.01%			
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.92%	0.75%	-0.17%			
	TOTAL INPATIENT GOVERNMENT PAYER MIX	45.16%	45.58%	0.41%			
	TOTAL INPATIENT PAYER MIX	63.42%	62.52%	-0.90%			
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16 16%	16.49%	0.34%			
	MEDICARE	<u>16.16%</u> 12.15%	12.49%	0.34%			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.22%	8.44%	0.22%			
	MEDICAID	6.25%	8.44%	2.18%			
		1.97%	0.00%	-1.97%			
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05%	0.06%	0.00%			
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	20.42%	20.98%	0.56%			
	TOTAL OUTPATIENT PAYER MIX	36.58%	37.48%	0.90%			
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%			
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	24.00%	23.06% 35.85%	-0.94% -2.33%			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.13%	7.73%	1.60%			
	MEDICAID	5.05%	7.73%	2.68%			
	OTHER MEDICAL ASSISTANCE	1.08%	0.00%	-1.08%			
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05%	0.04%	<u>-0.01%</u> 0.20%			
	TOTAL INPATIENT GOVERNMENT PAYER MIX	44.36%	43.62%	-0.73%			
	TOTAL INPATIENT PAYER MIX	68.35%	66.68%	-1.67%			
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	18.06% 8.77%	18.35% 9.28%	0.29%			
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.77%	9.28%	0.50%			
	MEDICAID	4.15%	5.65%	1.50%			
-	OTHER MEDICAL ASSISTANCE	0.62%	0.00%	-0.62%			
-	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05%	0.05%	0.00%			
7	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.29%	0.47% 14.97%	0.18% 1.38%			
	TOTAL OUTPATIENT PAYER MIX	31.65%	33.32%	1.67%			
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%			

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYME	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
	DESCRIPTION	FY 2010	FY 2011	AMOUNT DIFFERENCE
		112010	<u>112011</u>	DITTERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
Α.	DISCHARGES			
		0.000	0.740	(2.42)
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	3,968 6,077	3,719 5.972	(249) (105)
	MEDICALE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,991	3,059	68
	MEDICAID	2,411	3,059	648
5	OTHER MEDICAL ASSISTANCE	580	0	(580)
-		10	8	(2)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	216 9,078	158 9,039	(58) (39)
<u> </u>	TOTAL GOVERNMENT DISCHARGES	13,046	12,758	(288)
		,		(=30)
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14,259	40 407	(1,062)
	MON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32,894	13,197 32,799	(1,062)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12,076	12,747	671
	MEDICAID	9,412	12,747	3,335
	OTHER MEDICAL ASSISTANCE	2,664	0	(2,664)
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	42 824	37 681	(5)
<u> </u>	TOTAL GOVERNMENT PATIENT DAYS	45,012	45,583	571
	TOTAL PATIENT DAYS	59,271	58,780	(491)
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.5	(0.0)
	MEDICARE	5.4	5.5	0.1
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.0	4.2	0.1
	MEDICAID	3.9	4.2	0.3
5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	4.6	0.0 4.6	(4.6)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.8	4.8	0.5
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.0	5.0	0.1
	TOTAL AVERAGE LENGTH OF STAY	4.5	4.6	0.1
<u> </u>				
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.31516	1.27350	(0.04166)
2	MEDICARE	1.66675	1.56100	(0.10575)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.03260	0.97810	(0.05450)
	MEDICAID OTHER MEDICAL ASSISTANCE	0.99880	0.97810	(0.02070)
	CHAMPUS / TRICARE	1.71500	1.38740	(1.17310) (0.32760)
-	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.16090	1.16420	0.00330
	TOTAL GOVERNMENT CASE MIX INDEX	1.45786	1.36358	(0.09428)
	TOTAL CASE MIX INDEX	1.41446	1.33732	(0.07714)
Е.	OTHER REQUIRED DATA			
⊢ <u>-</u> .				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$264,386,049	\$259,982,139	(\$4,403,910)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$89,678,587	\$103,351,380	\$13,672,793
┣──	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$174,707,462	\$156,630,759	(\$18,076,703)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	66.08%	60.25%	-5.83%
