TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013								
			απατιον					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION           (1)         (2)         (3)         (4)         (5)         (6)								
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %			
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
I.	ASSETS							
Α.	Current Assets:							
1	Cash and Cash Equivalents	\$79,838,027	\$73,750,817	(\$6,087,210)	-8%			
2	Short Term Investments	\$8,710,885	\$8,738,868	\$27,983	0%			
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$30,103,755	\$26,795,462	(\$3,308,293)	-119			
4	Current Assets Whose Use is Limited for Current Liabilities	\$278,083	\$0	(\$278,083)	-100%			
5	Due From Affiliates	\$4,330,064	<del>پر</del> \$1,346,260	(\$2,983,804)	-1007 -69%			
6	Due From Third Party Payers	\$2,368,715	\$0 \$1.845.044	(\$2,368,715)	-100%			
7	Inventories of Supplies	\$1,860,656	\$1,845,044	(\$15,612)	-1%			
8	Prepaid Expenses	\$2,373,762	\$1,589,839	(\$783,923)	-33%			
9	Other Current Assets	\$389,206	\$3,410,889	\$3,021,683	776%			
	Total Current Assets	\$130,253,153	\$117,477,179	(\$12,775,974)	-10%			
В.	Noncurrent Assets Whose Use is Limited:							
1	Held by Trustee	\$2,366,125	\$59,708,986	\$57,342,861	2423%			
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%			
3	Funds Held in Escrow	\$0	\$0	\$0	0%			
4	Other Noncurrent Assets Whose Use is Limited	\$2,450,281	\$327	(\$2,449,954)	-100%			
	Total Noncurrent Assets Whose Use is Limited:	\$4,816,406	\$59,709,313	\$54,892,907	1140%			
5	Interest in Net Assets of Foundation	\$49,220,441	\$45,162,957	(\$4,057,484)	-8%			
6	Long Term Investments	\$46,403,962	\$80,922,925	\$34,518,963	74%			
7	Other Noncurrent Assets	\$71,688,804	\$77,286,903	\$5,598,099	8%			
^	Net Fixed Assets:							
C. ₁		¢420.521.109	¢426.266.255	¢16 706 167	40			
1	Property, Plant and Equipment	\$420,531,198	\$436,266,355	\$15,735,157	4%			
2	Less: Accumulated Depreciation	\$292,559,901	\$310,387,551	\$17,827,650	6%			
	Property, Plant and Equipment, Net	\$127,971,297	\$125,878,804	(\$2,092,493)	-2%			
3	Construction in Progress	\$8,602,012	\$34,252,962	\$25,650,950	298%			
	Total Net Fixed Assets	\$136,573,309	\$160,131,766	\$23,558,457	17%			
	Total Assets	\$438,956,075	\$540,691,043	\$101,734,968	23%			
II.	LIABILITIES AND NET ASSETS							
Α.	Current Liabilities:							
1	Accounts Payable and Accrued Expenses	\$25,888,666	\$29,302,635	\$3,413,969	13%			
2	Salaries, Wages and Payroll Taxes	\$17,881,149	\$22,048,375	\$4,167,226	23%			

	NO	RWALK HOSPITAL							
	TWELVE	MONTHS ACTUAL FILING							
FISCAL YEAR 2013 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION									
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION									
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %				
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
3	Due To Third Party Payers	\$4,906,972	\$4,893,626	(\$13,346)	0%				
4	Due To Affiliates	\$4,561,656	\$851,758	(\$3,709,898)	-81%				
5	Current Portion of Long Term Debt	\$3,820,000	\$3,265,000	(\$555,000)	-15%				
6	Current Portion of Notes Payable	\$1,205,862	\$1,243,589	\$37,727	3%				
7	Other Current Liabilities	\$764,862	\$818,694	\$53,832	7%				
	Total Current Liabilities	\$59,029,167	\$62,423,677	\$3,394,510	6%				
В.	Long Term Debt:								
1	Bonds Payable (Net of Current Portion)	\$48,575,000	\$119,435,000	\$70,860,000	146%				
2	Notes Payable (Net of Current Portion)	\$4,169,956	\$2,926,397	(\$1,243,559)	-30%				
	Total Long Term Debt	\$52,744,956	\$122,361,397	\$69,616,441	132%				
3	Accrued Pension Liability	\$64,741,651	\$13,061,730	(\$51,679,921)	-80%				
4	Other Long Term Liabilities	\$95,747,309	\$95,631,123	(\$116,186)	0%				
	Total Long Term Liabilities	\$213,233,916	\$231,054,250	\$17,820,334	8%				
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%				
C.	Net Assets:								
1	Unrestricted Net Assets or Equity	\$123,000,420	\$207,578,029	\$84,577,609	69%				
2	Temporarily Restricted Net Assets	\$34,246,719	\$30,180,235	(\$4,066,484)	-12%				
3	Permanently Restricted Net Assets	\$9,445,853	\$9,454,852	\$8,999	0%				
	Total Net Assets	\$166,692,992	\$247,213,116	\$80,520,124	48%				
	Total Liabilities and Net Assets	\$438,956,075	\$540,691,043	\$101,734,968	23%				

	NOR	WALK HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013								
	FIS	CAL YEAR 2013							
	REPORT 150 - HOSPITAL STA		ATIONS INFORMA	TION					
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
Α.	Operating Revenue:								
1	Total Gross Patient Revenue	\$908,958,362	\$913,394,783	\$4,436,421	0%				
2	Less: Allowances	\$527,761,485	\$543,154,825	\$15,393,340	3%				
3	Less: Charity Care	\$17,929,000	\$18,272,000	\$343,000	2%				
4	Less: Other Deductions	\$0	\$0	\$0	0%				
	Total Net Patient Revenue	\$363,267,877	\$351,967,958	(\$11,299,919)	-3%				
5	Provision for Bad Debts	\$0	\$17,836,044	\$17,836,044	0%				
	Net Patient Service Revenue less provision for bad debts	\$363,267,877	\$334,131,914	(\$29,135,963)	-8%				
6	Other Operating Revenue	\$20,310,592	\$16,843,048	(\$3,467,544)	-17%				
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%				
	Total Operating Revenue	\$383,578,469	\$350,974,962	(\$32,603,507)	-8%				
В.	Operating Expenses:								
1	Salaries and Wages	\$133,582,483	\$138,382,600	\$4,800,117	4%				
2	Fringe Benefits	\$47,770,644	\$51,686,620	\$3,915,976	8%				
3	Physicians Fees	\$7,854,008	\$7,455,185	(\$398,823)	-5%				
4	Supplies and Drugs	\$31,420,219	\$30,741,799	(\$678,420)	-2%				
5	Depreciation and Amortization	\$20,380,372	\$18,635,476	(\$1,744,896)	-9%				
6	Bad Debts	\$23,530,477	\$0	(\$23,530,477)	-100%				
7	Interest Expense	\$2,025,836	\$2,529,391	\$503,555	25%				
8	Malpractice Insurance Cost	\$7,605,175	\$5,816,594	(\$1,788,581)	-24%				
9	Other Operating Expenses	\$87,782,231	\$83,733,460	(\$4,048,771)	-5%				
	Total Operating Expenses	\$361,951,445	\$338,981,125	(\$22,970,320)	-6%				
	Income/(Loss) From Operations	\$21,627,024	\$11,993,837	(\$9,633,187)	-45%				
C.	Non-Operating Revenue:								
1	Income from Investments	\$1,273,038	\$2,302,857	\$1,029,819	81%				
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%				
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%				
	Total Non-Operating Revenue	\$1,273,038	\$2,302,857	\$1,029,819	81%				
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$22,900,062	\$14,296,694	(\$8,603,368)	-38%				
	Other Adjustments:								
	Unrealized Gains/(Losses)	\$6,656,576	\$7,513,809	\$857,233	13%				