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6			Ф <u>О</u>	
	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT	\$1,673,113	\$0	(\$4 670 440)
6 7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$1,673,113		<mark>(\$1,673,113)</mark> \$545,432
6 7 8	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT		\$0 \$2,456,277 \$10,912,386	(\$1,673,113) \$545,432 (\$4,073,429)
6 7 8 9 10	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT) CHARITY CARE BAD DEBTS TOTAL UNCOMPENSATED CARE	\$1,673,113 \$1,910,845	\$2,456,277	\$545,432
6 7 8 9 10 11	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT) CHARITY CARE BAD DEBTS	\$1,673,113 \$1,910,845 \$14,985,815	\$2,456,277 \$10,912,386	\$545,432 (\$4,073,429)

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM			
	BASELINE UNDERPAYMENT DATA			
	BASELINE UNDERFAIIMENT DATA			
(1)	(2)	(3)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
Α.	CASE MIX ADJUSTED DISCHARGES			
Α.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5.218.55488	4,736.14650	(482.40838)
	MEDICARE	10,128.83975	9,322.29200	(806.54775
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,088.50480	2,992.00790	(96.49690)
4	MEDICAID	2,408.10680	2,992.00790	583.90110
	OTHER MEDICAL ASSISTANCE	680.39800	0.00000	(680.39800)
	CHAMPUS / TRICARE	17.15000	11.09920	(6.05080)
7		250.75440	183.94360	(66.81080)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	13,234.49455	12,325.39910	(909.09545
	TOTAL CASE MIX ADJUSTED DISCHARGES	18,453.04943	17,061.54560	(1,391.50383)
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,510.97587	3.620.20929	109.23342
	MEDICARE	2,081.80015	2,122.51620	40.71605
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,574.95986	2,483.57485	-91.38501
	MEDICAID	2,131.77977	2,483.57485	351.79508
	OTHER MEDICAL ASSISTANCE	443.18009	0.00000	-443.18009
6	CHAMPUS / TRICARE	10.13999	10.69505	0.55506
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	255.15163	216.73821	-38.41342
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES			
		4,666.89999	4,616.78609	-50.11390
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	4,666.89999 8,177.87586	4,616.78609 8,236.99538	
C.			,	
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	8,177.87586	8,236.99538	59.11952
1	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,177.87586 \$9,745.63	8,236.99538 \$10,474.70	59.1195 2 \$729.08
1 2	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	8,177.87586 \$9,745.63 \$7,989.26	8,236.99538 \$10,474.70 \$8,274.47	59.11952 \$729.08 \$285.21
1 2 3	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64	59.1195 2 \$729.08 \$285.21 \$1,354.44
1 2 3 4	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	8,177.87586 \$9,745.63 \$7,989.26	8,236.99538 \$10,474.70 \$8,274.47	59.11952 \$729.08 \$285.21
1 2 3 4 5	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64	\$729.08 \$729.08 \$285.21 \$1,354.44 \$1,118.02
1 2 3 4 5 6	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45 \$1,503.57
1 2 3 4 5 6	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65	\$729.08 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45 \$1,503.57 \$2,513.72
1 2 3 4 5 6	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00	\$729.08 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45)
1 2 3 4 5 6 7	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39	\$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45 \$1,503.57 \$2,513.72 \$511.19
1 2 3 4 5 6 7 7 D.	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39	\$729.08 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45) \$1,503.57 \$2,513.72 \$511.19
1 2 3 4 5 6 7 7 D.	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45] \$1,503.57 \$2,513.72 \$511.19 \$557.91 \$2,52.91
1 2 3 4 5 6 7 7 D. 1 2	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48 \$10,901.50	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39 \$8,408.39 \$10,903.82 \$9,403.99 \$4,894.36	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45 \$1,503.57 \$2,513.72 \$511.19 \$557.91 \$251.23 \$2.32 \$4471.23
1 2 3 4 5 6 7 7 D. 1 2 3 4	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48 \$10,901.50 \$8,932.75 \$3,925.63 \$4,125.18	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39 \$10,903.82 \$9,403.99 \$4,894.36 \$4,894.36	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45) \$1,503.57 \$2,513.72 \$511.19 \$557.91 \$2,32 \$471.23 \$968.73 \$769.18
1 2 3 4 5 6 7 7 D. 1 2 3 4 5	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL SSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48 \$10,901.50 \$8,932.75 \$3,925.63 \$4,125.18 \$2,965.78	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39 \$10,903.82 \$9,403.99 \$4,894.36 \$4,894.36 \$4,894.36 \$0.00	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45) \$1,503.57 \$2,513.72 \$511.19 \$557.91 \$557.91 \$2,32 \$471.23 \$968.73 \$769.18 (\$2,965.78]
1 2 3 4 5 6 7 7 D. 1 2 3 4 5 6	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICAL ASSISTANCE (INCLUDING SELF PAY / UNINSURED) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48 \$10,901.50 \$8,932.75 \$3,925.63 \$4,125.18 \$2,965.78 \$9,599.52	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39 \$8,408.39 \$4,843.46 \$4,894.36 \$4,894.36 \$4,894.36 \$0.00 \$9,371.07	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45) \$1,503.57 \$2,513.72 \$551.19 \$557.91 \$2,523 \$471.23 \$968.73 \$769.18 (\$2,965.78] (\$228.45)
1 2 3 4 5 6 7 7 D. 1 2 3 4 5 6	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICAL NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE NON-GOVERNMENT (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48 \$10,901.50 \$8,932.75 \$3,925.63 \$4,125.18 \$2,965.78	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39 \$10,903.82 \$9,403.99 \$4,894.36 \$4,894.36 \$4,894.36 \$0.00	\$9.11952 \$729.08 \$285.21 \$1,354.44 \$1,118.02 (\$3,367.45) \$1,503.57 \$2,513.72 \$511.19 \$557.91 \$2,52 \$471.23 \$968.73 \$769.18 (\$2,965.78] (\$228.45]
1 2 3 4 5 6 7 7 D. 1 2 3 4 5 6	TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICAL ASSISTANCE (INCLUDING SELF PAY / UNINSURED) MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,177.87586 \$9,745.63 \$7,989.26 \$4,204.21 \$4,440.63 \$3,367.45 \$5,864.08 \$421.28 \$7,103.20 \$7,850.48 \$10,901.50 \$8,932.75 \$3,925.63 \$4,125.18 \$2,965.78 \$9,599.52	8,236.99538 \$10,474.70 \$8,274.47 \$5,558.64 \$5,558.64 \$0.00 \$7,367.65 \$2,935.00 \$7,614.39 \$8,408.39 \$10,903.82 \$9,403.99 \$4,894.36 \$4,894.36 \$4,894.36 \$4,894.36	\$285.21 \$1,354.44 \$1,118.02 (\$3,367.45) \$1,503.57 \$2,513.72 \$511.19 \$557.91 \$2,513.72 \$557.91 \$2,513.72 \$557.91 \$2,32 \$471.23 \$968.73 \$769.18 (\$2,965.78)

	WATERBURY HOSPITAL	1 1		
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAY			
	BASELINE UNDERPAYMENT DATA			
	BASELINE ONDERFRIMENT DATA			
(1)	(2)	(2)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
		<u></u>		
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$10,248,681	\$11,199,985	\$951,30
2	OTHER MEDICAL ASSISTANCE	\$5,789,116	\$0	(\$5,789,11
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,568,447	\$2,009,165	(\$1,559,283
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$19,606,244	\$13,209,150	(\$6,397,094
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODO	DLOGY)		
-		\$815,767,927	¢001 000 040	¢E 404 40
1 2	TOTAL CHARGES TOTAL GOVERNMENT DEDUCTIONS	\$815,767,927 \$412,221,700	\$821,229,348 \$420,545,263	\$5,461,42 \$8,323,56
2	UNCOMPENSATED CARE	\$16.896.660	\$13,368,663	(\$3,527,99
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$174,707,462	\$156.630.759	(\$18,076,70
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	(\$10,070,70
6	TOTAL ADJUSTMENTS	\$603,825,822	\$590,544,685	(\$13,281,13
7	TOTAL ACCRUED PAYMENTS	\$211,942,105	\$230,684,663	\$18,742,55
8	UCP DSH PAYMENTS (OHCA INPUT)	\$1,673,113	\$0	(\$1,673,11
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$213,615,218	\$230,684,663	\$17,069,44
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2618578286	0.2809016307	0.019043802
11	COST OF UNCOMPENSATED CARE	\$4,424,523	\$3,755,279	(\$669,243
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$15,075,358	\$14,643,538	(\$431,820
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$(