	NC	RWALK HOSPITAL			
	TWELVE	MONTHS ACTUAL F	ILING		
	F	ISCAL YEAR 2013			
	REPORT 150 - HOSPITAL S	TATEMENT OF OPER	RATIONS INFORM	ATION	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$6,656,576	\$7,513,809	\$857,233	13%
	Excess/(Deficiency) of Revenue Over Expenses	\$29,556,638	\$21,810,503	(\$7,746,135)	-26%
	Principal Payments	\$4,834,597	\$12,900,862	\$8,066,265	167%

		NORWALK HOSPITAL			
	TWEL	VE MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS		E AND STATISTI	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
١.	GROSS REVENUE BY PAYER				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$222,980,504	\$212,800,842	(\$10,179,662)	-5%
2	MEDICARE MANAGED CARE	\$26,976,401	\$30,346,099	\$3,369,698	12%
3	MEDICAID	\$70,589,407	\$74,431,040	\$3,841,633	5%
4	MEDICAID MANAGED CARE	\$5,229,953	\$0	(\$5,229,953)	-100%
5	CHAMPUS/TRICARE	\$518,914	\$477,701	(\$41,213)	-8%
6	COMMERCIAL INSURANCE	\$11,655,546	\$12,270,152	\$614,606	5%
7	NON-GOVERNMENT MANAGED CARE	\$126,465,042	\$113,124,738	(\$13,340,304)	-11%
8	WORKER'S COMPENSATION	\$1,936,929	\$1,845,195	(\$91,734)	-5%
9	SELF- PAY/UNINSURED	\$6,389,236	\$5,189,210	(\$1,200,026)	-19%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,219,617	\$578,536	(\$641,081)	-53%
	TOTAL INPATIENT GROSS REVENUE	\$473,961,549	\$451,063,513	(\$22,898,036)	-5%
В.	OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$109,039,819	\$121,877,481	\$12,837,662	12%
2	MEDICARE MANAGED CARE	\$14,793,586	\$17,664,073	\$2,870,487	19%
3	MEDICAID	\$50,968,702	\$69,452,300	\$18,483,598	36%
4	MEDICAID MANAGED CARE	\$6,539,229	\$0	(\$6,539,229)	-100%
5	CHAMPUS/TRICARE	\$394,920	\$325,124	(\$69,796)	-18%
6	COMMERCIAL INSURANCE	\$17,679,546	\$18,279,219	\$599,673	3%
7	NON-GOVERNMENT MANAGED CARE	\$200,735,856	\$198,166,912	(\$2,568,944)	-1%
8	WORKER'S COMPENSATION	\$5,517,307	\$5,951,894	\$434,587	8%
9	SELF- PAY/UNINSURED	\$28,798,363	\$29,957,432	\$1,159,069	49
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$529,485	\$656,835	\$127,350	249
	TOTAL OUTPATIENT GROSS REVENUE	\$434,996,813	\$462,331,270	\$27,334,457	6%
С.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$332,020,323	\$334,678,323	\$2,658,000	19
2	MEDICARE MANAGED CARE	\$41,769,987	\$48,010,172	\$6,240,185	15%
3	MEDICAID	\$121,558,109	\$143,883,340	\$22,325,231	18%
4	MEDICAID MANAGED CARE	\$11,769,182	\$0	(\$11,769,182)	-100%
5	CHAMPUS/TRICARE	\$913,834	\$802,825	(\$111,009)	-12%
6	COMMERCIAL INSURANCE	\$29,335,092	\$30,549,371	\$1,214,279	4%
7	NON-GOVERNMENT MANAGED CARE	\$327,200,898	\$311,291,650	(\$15,909,248)	-5%
8	WORKER'S COMPENSATION	\$7,454,236	\$7,797,089	\$342,853	5%
9	SELF- PAY/UNINSURED	\$35,187,599	\$35,146,642	(\$40,957)	0%
-	SAGA	. , ,		(\$40, <del>5</del> 37) \$0	07 0%
		\$0	\$0		
11	OTHER TOTAL GROSS REVENUE	\$1,749,102 \$908,958,362	\$1,235,371 \$913,394,783	(\$513,731) \$4,436,421	-29% 0%
П.	NET REVENUE BY PAYER	······································	·····	÷ ·, · • •, · - •	
A.	INPATIENT NET REVENUE				
		¢60 550 060	¢64 464 000	(\$4 200 224)	~
1	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$68,553,363 \$7,270,001	\$64,164,032	(\$4,389,331)	-6%
		\$7,379,091	\$8,009,830	\$630,739 (\$2,726,712)	9%
3	MEDICAID MEDICAID MANAGED CARE	\$19,245,055 \$1,092,487	\$15,518,34 <u>2</u> \$0	(\$3,726,713) (\$1,092,487)	-19% -100%
Λ		51192487	.50	UD1.U92.487)	-100%
4 5	CHAMPUS/TRICARE	\$104,982	\$166,560	\$61,578	59%

		NORWALK HOSPITAL			
	TWEL	VE MONTHS ACTUAL FIL	ING		
		FISCAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS	REVENUE, NET REVENU	E AND STATISTIC	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
(1)	(2)				
		FY 2012 ACTUAL	FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
7		\$67,388,928	¢c7 409 c70	¢100 740	00/
7 8	NON-GOVERNMENT MANAGED CARE WORKER'S COMPENSATION	\$1,327,897	\$67,498,670 \$1,167,537	\$109,742 (\$160,360)	<u> </u>
9	SELF- PAY/UNINSURED	\$167,271	\$458,039	\$290,768	174%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$481,053	\$94,864	(\$386,189)	-80%
	TOTAL INPATIENT NET REVENUE	\$172,234,349	\$163,437,226	(\$8,797,123)	-5%
В.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$18,275,049	\$24,707,861	\$6,432,812	35%
2	MEDICARE MANAGED CARE	\$3,467,265	\$3,627,517	\$160,252	5%
3		\$13,976,031	\$17,506,571	\$3,530,540	25%
4 5	MEDICAID MANAGED CARE CHAMPUS/TRICARE	\$1,267,215 \$59,947	\$0 \$56,187	(\$1,267,215) (\$3,760)	<u>-100%</u> -6%
6		\$8,815,788	\$8,879,833	\$64,045	
7	NON-GOVERNMENT MANAGED CARE	\$112,965,638	\$112,392,075	(\$573,563)	-1%
8	WORKER'S COMPENSATION	\$2,170,034	\$2,831,929	\$661,895	31%
9	SELF- PAY/UNINSURED	\$2,120,010	\$2,395,471	\$275,461	13%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$179,741	\$61,369	(\$118,372)	-66%
	TOTAL OUTPATIENT NET REVENUE	\$163,296,718	\$172,458,813	\$9,162,095	6%
~					
<u> </u>	TOTAL NET REVENUE MEDICARE TRADITIONAL	\$86,828,412	\$88,871,893	\$2,043,481	2%
2	MEDICARE MANAGED CARE	\$10,846,356	\$11,637,347	\$790,991	<u> </u>
3	MEDICAID	\$33,221,086	\$33,024,913	(\$196,173)	-1%
4	MEDICAID MANAGED CARE	\$2,359,702	\$0	(\$2,359,702)	-100%
5	CHAMPUS/TRICARE	\$164,929	\$222,747	\$57,818	35%
6	COMMERCIAL INSURANCE	\$15,310,010	\$15,239,185	(\$70,825)	0%
7	NON-GOVERNMENT MANAGED CARE	\$180,354,566	\$179,890,745	(\$463,821)	0%
8	WORKER'S COMPENSATION	\$3,497,931	\$3,999,466	\$501,535	14%
9	SELF- PAY/UNINSURED	\$2,287,281	\$2,853,510	\$566,229	25%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$660,794	\$156,233	(\$504,561)	-76%
	TOTAL NET REVENUE	\$335,531,067	\$335,896,039	\$364,972	0%
III.	<u>STATISTICS BY PAYER</u>				
	DISCHARGES				
<b>A</b> . 1	MEDICARE TRADITIONAL	5,494	4,676	(818)	-15%
2	MEDICARE MANAGED CARE	653	643	(10)	-2%
3	MEDICAID	2,758	2,782	24	1%
4	MEDICAID MANAGED CARE	244	0	(244)	-100%
5	CHAMPUS/TRICARE	15	16	1	7%
6	COMMERCIAL INSURANCE	477	490	13	3%
7	NON-GOVERNMENT MANAGED CARE	5,008	4,185	(823)	-16%
8		47	39	(8)	-17%
9	SELF- PAY/UNINSURED	267	193	(74)	-28%
<u>10</u> 11	SAGA OTHER	<u> </u>	0	0 (19)	<u> </u>
	TOTAL DISCHARGES	15,003	13,045	(1,958)	-48% -13%
В.	PATIENT DAYS	10,000	.0,040	(1,000)	
1	MEDICARE TRADITIONAL	31.637	27,585	(4,052)	-13%
2	MEDICARE MANAGED CARE	3,619	3,792	173	5%
3	MEDICAID	10,815	10,948	133	1%