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	A (A A A A A A A A A A	* • • • • • • • • •	(0.1.1.0.1.0.0)
		\$19,499,881	\$18,398,818	(\$1,101,063
VII	RATIOS			
VII.	RATIOS			
•				
<u>A.</u> 1	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.15%	35.65%	1.509
2	MEDICARE	27.97%	26.73%	-1.24
	MEDICALE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.50%	19.49%	2.99
4	MEDICAID	18.54%	19.49%	0.95
5	OTHER MEDICAL ASSISTANCE	10.90%	0.00%	-10.90
6	CHAMPUS / TRICARE	23.18%	22.91%	-0.279
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.41%	8.75%	7.34
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
		25.52%	25.07%	-0.44
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	28.00%	27.94%	-0.06
_				
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29.04%	29.14%	0.10
2		18.76%	19.46%	0.70
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	15.07% 17.24%	17.55%	2.47
4 5	MEDICAID OTHER MEDICAL ASSISTANCE	8.18%	17.55% 0.00%	0.30
5 6	CHAMPUS / TRICARE	22.12%	21.00%	-0.16
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6.87%	11.95%	5.07
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	0.0170	11.0070	5.07
1				
,		17 200/	19 600/	4 440
/	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	17.29% 22.48%	18.69% 23.29%	<u>1.41°</u> 0.81°

	WATERBURY HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2011			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
		(2)	(1)	(7)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE
VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA	TIONS		
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	<u> </u>		
1	TOTAL ACCRUED PAYMENTS	\$211,942,105	\$215,150,035	\$3,207,930
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.)	. , ,	. , ,	(\$1,673,113)
		\$1,673,113	\$0	A
	OHCA DEFINED NET REVENUE	\$213,615,218	\$215,150,035	\$1,534,817
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$15,396,099	\$12,609,466	(\$2,786,633)
4	CALCULATED NET REVENUE	\$229,011,317	\$227,759,501	(\$1,251,816)
-		\$000.011.010	4007 750 500	(\$4.054.045)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$229,011,318	\$227,759,503	(\$1,251,815)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	(\$2)	(\$1)
в		NTO		
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	<u>NIS</u>		
1	OHCA DEFINED GROSS REVENUE	\$815,767,927	\$821,229,348	\$5,461,421
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$815,767,927	\$821,229,348	\$5,461,421
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$815,767,934	\$821,229,348	\$5,461,414
-	REPORTING)	•••••	····	<i>qc, .c.,</i>
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$7)	\$0	\$7
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMEN	rs		
		_		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$16,896,660	\$13,368,663	(\$3,527,997)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$1,170,621 \$18,067,281	\$905,329 \$14,273,992	(\$265,292) (\$3,793,289)
	CALCOLATED UNCOMPENSATED CARE (CHARTTCARE AND BAD DEBTS)	\$10,007,201	ψ1 4 ,275,552	(\$3,733,203)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL	\$18,067,281	\$14,273,991	(\$3,793,290)
	REPORTING)			
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$1	\$1
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	WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
		ACTUAL
LINE	DESCRIPTION	<u>FY 2011</u>
_	ACCRUED CHARGES AND PAYMENTS	
<u>I.</u>	ACCRUED CHARGES AND FATMENTS	
Α.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$139,157,214
2		288,595,799
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	85,331,434 85,331,434
5	OTHER MEDICAL ASSISTANCE	00,001,404
6	CHAMPUS / TRICARE	356,969
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6,170,836
	TOTAL INPATIENT GOVERNMENT CHARGES	\$374,284,202
	TOTAL INPATIENT CHARGES	\$513,441,416
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$135,460,672
2	MEDICARE	102,570,204
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	69,279,831
4	MEDICAID OTHER MEDICAL ASSISTANCE	69,279,831
5 6	CHAMPUS / TRICARE	477,225
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	8,464,911
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$172,327,260
	TOTAL OUTPATIENT CHARGES	\$307,787,932
<u>C.</u>	TOTAL ACCRUED CHARGES TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$274,617,886
2	TOTAL GOVERNMENT ACCRUED CHARGES	546,611,462
	TOTAL ACCRUED CHARGES	\$821,229,348
D.		¢40,600,728
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$49,609,728 77,137,070
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16,631,501
4	MEDICAID	16,631,501
5	OTHER MEDICAL ASSISTANCE	0
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	81,775
	TOTAL INPATIENT GOVERNMENT PAYMENTS	539,874 \$93,850,346
	TOTAL INPATIENT PAYMENTS	\$143,460,074
<u>E.</u>		
1 2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$39,474,108 19,960,112
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12,155,517
4	MEDICAL AGGIOTANCE (INCLUDING OTHER MEDICAL AGGIOTANCE)	12,155,517
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	100,224
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,011,201
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$32,215,853 \$71,689,961
		φ/1,003,301
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$89,083,836
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	126,066,199
	TOTAL ACCRUED PAYMENTS	\$215,150,035

	WATERBURY HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2011	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(1)		ACTUAL
	DESCRIPTION	FY 2011
LINE	DESCRIPTION	<u>F1 2011</u>
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,719
		5,972
-	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,059
		3,059
5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	8
<u>6</u> 7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	158
/	TOTAL GOVERNMENT DISCHARGES	9.039
	TOTAL GOVERNMENT DISCHARGES	12,758
	TOTAL DISCHARGES	12,756
	CASE MIX INDEX	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.27350
	MEDICARE	1.56100
-	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.97810
	MEDICAID	0.97810
	OTHER MEDICAL ASSISTANCE	0.00000
-	CHAMPUS / TRICARE	1.38740
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.16420
	TOTAL GOVERNMENT CASE MIX INDEX	1.36358
	TOTAL CASE MIX INDEX	1.33732
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$259,982,139
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$103,351,380
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$156,630,759
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	60.25%
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)	\$0
8	CHARITY CARE	\$2,456,277
9	BAD DEBTS	\$10,912,386
	TOTAL UNCOMPENSATED CARE	\$13,368,663
11	TOTAL OTHER OPERATING REVENUE	\$12,417,187
	TOTAL OPERATING EXPENSES	\$12,417,187 \$235,702,997
14		ψ200,102,001

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS PLUS DSH PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE US/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(3) ACTUAL FY 2011 \$215,150,035 \$0 \$215,150,035
FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DITAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DITAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES (2) ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DITAL ACCRUED PAYMENTS DITAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ACA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
(2) ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DIAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) HCA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
ESCRIPTION ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS ECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	ACTUAL <u>FY 2011</u> \$215,150,035 \$0
ET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS CONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$215,150,035 \$0
CONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DITAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$0
CONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS DITAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$0
DTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$0
DTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$0
PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$0
PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) ICA DEFINED NET REVENUE	\$0