	NORV				
		NTHS ACTUAL FIL	ING		
		AL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS REVE		E AND STATISTI	CS BY PAYER	
		,			
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
4	MEDICAID MANAGED CARE	794	0	(794)	-100%
5	CHAMPUS/TRICARE	68	51	(17)	-25%
6	COMMERCIAL INSURANCE	1,857	1,727	(130)	-7%
7	NON-GOVERNMENT MANAGED CARE	17,356	14,685	(2,671)	-15%
8	WORKER'S COMPENSATION	154	154	0	0%
9 10	SELF- PAY/UNINSURED	844	<u> </u>	(254)	-30%
11	SAGA OTHER	197	79	(118)	<u> </u>
- 1 1	TOTAL PATIENT DAYS	67,341	59,611	(7,730)	-00 /8 -11%
C.	OUTPATIENT VISITS	07,041	55,011	(1,100)	1170
1	MEDICARE TRADITIONAL	59,677	58,585	(1,092)	-2%
2	MEDICARE MANAGED CARE	7,666	8,492	826	11%
3	MEDICAID	35,049	43,071	8,022	23%
4	MEDICAID MANAGED CARE	5,117	0	(5,117)	-100%
5	CHAMPUS/TRICARE	201	192	(9)	-4%
6	COMMERCIAL INSURANCE	13,482	11,783	(1,699)	-13%
7	NON-GOVERNMENT MANAGED CARE	120,769	113,631	(7,138)	-6%
8	WORKER'S COMPENSATION	2,525	3,241	716	28%
9	SELF- PAY/UNINSURED	20,504	21,817	1,313	6%
10	SAGA	0	0	0	0%
11	OTHER	245	211	(34)	-14%
	TOTAL OUTPATIENT VISITS	265,235	261,023	(4,212)	-2%
IV	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS				
Α.	REVENUE				
1	MEDICARE TRADITIONAL	\$27,413,439	\$35,675,959	\$8,262,520	30%
2	MEDICARE MANAGED CARE	\$3,475,720	\$4,813,696	\$1,337,976	38%
3	MEDICAID	\$24,924,501	\$32,159,396	\$7,234,895	29%
4	MEDICAID MANAGED CARE	\$3,647,933	\$0	(\$3,647,933)	-100%
5	CHAMPUS/TRICARE	\$155,293	\$156,969	\$1,676	1%
6	COMMERCIAL INSURANCE	\$7,088,046	\$7,410,124	\$322,078	5%
7	NON-GOVERNMENT MANAGED CARE	\$49,726,272	\$50,410,015	\$683,743	1%
8		\$1,904,840	\$2,092,411	\$187,571	10%
9	SELF- PAY/UNINSURED	\$14,659,538	\$14,797,556	\$138,018 \$0	1%
10	SAGA	\$0 \$100.042	\$0 \$0	\$0 \$107.000	0%
11		\$490,042	\$618,032	\$127,990	26%
		¢422.405.004	¢140404450	\$44 GAD ED4	4.4.07
<u> </u>	GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET	\$133,485,624	\$148,134,158	\$14,648,534	11%
	REVENUE				
<b>B.</b> 1	MEDICARE TRADITIONAL	\$4,684,525	\$5,959,802	\$1,275,277	27%
2	MEDICARE TRADITIONAL MEDICARE MANAGED CARE	\$4,684,525 \$592,139	<u>\$5,959,802</u> \$811,105	\$1,275,277 \$218,966	37%
3	MEDICARE MANAGED CARE	\$4,698,044	\$6,513,017	\$1,814,973	39%
4	MEDICAID MANAGED CARE	\$697,039	<u>\$0,515,017</u> \$0	(\$697,039)	-100%
5	CHAMPUS/TRICARE	\$29,886	\$25,056	(\$4,830)	-16%
6	COMMERCIAL INSURANCE	\$5,115,597	\$4,185,672	(\$929,925)	-18%
7	NON-GOVERNMENT MANAGED CARE	\$29,037,141	\$33,526,942	\$4,489,801	15%
8	WORKER'S COMPENSATION	\$1,215,969	\$1,224,093	\$8,124	1%
9	SELF- PAY/UNINSURED	\$1,070,499	\$459,446	(\$611,053)	-57%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$152,654	\$53,354	(\$99,300)	-65%

	NOR	WALK HOSPITAL			
	TWELVE M	ONTHS ACTUAL FI	LING		
	FIS	CAL YEAR 2013			
	REPORT 165 - HOSPITAL GROSS REVE	ENUE, NET REVEN	UE AND STATISTI	CS BY PAYER	
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$47,293,493	\$52,758,487	\$5,464,994	12%
С.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	6,127	6,488	361	6%
2	MEDICARE MANAGED CARE	736	904	168	23%
3	MEDICAID	8,896	11,040	2,144	24%
4	MEDICAID MANAGED CARE	1,526	0	(1,526)	-100%
5	CHAMPUS/TRICARE	59	55	(4)	-7%
6	COMMERCIAL INSURANCE	2,022	1,948	(74)	-4%
7	NON-GOVERNMENT MANAGED CARE	14,600	13,810	(790)	-5%
8	WORKER'S COMPENSATION	810	856	46	6%
9	SELF- PAY/UNINSURED	4,588	4,559	(29)	-1%
10	SAGA	0	0	0	0%
11	OTHER	186	178	(8)	-4%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	39.550	39.838	288	1%