ICA DEFINED NET REVENUE	
LIS/(MINUS) OTHER AD ILISTMENTS TO OHCA DEFINED NET REVENUE	
	\$12,609,466
	\$227,759,501
NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$227,759,503
RIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$2)
CONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
ICA DEFINED GROSS REVENUE	\$821,229,348
US/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
ALCULATED GROSS REVENUE	\$821,229,348
GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$821,229,348
RIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
CONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$13,368,663
US/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$905,329
ALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$14,273,992
UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$14,273,991
RIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
	RIANCE (MUST BE LESS THAN OR EQUAL TO \$500) CONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS CA DEFINED GROSS REVENUE US/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CULATED GROSS REVENUE GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING) RIANCE (MUST BE LESS THAN OR EQUAL TO \$500) CONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) US/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)

	TWELVE MONTHS ACT	UAL FILING				
	FISCAL YEA	R 2011				
REPORT 650 - HOSPITAL UNCOMPENSATED CARE						
(1)	(2)			(5)	(6)	
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) AMOUNT	(6)	
	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE		
	DESCRIPTION	<u> </u>	<u> </u>	DIFFERENCE	DIFFERENCI	
Α.	Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	359	201	(158)	-449	
2	Number of Approved Applicants	277	177	(100)	-369	
3	Total Charges (A)	\$1,910,845	\$2,456,277	\$545,432	299	
4	Average Charges	\$6,898	\$13,877	\$6,979	1019	
			· · ·			
5	Ratio of Cost to Charges (RCC)	0.295497	0.287434	(0.008063)	-39	
6	Total Cost	\$564,649	\$706,018	\$141,369	259	
7	Average Cost	\$2,038	\$3,989	\$1,950	969	
-		+_,	+-,	+-,		
8	Charity Care - Inpatient Charges	\$1,448,349	\$2,109,054	\$660,705	469	
9	Charity Care - Outpatient Charges (Excludes ED Charges)	197,043	138,872	(58,171)	-309	
10	Charity Care - Emergency Department Charges	265,453	208,351	(57,102)	-229	
11	Total Charges (A)	\$1,910,845	\$2,456,277	\$545,432	299	
12	Charity Care - Number of Patient Days	456	594	138	30%	
13	Charity Care - Number of Discharges	92	71	(21)	-239	
14	Charity Care - Number of Outpatient ED Visits	216	175	(41)	-199	
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	149	102	(47)	-329	
в.	Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$7,514,456	\$3,426,510	(\$4,087,946)	-549	
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	2,540,262	1,795,463	(744,799)	-299	
3	Bad Debts - Emergency Department	4,931,097	5,690,413	759,316	159	
4	Total Bad Debts (A)	\$14,985,815	\$10,912,386	(\$4,073,429)	-27	
C.	Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$1,910,845	\$2,456,277	\$545.432	299	
2	Bad Debts (A)	14,985,815	10,912,386	(4,073,429)	-279	
2	Total Uncompensated Care (A)	\$16,896,660	\$13,368,663	(\$3,527,997)	-21	
5		φ10,030,000	φ13,300,003	(43,321,331)	-21	
4	Uncompensated Care - Inpatient Services	\$8,962,805	\$5,535,564	(\$3,427,241)	-389	
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	2,737,305	1,934,335	(802,970)	-29	
6	Uncompensated Care - Emergency Department	5,196,550	5,898,764	702,214	149	
7	Total Uncompensated Care (A)	\$16,896,660	\$13,368,663	(\$3,527,997)	-219	

OFFICE OF HEALTH CARE ACCESS

		TWELVE MONTHS ACTUA			
		FISCAL YEAR 2	2011		
	REPORT 685 - HOSPITA	AL NON-GOVERNMENT GROSS RE	EVENUE, CONTRACTUAL	ALLOWANCES,	
	Α	CCRUED PAYMENTS AND DISCO	UNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
. /		FY 2010	FY 2011		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$264,386,049	\$259,982,139	(\$4,403,910)	-20
2	Total Contractual Allowances	\$174,707,462	\$156,630,759	(\$18,076,703)	-104
	Total Accrued Payments (A)	\$89,678,587	\$103,351,380	\$13,672,793	159
	Total Discount Percentage	66.08%	60.25%	-5.83%	-9%

(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.