Γ

NORWALK HOSPITAL TWELVE MONTHS ACTUAL FILING								
TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013								
FISCAL YEAR 2013 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT								
	REPORT 113 - HOSPITAL OF ERATING EAF	LIGES BI EXPENS	L CATEGORT AN	DEFAILINENT				
(1) (2) (3) (4) (5)								
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	<u>(6)</u> %			
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
		ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
I.	OPERATING EXPENSE BY CATEGORY							
Α.	Salaries & Wages:							
1	Nursing Salaries	\$46,217,962	\$46,255,451	\$37,489	0%			
2	Physician Salaries	\$9,930,604	\$11,928,508	\$1,997,904	20%			
3	Non-Nursing, Non-Physician Salaries	\$77,433,917	\$80,198,641	\$2,764,724	49			
	Total Salaries & Wages	\$133,582,483	\$138,382,600	\$4,800,117	49			
В.	Fringe Benefits:							
1	Nursing Fringe Benefits	\$14,427,766	\$15,513,984	\$1,086,218	89			
2	Physician Fringe Benefits	\$2,996,514	\$3,620,814	\$624,300	219			
3	Non-Nursing, Non-Physician Fringe Benefits	\$30,346,364	\$32,551,822	\$2,205,458	7%			
	Total Fringe Benefits	\$47,770,644	\$51,686,620	\$3,915,976	8%			
C.	Contractual Labor Fees:							
1	Nursing Fees	\$1,598,864	\$480,087	(\$1,118,777)	-70%			
2	Physician Fees	\$7,854,008	\$7,455,185	(\$398,823)	-5%			
3	Non-Nursing, Non-Physician Fees	\$8,144,964	\$7,086,120	(\$1,058,844)	-13%			
	Total Contractual Labor Fees	\$17,597,836	\$15,021,392	(\$2,576,444)	-15%			
<u>D.</u>	Medical Supplies and Pharmaceutical Cost:	<b>#00.000.001</b>	<b>*</b> ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~ ~~	(\$500.00.1)				
1	Medical Supplies	\$23,803,821	\$23,207,797	(\$596,024)	-39			
2	Pharmaceutical Costs Total Medical Supplies and Pharmaceutical Cost	\$7,616,398 <b>\$31,420,219</b>	\$7,534,002 <b>\$30,741,799</b>	(\$82,396) <b>(\$678,420)</b>	-19 - <b>2</b> 9			
		\$51,420,219	\$30,741,799	(\$078,420)	-2 /			
E.	Depreciation and Amortization:							
1	Depreciation-Building	\$6,379,326	\$6,372,888	(\$6,438)	0%			
2	Depreciation-Equipment	\$14,001,046	\$12,262,588	(\$1,738,458)	-12%			
3	Amortization	\$0	\$0	\$0	0%			
	Total Depreciation and Amortization	\$20,380,372	\$18,635,476	(\$1,744,896)	-9%			
F.	Bad Debts:							
1	Bad Debts	\$23,530,477	\$0	(\$23,530,477)	-100%			
			·					
G.	Interest Expense:							
1	Interest Expense	\$2,025,836	\$2,529,391	\$503,555	25%			
Н.	Malpractice Insurance Cost:							
1	Malpractice Insurance Cost	\$7,605,175	\$5,816,594	(\$1,788,581)	-249			
		<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>	+-,,	(+ - , , )	,			
Ι.	<u>Utilities:</u>							
1	Water	\$190,666	\$197,105	\$6,439	39			
2	Natural Gas	\$2,406,046	\$2,228,902	(\$177,144)	-79			
3	Oil	\$140,833	\$238,870	\$98,037	70%			
4	Electricity	\$1,361,731	\$1,321,904	(\$39,827)	-3%			
5	Telephone Other Litilities	\$687,400	\$693,971	\$6,571 \$0	<u> </u>			
6	Other Utilities Total Utilities	\$0 <b>\$4,786,676</b>	\$0 <b>\$4,680,752</b>	\$0 ( <b>\$105,924)</b>	-2°			
		ψ-,700,070	ψ <del>τ</del> ,000,7 JZ	(\$103,324)	-2			
J.	Business Expenses:							
	Accounting Fees	\$253,790	\$251,958	(\$1,832)	-19			
1	Legal Fees	\$1,825,297		\$75,384	4°			

	NORW	ALK HOSPITAL						
		NTHS ACTUAL FILI	NG					
	FISC	AL YEAR 2013						
	REPORT 175 - HOSPITAL OPERATING EXPE		E CATEGORY AN	D DEPARTMENT				
(1)	(2)	(3)	(4)	(5)	(6)			
(-)		FY 2012	FY 2013	AMOUNT	<u> </u>			
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
4	Dues and Membership	\$711,040	\$784,507	\$73,467	10%			
5	Equipment Leases	\$903,367	\$724,051	(\$179,316)	-20%			
6	Building Leases	\$7,521,313	\$7,207,526	(\$313,787)	-4%			
7	Repairs and Maintenance	\$8,743,648	\$11,189,374	\$2,445,726	28%			
8	Insurance	\$601,453	\$666,132	\$64,679	119			
9	Travel	\$498,587	\$379,432	(\$119,155)	-24%			
10	Conferences	\$30,006	\$30,828	\$822	3%			
11	Property Tax	\$402,746	\$594,192	\$191,446	48%			
12	General Supplies	\$798,970	\$643,660	(\$155,310)	-19%			
13	Licenses and Subscriptions	\$262,006	\$224,341	(\$37,665)	-149			
14	Postage and Shipping	\$298,562	\$225,997	(\$72,565)	-24%			
15	Advertising	\$1,741,055	\$1,525,928	(\$215,127)	-129			
16	Corporate parent/system fees	\$0	\$0	\$0	0%			
17	Computer Software	\$0	\$0	\$0	0%			
18	Computer hardware & small equipment	\$13,054	\$500,396	\$487,342	3733%			
19	Dietary / Food Services	\$173,816	\$184,417	\$10,601	6%			
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%			
21	Billing & Collection / Bank Fees	\$2,238,990	\$1,645,686	(\$593,304)	-26%			
22	Recruiting / Employee Education & Recognition	\$82,433	\$101,834	\$19,401	249			
23	Laundry / Linen	\$0	\$0	\$0	0%			
24	Professional / Physician Fees	\$3,960,765	\$3,989,343	\$28,578	19			
25	Waste disposal	\$83,146	\$66,096	(\$17,050)	-21%			
26	Purchased Services - Medical	\$0	\$0 \$0	\$0	0%			
27	Purchased Services - Non Medical	\$0 \$0	\$0 \$0	\$0 \$0	0%			
28	Other Business Expenses	\$34,313,934	\$33,840,447	(\$473,487)	-19			
	Total Business Expenses	\$73,251,727	\$71,486,501	(\$1,765,226)	-2%			
		<i><i><i>v</i>:<i>v</i>,<i>zv</i>:<i>y</i>:<i>z:</i></i></i>	<i>•••••••••••••••••••••••••••••••••••••</i>	(+ : ,: 00,==0)	_,			
Κ.	Other Operating Expense:							
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%			
		ψ0	ψυ	ψυ				
	Total Operating Expenses - All Expense Categories*	\$361,951,445	\$338,981,125	(\$22,970,320)	-6%			
	*AK.The total operating expenses amount above mus	t agree with the to	tal operating expe	enses amount on R	eport 150			
II.	OPERATING EXPENSE BY DEPARTMENT							
Α.	General Services:							
1	General Administration	\$88,069,359	\$94,249,511	\$6,180,152	7%			
2	General Accounting	\$3,819,925	\$3,391,623	(\$428,302)	-119			
3	Patient Billing & Collection	\$6,014,450	\$4,923,487	(\$1,090,963)	-18%			
4	Admitting / Registration Office	\$1,976,158	\$1,945,928	(\$30,230)	-2%			
5	Data Processing	\$11,636,066	\$12,630,144	\$994,078	99			
6	Communications	\$186,334	\$170,333	(\$16,001)	-99			
7	Personnel	\$4,144,062	\$5,038,613	\$894,551	229			
8	Public Relations	\$3,852,475	\$3,479,778	(\$372,697)	-109			
9	Purchasing	\$1,431,099	\$1,428,342	(\$2,757)	09			
10	Dietary and Cafeteria	\$5,497,126	\$5,922,668	\$425,542	89			
11	Housekeeping	\$4,047,868	\$4,221,783	\$173,915	49			
	Laundry & Linen	\$1,228,526	\$1,280,846	\$52,320	49			
12	Eachary a Einon							
	Operation of Plant	\$4,213,392	\$3,894,299	(\$319,093)	-8%			
12		\$4,213,392 \$1,409,701	\$3,894,299 \$1,391,854	<u>(\$319,093)</u> (\$17,847)	-8% -1%			
12 13	Operation of Plant							