	WATERBURY HOSPITA	L					
	TWELVE MONTHS ACTUAL F	FILING					
	FISCAL YEAR 2011						
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPIT	AL REVENUE AND E	EXPENSE				
(1)	(2)	(3)	(4)	(5)			
LINE	DESCRIPTION	ACTUAL <u>FY 2009</u>	ACTUAL <u>FY 2010</u>	ACTUAL <u>FY 2011</u>			
Α.	Gross and Net Revenue						
1	Inpatient Gross Revenue	\$534,788,651	\$517,372,674	\$513,441,416			
2	Outpatient Gross Revenue	\$310,125,616	\$298,395,253	\$307,787,932			
3	Total Gross Patient Revenue	\$844,914,267	\$815,767,927	\$821,229,348			
4	Net Patient Revenue	\$239,928,524	\$229,011,318	\$227,759,506			
В.	Total Operating Expenses						
1	Total Operating Expense	\$253,532,594	\$237,519,576	\$235,702,997			
		φ200,002,004	φ207,010,070	φ200,102,001			
C.	Utilization Statistics						
1	Patient Days	67,682	59,271	58,780			
2	Discharges	13,916	13,046	12,758			
3	Average Length of Stay	4.9	4.5	4.6			
4	Equivalent (Adjusted) Patient Days (EPD)	106,931	93,456	94,016			
0	Equivalent (Adjusted) Discharges (ED)	21,986	20,570	20,406			
D.	Case Mix Statistics						
1	Case Mix Index	1.52936	1.41446	1.33732			
2	Case Mix Adjusted Patient Days (CMAPD)	103,510	83,836	78,608			
3	Case Mix Adjusted Discharges (CMAD)	21,283	18,453	17,062			
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	163,536	132,189	125,730			
5	Case Mix Adjusted Equivalent Discharges (CMAED)	33,624	29,096	27,289			
E.	Gross Revenue Per Statistic						
1	Total Gross Revenue per Patient Day	\$12,484	\$13,763	\$13,971			
2	Total Gross Revenue per Discharge	\$60,715	\$62,530	\$64,370			
3	Total Gross Revenue per EPD	\$7,901	\$8,729	\$8,735			
4	Total Gross Revenue per ED	\$38,430	\$39,658	\$40,245			
5	Total Gross Revenue per CMAEPD	\$5,167	\$6,171	\$6,532			
6	Total Gross Revenue per CMAED	\$25,128	\$28,037	\$30,093			
7	Inpatient Gross Revenue per EPD	\$5,001	\$5,536	\$5,461			
8	Inpatient Gross Revenue per ED	\$24,324	\$25,151	\$25,161			

	WATERBURY HOSPITAL					
	TWELVE MONTHS ACTUAL FILI	NG				
	FISCAL YEAR 2011 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL		YPENSE			
(1)	(2)	(3)	(4)	(5)		
		ACTUAL	ACTUAL	ACTUAL		
LINE	DESCRIPTION	<u>FY 2009</u>	<u>FY 2010</u>	<u>FY 2011</u>		
F.	Net Revenue Per Statistic					
1	Net Patient Revenue per Patient Day	\$3,545	\$3,864	\$3,875		
2	Net Patient Revenue per Discharge	\$17,241	\$17,554	\$17,852		
3	Net Patient Revenue per EPD	\$2,244	\$2,450	\$2,423		
4	Net Patient Revenue per ED	\$10,913	\$11,133	\$11,161		
5	Net Patient Revenue per CMAEPD	\$1,467	\$1,732	\$1,811		
6	Net Patient Revenue per CMAED	\$7,136	\$7,871	\$8,346		
G.	Operating Expense Per Statistic					
G. 1	Total Operating Expense per Patient Day	\$3,746	\$4,007	\$4,010		
2	Total Operating Expense per Pauent Day	\$18,219	\$4,007 \$18,206			
	Total Operating Expense per EPD		\$18,206	\$18,475 \$2,507		
3		\$2,371		\$2,507		
4	Total Operating Expense per ED	\$11,532	\$11,547	\$11,551		
5	Total Operating Expense per CMAEPD	\$1,550	\$1,797	\$1,875		
6	Total Operating Expense per CMAED	\$7,540	\$8,163	\$8,637		
Н.	Nursing Salary and Fringe Benefits Expense					
1	Nursing Salary Expense	\$33,017,306	\$31,968,760	\$32,142,636		