		NORWALK HOSPITAL							
		/E MONTHS ACTUAL FILI	NG						
FISCAL YEAR 2013									
	REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT								
(4)	(2)	(2)	(4)	(5)	(0)				
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	<u>(6)</u> %				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
		ACTUAL	ACTUAL	DITTERENCE	DITTERENCE				
17	Pharmacy Department	\$11,202,142	\$11,316,918	\$114,776	1%				
18	Other General Services	\$11,324,779	\$12,033,949	\$709,170	6%				
	Total General Services	\$167,338,539	\$174,049,422	\$6,710,883	4%				
В.	Professional Services:								
1	Medical Care Administration	\$4,397,936	\$3,905,701	(\$492,235)	-11%				
2	Residency Program	\$5,641,573	\$4,840,127	(\$801,446)	-14%				
3	Nursing Services Administration	\$3,978,631	\$4,566,498	\$587,867	15%				
4	Medical Records	\$2,548,711	\$2,905,119	\$356,408	14%				
5	Social Service	\$3,451,617	\$2,502,103	(\$949,514)	-28%				
6	Other Professional Services	\$970,674	\$936,430	(\$34,244)	-4%				
	Total Professional Services	\$20,989,142	\$19,655,978	(\$1,333,164)	-6%				
C.	Special Services:								
1	Operating Room	\$11,673,608	\$10,804,653	(\$868,955)	-7%				
2	Recovery Room	\$2,383,176	\$2,204,677	(\$178,499)	-7%				
3	Anesthesiology	\$1,471,572	\$1,058,315	(\$413,257)	-28%				
4	Delivery Room	\$3,357,516	\$3,752,523	\$395,007	12%				
5	Diagnostic Radiology	\$15,503,157	\$15,950,008	\$446,851	3%				
6	Diagnostic Ultrasound	\$973,986	\$1,019,469	\$45,483	5%				
7	Radiation Therapy	\$1,433,886	\$1,474,440	\$40,554	3%				
8	Radioisotopes	\$1,040,729	\$941,782	(\$98,947)	-10%				
9	CT Scan	\$1,525,199	\$1,359,926	(\$165,273)	-11%				
10	Laboratory	\$13,347,659	\$13,732,134	\$384,475	3%				
<u>11</u> 12	Blood Storing/Processing Cardiology	\$0 \$0	\$0 \$0	\$0 \$0	<u> </u>				
12	Electrocardiology	\$1,322,079	<del>هو</del> \$1,390,547	\$68,468	5%				
14	Electroencephalography	\$307,979	\$353,600	\$45,621	15%				
15	Occupational Therapy	\$0	\$0	\$0	0%				
16	Speech Pathology	\$0	\$0	\$0	0%				
17	Audiology	\$234,557	\$248,432	\$13,875	6%				
18	Respiratory Therapy	\$2,103,671	\$2,072,335	(\$31,336)	-1%				
19	Pulmonary Function	\$847,815	\$931,626	\$83,811	10%				
20	Intravenous Therapy	\$1,153,483	\$998,380	(\$155,103)	-13%				
21	Shock Therapy	\$0	\$0	\$0	0%				
22	Psychiatry / Psychology Services	\$3,877,312	\$3,771,267	(\$106,045)	-3%				
23	Renal Dialysis	\$762,763	\$697,455	(\$65,308)	-9%				
24	Emergency Room	\$13,434,457	\$14,166,852	\$732,395	5%				
25	MRI	\$1,386,661	\$1,292,110	(\$94,551)	-7%				
26	PET Scan PET/CT Scan	\$465,501	\$367,698 \$0	(\$97,803)	-21%				
<u>27</u> 28	Endoscopy	\$0 \$3,997,649	\$0 \$3,141,834	\$0 (\$855,815)	0% -21%				
20	Sleep Center	\$1,510,038	\$1,410,653	(\$99,385)	-21%				
30	Lithotripsy	\$0	\$0	(\$99,303) \$0	0%				
31	Cardiac Catheterization/Rehabilitation	\$5,582,670	\$5,645,047	\$62,377	1%				
32	Occupational Therapy / Physical Therapy	\$5,370,862	\$5,133,075	(\$237,787)	-4%				
33	Dental Clinic	\$325,308	\$334,647	\$9,339	3%				
34	Other Special Services	\$13,319,827	\$13,688,782	\$368,955	3%				
	Total Special Services	\$108,713,120	\$107,942,267	(\$770,853)	-1%				
D.	Routine Services:								
1	Medical & Surgical Units	\$15,493,337	\$15,185,736	(\$307,601)	-2%				
2	Intensive Care Unit	\$4,960,461	\$4,619,857	(\$340,604)	-7%				
3	Coronary Care Unit	\$5,099,146	\$4,887,068	(\$212,078)	-49				

	IONTHS ACTUAL FILI SCAL YEAR 2013 (PENSES BY EXPENS) (3) FY 2012	E CATEGORY AN	D DEPARTMENT	(6)
REPORT 175 - HOSPITAL OPERATING EX	(PENSES BY EXPENSI	(4)		(6)
(2)	(3)	(4)		(6)
			(5)	(6)
			(5)	(6)
				(0)
SCRIPTION		FY 2013	AMOUNT	%
	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
ychiatric Unit	\$2,291,511	\$2,200,357	(\$91,154)	-49
diatric Unit				-8%
ternity Unit		\$3,493,950		-22%
wborn Nursery Unit	\$128,202	\$123,572	(\$4,630)	-4%
onatal ICU	\$1,996,807	\$1,875,805	(\$121,002)	-6%
habilitation Unit	\$2,016,523	\$1,149,348	(\$867,175)	-43%
hbulatory Surgery	\$1,998,371	\$1,833,240	(\$165,131)	-8%
me Care	\$0	\$0	\$0	0%
tpatient Clinics	\$1,277,265	\$470,551	(\$806,714)	-63%
ner Routine Services	\$0	\$0	\$0	0%
tal Routine Services	\$41,380,167	\$37,333,458	(\$4,046,709)	-10%
her Departments:				
scellaneous Other Departments	\$23,530,477	\$0	(\$23,530,477)	-100%
tal Operating Expenses - All Departments*	\$361,951,445	\$338,981,125	(\$22,970,320)	-6%
- E. The total operating expenses amount above	must agree with the to	otal operating exp	enses amount on F	Report 150.
	diatric Unit ternity Unit wborn Nursery Unit onatal ICU habilitation Unit bulatory Surgery me Care tpatient Clinics her Routine Services tal Routine Services tal Routine Services tal Routine Services tal Operating Expenses - All Departments*	diatric Unit       \$1,621,563         ternity Unit       \$4,496,981         wborn Nursery Unit       \$128,202         onatal ICU       \$1,996,807         habilitation Unit       \$2,016,523         bulatory Surgery       \$1,998,371         me Care       \$0         tpatient Clinics       \$1,277,265         ner Routine Services       \$0         tal Routine Services       \$0         ter Departments:       \$23,530,477         tal Operating Expenses - All Departments*       \$361,951,445	diatric Unit       \$1,621,563       \$1,493,974         ternity Unit       \$4,496,981       \$3,493,950         wborn Nursery Unit       \$128,202       \$123,572         onatal ICU       \$1,996,807       \$1,875,805         habilitation Unit       \$2,016,523       \$11,149,348         bulatory Surgery       \$1,998,371       \$1,833,240         me Care       \$0       \$0         tpatient Clinics       \$1,277,265       \$470,551         ner Routine Services       \$0       \$0         tal Routine Services       \$0       \$0         tal Routine Services       \$23,530,477       \$0         tal Operating Expenses - All Departments*       \$361,951,445       \$338,981,125	diatric Unit       \$1,621,563       \$1,493,974       (\$127,589)         ternity Unit       \$4,496,981       \$3,493,950       (\$1,003,031)         wborn Nursery Unit       \$128,202       \$123,572       (\$4,630)         onatal ICU       \$1,996,807       \$1,875,805       (\$121,002)         habilitation Unit       \$2,016,523       \$1,149,348       (\$867,175)         bulatory Surgery       \$1,998,371       \$1,833,240       (\$165,131)         me Care       \$0       \$0       \$0         tpatient Clinics       \$1,277,265       \$470,551       (\$806,714)         ner Routine Services       \$0       \$0       \$0         tal Routine Services       \$0       \$0       \$0         tal Routine Services       \$0       \$0       \$0         ter Departments:       \$23,530,477       \$0       (\$23,530,477)

	TWELVE MONTHS ACTUAL FILING								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	FY 2013					
Α.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$350,594,448	\$363,267,877	\$334,131,914					
2	Other Operating Revenue	12,324,861	20,310,592	16,843,048					
3	Total Operating Revenue	\$362,919,309	\$383,578,469	\$350,974,962					
4	Total Operating Expenses	338,475,864	361,951,445	338,981,125					
5	Income/(Loss) From Operations	\$24,443,445	\$21,627,024	\$11,993,837					
6	Total Non-Operating Revenue	(658,476)	7,929,614	9,816,666					
7	Excess/(Deficiency) of Revenue Over Expenses	\$23,784,969	\$29,556,638	\$21,810,503					
В.	Profitability Summary								
1	Hospital Operating Margin	6.75%	5.52%	3.32%					
2	Hospital Non Operating Margin	-0.18%	2.03%	2.72%					
3	Hospital Total Margin	6.57%	7.55%	6.05%					
4	Income/(Loss) From Operations	\$24,443,445	\$21,627,024	\$11,993,837					
5	Total Operating Revenue	\$362,919,309	\$383,578,469	\$350,974,962					
6	Total Non-Operating Revenue	(\$658,476)	\$7,929,614	\$9,816,666					
7	Total Revenue	\$362,260,833	\$391,508,083	\$360,791,628					
8	Excess/(Deficiency) of Revenue Over Expenses	\$23,784,969	\$29,556,638	\$21,810,503					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$104,824,797	\$123,000,420	\$207,578,029					
2	Hospital Total Net Assets	\$135,696,801	\$166,692,992	\$247,213,116					
3	Hospital Change in Total Net Assets	\$520,163	\$30,996,191	\$80,520,124					
4	Hospital Change in Total Net Assets %	100.4%	22.8%	48.3%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.39	0.39	0.36					
2	Total Operating Expenses	\$338,475,864	\$361,951,445	\$338,981,125					
3	Total Gross Revenue	\$853,958,106	\$908,958,362	\$913,394,783					
4	Total Other Operating Revenue	\$12,324,861	\$20,310,592	\$16,843,048					

		RWALK HOSPITAL						
	TWELVE MONTHS ACTUAL FILING							
	FISCAL YEAR 2013							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u> </u>	<u>FY 2013</u>				
5	Private Payment to Cost Ratio	1.46	1.40	1.56				
6	Total Non-Government Payments	\$196,641,108	\$201,449,788	\$201,982,906				
7	Total Uninsured Payments	\$1,678,857	\$2,287,281	\$2,853,510				
8	Total Non-Government Charges	\$371,651,515	\$399,177,825	\$384,784,752				
9	Total Uninsured Charges	\$30,213,899	\$35,187,599	\$35,146,642				
10	Medicare Payment to Cost Ratio	0.71	0.67	0.72				
11	Total Medicare Payments	\$98,031,835	\$97,674,768	\$100,509,240				
12	Total Medicare Charges	\$355,210,014	\$373,790,310	\$382,688,495				
13	Medicaid Payment to Cost Ratio	0.65	0.69	0.63				
14	Total Medicaid Payments	\$31,672,208	\$35,580,788	\$33,024,913				
15	Total Medicaid Charges	\$124,697,697	\$133,327,291	\$143,883,340				
16	Uncompensated Care Cost	\$14,840,041	\$16,148,519	\$13,157,867				
17	Charity Care	\$17,327,000	\$17,929,000	\$18,272,000				
18	Bad Debts	\$20,654,069	\$23,530,477	\$17,836,044				
19	Total Uncompensated Care	\$37,981,069	\$41,459,477	\$36,108,044				
20	Uncompensated Care % of Total Expenses	4.4%	4.5%	3.9%				
21	Total Operating Expenses	\$338,475,864	\$361,951,445	\$338,981,125				
E.	Liquidity Measures Summary							
1	Current Ratio	2	2	2				
2	Total Current Assets	\$115,124,348	\$130,253,153	\$117,477,179				
3	Total Current Liabilities	\$53,933,550	\$59,029,167	\$62,423,677				
4	Days Cash on Hand	80	95	94				
5	Cash and Cash Equivalents	\$61,458,676	\$79,838,027	\$73,750,817				
6	Short Term Investments	8,693,538	8,710,885	8,738,868				

	NORWALK								
	TWELVE MONTHS ACTUAL FILING								
		YEAR 2013							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	FY 2012	FY 2013					
7	Total Cash and Short Term Investments	\$70,152,214	\$88,548,912	\$82,489,685					
8	Total Operating Expenses	\$338,475,864	\$361,951,445	\$338,981,125					
9	Depreciation Expense	\$19,041,348	\$20,380,372	\$18,635,476					
10	Operating Expenses less Depreciation Expense	\$319,434,516	\$341,571,073	\$320,345,649					
11	Days Revenue in Patient Accounts Receivable	34	28	24					
12	Net Patient Accounts Receivable	\$37,299,759	\$30,103,755	\$26,795,462					
13	Due From Third Party Payers	\$81,421	\$2,368,715	\$0					
14	Due To Third Party Payers	\$4,525,191	\$4,906,972	\$4,893,626					
45	Total Net Patient Accounts Receivable and Third Party Payer	<b>\$20.055.000</b>	¢07 505 400	¢04.004.000					
15	Activity	\$32,855,989	\$27,565,498	\$21,901,836					
16	Total Net Patient Revenue	\$350,594,448	\$363,267,877	\$334,131,914					
17	Average Payment Period	62	63	71					
18	Total Current Liabilities	\$53,933,550	\$59,029,167	\$62,423,677					
19	Total Operating Expenses	\$338,475,864	\$361,951,445	\$338,981,125					
20	Depreciation Expense	\$19,041,348	\$20,380,372	\$18,635,476					
21	Total Operating Expenses less Depreciation Expense	\$319,434,516	\$341,571,073	\$320,345,649					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	38.8	38.0	45.7					
2	Total Net Assets	\$135,696,801	\$166,692,992	\$247,213,116					
3	Total Assets	\$350,182,523	\$438,956,075	\$540,691,043					
4	Cash Flow to Total Debt Ratio	38.3	44.7	21.9					
5	Excess/(Deficiency) of Revenues Over Expenses	\$23,784,969	\$29,556,638	\$21,810,503					
6	Depreciation Expense	\$19,041,348	\$20,380,372	\$18,635,476					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$42,826,317	\$49,937,010	\$40,445,979					
8	Total Current Liabilities	\$53,933,550	\$59,029,167	\$62,423,677					
9	Total Long Term Debt	\$57,770,819	\$52,744,956	\$122,361,397					
10	Total Current Liabilities and Total Long Term Debt	\$111,704,369	\$111,774,123	\$184,785,074					