2	Nursing Fringe Benefits Expense	\$8,798,841	\$9,335,720	\$9,839,673		
3	Total Nursing Salary and Fringe Benefits Expense	\$41,816,147	\$41,304,480	\$41,982,309		
Ι.	Physician Salary and Fringe Expense					
1	Physician Salary Expense	\$14,446,788	\$8,044,219	\$6,033,313		
2	Physician Fringe Benefits Expense	\$3,948,037	\$2,349,124	\$1,846,950		
3	Total Physician Salary and Fringe Benefits Expense	\$18,394,825	\$10,393,343	\$7,880,263		
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense					
1	Non-Nursing, Non-Physician Salary Expense	\$58,531,193	\$58,791,114	\$60,984,362		
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$17,348,785	\$17,168,555	\$18,668,855		
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$75,879,978	\$75,959,669	\$79,653,217		
К.	Total Salary and Fringe Benefits Expense					
1	Total Salary Expense	\$105,995,287	\$98,804,093	\$99,160,311		
2	Total Fringe Benefits Expense	\$30,095,663	\$28,853,399	\$30,355,478		
3	Total Salary and Fringe Benefits Expense	\$136,090,950	\$127,657,492	\$129,515,789		

	TWELVE MONTHS ACTUAL F			
	FISCAL YEAR 2011			
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPITA	AL REVENUE AND E	XPENSE	
	1			
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL
LINE	DESCRIPTION	<u>FY 2009</u>	<u>FY 2010</u>	<u>FY 2011</u>
<u>L.</u>	Total Full Time Equivalent Employees (FTEs)		004.5	050
1	Total Nursing FTEs	381.0	361.5	359.
2	Total Physician FTEs	120.8	86.7	79
3	Total Non-Nursing, Non-Physician FTEs	1087.4	1064.9	1073.
4	Total Full Time Equivalent Employees (FTEs)	1,589.2	1,513.1	1,512.
М.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$86,660	\$88,434	\$89,48
2	Nursing Fringe Benefits Expense per FTE	\$23,094	\$25,825	\$27,39
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$109,754	\$114,259	\$116,87
Ν.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$119,593	\$92,782	\$75,79
2	Physician Fringe Benefits Expense per FTE	\$32,682	\$92,782	\$23,20
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$152,275	\$119,877	\$98,99
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expens	e per FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$53,827	\$55,208	\$56,78
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$15,954	\$16,122	\$17,38
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$69,781	\$71,330	\$74,17
Р.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$66,697	\$65,299	\$65,55
2	Total Fringe Benefits Expense per FTE	\$18,938	\$19,069	\$20,06
3	Total Salary and Fringe Benefits Expense per FTE	\$85,635	\$84,368	\$85,61
Q.	Total Salary and Fringe Ben. Expense per Statistic			
 1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,011	\$2,154	\$2,20
2	Total Salary and Fringe Benefits Expense per Patient Day	\$9,779	\$9,785	پر عرب \$10,1
3	Total Salary and Fringe Benefits Expense per EPD	\$1,273	\$1,366	\$1,3
4	Total Salary and Fringe Benefits Expense per EPD	\$6,190	\$6,206	\$6,3
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$832	\$966	\$0,3 \$1,0
5 6	Total Salary and Fringe Benefits Expense per CMAEPD	\$4,047	\$966 \$4,387	\$4,74