	NORWALK HOSPITAL TWELVE MONTHS ACTUAL FILING							
	FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u> </u>	<u> </u>				
11	Long Term Debt to Capitalization Ratio	29.9	24.0	33.1				
12	Total Long Term Debt	\$57,770,819	\$52,744,956	\$122,361,397				
13	Total Net Assets	\$135,696,801	\$166,692,992	\$247,213,116				
14	Total Long Term Debt and Total Net Assets	\$193,467,620	\$219,437,948	\$369,574,513				
15	Debt Service Coverage Ratio	14.3	7.6	2.8				
16	Excess Revenues over Expenses	23,784,969	\$29,556,638	\$21,810,503				
17	Interest Expense	1,450,895	\$2,025,836	\$2,529,391				
18	Depreciation and Amortization Expense	19,041,348	\$20,380,372	\$18,635,476				
19	Principal Payments	1,645,142	\$4,834,597	\$12,900,862				
G.	Other Financial Ratios							
20	Average Age of Plant	14.6	14.4	16.7				
21	Accumulated Depreciation	277,722,033	292,559,901	310,387,551				
22	Depreciation and Amortization Expense	19,041,348	20,380,372	18,635,476				
Н.	Utilization Measures Summary							
1	Patient Days	70,355	67,341	59,611				
2	Discharges	14,878	15,003	13,045				
3	ALOS	4.7	4.5	4.6				
4	Staffed Beds	196	193	168				
5	Available Beds	-	320	334				
6	Licensed Beds	312	366	366				
7	Occupancy of Staffed Beds	98.3%	95.6%	97.2%				
8	Occupancy of Available Beds	61.8%	57.7%	48.9%				
9	Full Time Equivalent Employees	1,698.4	1,698.8	1,685.4				
I.	Hospital Gross Revenue Payer Mix Percentage							
1	Non-Government Gross Revenue Payer Mix Percentage	40.0%	40.0%	38.3%				
2	Medicare Gross Revenue Payer Mix Percentage	41.6%	41.1%	41.9%				

	NORWALK	HOSPITAL						
	TWELVE MONTHS	S ACTUAL FILING						
	FISCAL YEAR 2013 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	FY 2013				
3	Medicaid Gross Revenue Payer Mix Percentage	14.6%	14.7%	15.8%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.2%	0.2%	0.1%				
5	Uninsured Gross Revenue Payer Mix Percentage	3.5%	3.9%	3.8%				
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)	\$341,437,616	\$363,990,226	\$349,638,110				
9	Medicare Gross Revenue (Charges)	\$355,210,014	\$373,790,310	\$382,688,495				
10	Medicaid Gross Revenue (Charges)	\$124,697,697	\$133,327,291	\$143,883,340				
11	Other Medical Assistance Gross Revenue (Charges)	\$1,526,201	\$1,749,102	\$1,235,371				
12	Uninsured Gross Revenue (Charges)	\$30,213,899	\$35,187,599	\$35,146,642				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$872,679	\$913,834	\$802,825				
14	Total Gross Revenue (Charges)	\$853,958,106	\$908,958,362	\$913,394,783				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	59.6%	59.4%	59.3%				
2	Medicare Net Revenue Payer Mix Percentage	30.0%	29.1%	29.9%				
3	Medicaid Net Revenue Payer Mix Percentage	9.7%	10.6%	9.8%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.2%	0.2%	0.0%				
5	Uninsured Net Revenue Payer Mix Percentage	0.5%	0.7%	0.8%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.0%	0.1%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Net Revenue (Payments)	\$194,962,251	\$199,162,507	\$199,129,396				
9	Medicare Net Revenue (Payments)	\$98,031,835	\$97,674,768	\$100,509,240				
10	Medicaid Net Revenue (Payments)	\$31,672,208	\$35,580,788	\$33,024,913				
11	Other Medical Assistance Net Revenue (Payments)	\$502,683	\$660,794	\$156,233				
12	Uninsured Net Revenue (Payments)	\$1,678,857	\$2,287,281	\$2,853,510				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$201,379	\$164,929	\$222,747				
14	Total Net Revenue (Payments)	\$327,049,213	\$335,531,067	\$335,896,039				
К.	Discharges							
1	Non-Government (Including Self Pay / Uninsured)	5,773	5,799	4,907				
2	Medicare	6,008	6,147	5,319				
3	Medical Assistance	3,078	3,042	2,803				
4	Medicaid	3,038	3,002	2,782				
5	Other Medical Assistance	40	40	21				
6	CHAMPUS / TRICARE	19	15	16				

	NOR	WALK HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FI	SCAL YEAR 2013							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2011	<u>FY 2012</u>	<u>FY 2013</u>					
7	Uninsured (Included In Non-Government)	223	267	193					
8	Total	14,878	15,003	13,045					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.04515	1.00310	1.07500					
2	Medicare	1.41103	1.34560	1.44060					
3	Medical Assistance	0.94950	0.93920	0.95943					
4	Medicaid	0.94936	0.93800	0.95902					
5	Other Medical Assistance	0.95995	1.02920	1.01380					
6	CHAMPUS / TRICARE	0.86318	0.84590	1.52850					
7	Uninsured (Included In Non-Government)	1.03169	0.96430	1.06510					
8	Total Case Mix Index	1.17288	1.13031	1.19979					
м.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	9,538	9,699	8,469					
2	Emergency Room - Treated and Discharged	40,107	39,550	39,838					
3	Total Emergency Room Visits	49,645	49,249	48,307					

	NORWA				
		THS ACTUAL FILING			
		L YEAR 2013			
	REPORT 200 - HOSPITAL ME			,	
(1)	(2)	(3)	(4)	(5)	(6)
(1)	( <del>2</del> /	FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
		, torone	//oro//2	DITTERENCE	DITTERENCE
I.	MEDICARE MANAGED CARE				
1.					
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$1,932,032	\$835,349	(\$1,096,683)	-57%
	Inpatient Payments	\$554,144	\$217,812	(\$336,332)	-61%
3	Outpatient Charges	\$1,182,625	\$524,571	(\$658,054)	-56%
4	Outpatient Payments	\$289,988	\$100,573	(\$189,415)	-65%
5	Discharges	54	23	(31)	-57%
	Patient Days	253	101	(152)	-60%
	Outpatient Visits (Excludes ED Visits)	485	195	(102)	-60%
	Emergency Department Outpatient Visits	52	46	(6)	-12%
	Emergency Department Inpatient Admissions	48	22	(26)	-54%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,114,657	\$1,359,920	(\$1,754,737)	-56%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$844,132	\$318,385	(\$525,747)	-62%
		ψ0-ττ, 102	Ψ <b>0</b> 1 0,000	(₩0±0,1+1)	JZ /0
В.	CIGNA HEALTHCARE				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	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%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$3,151,612	\$4,488,965	\$1,337,353	42%
2	Inpatient Payments	\$960,030	\$1,163,089	\$203,059	21%
3	Outpatient Charges	\$2,502,539	\$3,223,188	\$720,649	29%
4	Outpatient Payments	\$565,028	\$667,344	\$102,316	18%
5	Discharges	74	105	31	42%
	Patient Days	417	576	159	38%
	Outpatient Visits (Excludes ED Visits)	1,147	1,421	274	24%
	Emergency Department Outpatient Visits	114	125	11	10%
9	Emergency Department Inpatient Admissions	63	94	31	49%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,654,151	\$7,712,153	\$2,058,002	36%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,525,058	\$1,830,433	\$305,375	20%
D.	HEALTHNET OF CONNECTICUT		-	-	
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	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%

		THS ACTUAL FILING			
		L YEAR 2013		,	
	REPORT 200 - HOSPITAL ME	DICARE MANAGED C	CARE ACTIVITY		
(1)	(2)	(2)	(4)	(5)	(6)
(1)	(2)	(3) FY 2012	(4) FY 2013	AMOUNT	<u>(6)</u> %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
Ε.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$1,713,274	\$1,678,232	(\$35,042)	-2%
2	Inpatient Payments	\$554,115	\$396,694	(\$157,421)	-28%
3	Outpatient Charges	\$1,371,152	\$1,045,204	(\$325,948)	-24%
4	Outpatient Payments	\$286,126	\$196,779	(\$89,347)	-31%
5	Discharges	55	37	(18)	-33%
6	Patient Days	257	223	(34)	-13%
7	Outpatient Visits (Excludes ED Visits)	654	463	(191)	-29%
8	Emergency Department Outpatient Visits	93	94	1	1%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	50	23	(27) (\$360,990)	-54% - <b>12%</b>
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,084,426 \$840,241	\$2,723,436		-12%
	TOTAL INPATIENT & OUTPATIENT PATMENTS	\$040, <b>∠</b> 41	\$593,473	(\$246,768)	-29%
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANT	AGE			
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0 \$0	0%
3	Outpatient Charges	\$17,782	\$0	(\$17,782)	-100%
4	Outpatient Payments	\$4,966	\$0	(\$4,966)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	7	0	(7)	-100%
8	Emergency Department Outpatient Visits	2	0	(2)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$17,782	\$0	(\$17,782)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,966	\$0	(\$4,966)	-100%
	UNITED HEALTHCARE INSURANCE COMPANY				
<u>G.</u> 1	Inpatient Charges	¢17,642,072	\$19,425,260	¢1 700 107	100/
2	Inpatient Charges	\$17,643,073 \$4,620,018	\$5,269,035	\$1,782,187 \$649,017	<u> </u>
3	Outpatient Charges	\$8,743,105	\$10,101,925	\$1,358,820	16%
4	Outpatient Payments	\$2,077,367	\$2,067,819	(\$9,548)	0%
5	Discharges	412	389	(43,540)	-6%
6	Patient Days	2,343	2,421	78	3%
7	Outpatient Visits (Excludes ED Visits)	4,228	4,482	254	6%
1				86	22%
8	Emergency Department Outpatient Visits	397	483	00	
-	Emergency Department Outpatient Visits	397	<u>483</u> 336	(30)	-8%
8					
8	Emergency Department Inpatient Admissions	366	336	(30)	12%
8 9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	366 <b>\$26,386,178</b>	336 <b>\$29,527,185</b>	(30) <b>\$3,141,007</b>	12%
8 9 H.	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT	366 \$26,386,178 \$6,697,385	336 <b>\$29,527,185</b> <b>\$7,336,854</b>	(30) \$3,141,007 \$639,469	12% 10%
8 9 H. 1	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges	366 \$26,386,178 \$6,697,385 \$248,473	336 <b>\$29,527,185</b> <b>\$7,336,854</b> \$335,454	(30) \$3,141,007 \$639,469 \$86,981	12% 10% 35%
8 9 H. 1 2	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361	(30) \$3,141,007 \$639,469 \$86,981 \$86,981 \$8,980	12% 10% 35% 10%
8 9 H. 1 2 3	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487	(30) \$3,141,007 \$639,469 \$86,981 \$8,980 \$543,710	12% 10% 35% 10% 540%
8 9 H. 1 2 3 4	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248	336 <b>\$29,527,185</b> <b>\$7,336,854</b> \$335,454 \$101,361 \$644,487 \$132,721	(30) \$3,141,007 \$639,469 \$86,981 \$8,980 \$543,710 \$109,473	12% 10% 35% 10% 540% 471%
8 9 H. 1 2 3 4 5	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248 6	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487 \$132,721 16	(30) \$3,141,007 \$639,469 \$86,981 \$8,980 \$543,710 \$109,473 10	12% 10% 35% 10% 540% 471% 167%
8 9 H. 1 2 3 4 5 6	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248 6 26	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487 \$132,721 16 37	(30) \$3,141,007 \$639,469 \$86,981 \$8,980 \$543,710 \$109,473 10 11	12% 10% 35% 10% 540% 471% 167% 42%
8 9 H. 1 2 3 4 5 6 7	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days Outpatient Visits (Excludes ED Visits)	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248 6 26 61	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487 \$132,721 16 37 186	(30) \$3,141,007 \$639,469 \$86,981 \$8,980 \$543,710 \$109,473 10 11 125	12% 10% 35% 10% 540% 471% 167% 42% 205%
8 9 H. 1 2 3 4 5 6 6 7 8	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248 6 26	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487 \$132,721 16 37 186 71	(30) \$3,141,007 \$639,469 \$86,981 \$88,980 \$543,710 \$109,473 10 11 125 52	12% 10% 35% 10% 540% 471% 167% 42% 205% 274%
8 9 H. 1 2 3 4 5 6 7	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248 6 26 61 19 3	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487 \$132,721 16 37 186 71 15	(30) \$3,141,007 \$639,469 \$86,981 \$88,980 \$543,710 \$109,473 10 11 125 52 12	
8 9 H. 1 2 3 4 5 6 6 7 8	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS WELLCARE OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days Outpatient Visits (Excludes ED Visits) Emergency Department Outpatient Visits	366 \$26,386,178 \$6,697,385 \$248,473 \$92,381 \$100,777 \$23,248 6 26 61 19	336 \$29,527,185 \$7,336,854 \$335,454 \$101,361 \$644,487 \$132,721 16 37 186 71	(30) \$3,141,007 \$639,469 \$86,981 \$88,980 \$543,710 \$109,473 10 11 125 52	12% 10% 35% 10% 540% 471% 167% 42% 205% 274%

NORWALK HOSPITAL	NORWAL	кно	OSPIT	ſAL
------------------	--------	-----	-------	-----

		ALK HOSPITAL			
		L YEAR 2013	1		
	REPORT 200 - HOSPITAL ME		CARE ACTIVITY	,	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
		i [		i i	
1	Inpatient Charges	\$1,146,001	\$2,916,238	\$1,770,237	154%
2	Inpatient Payments	\$271,600	\$722,974	\$451,374	166%
3	Outpatient Charges	\$586,187	\$1,896,209	\$1,310,022	223%
4	Outpatient Payments	\$153,498	\$401,569	\$248,071	162%
5	Discharges	30 174	<u>63</u> 346	33 172	110%
6	Patient Days Outpatient Visits (Excludes ED Visits)	243	<u> </u>	550	99% 226%
8	Emergency Department Outpatient Visits	36	66	30	83%
9	Emergency Department Inpatient Admissions	25	52	27	108%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,732,188	\$4,812,447	\$3,080,259	178%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$425,098	\$1,124,543	\$699,445	165%
		φ <del>1</del> 23,090	φ1,124, <b>3</b> 43	\$033,443	105 /8
J.	HUMANA				
1	Inpatient Charges	\$686,976	\$56,122	(\$630,854)	-92%
2	Inpatient Payments	\$179,323	\$6,931	(\$172,392)	-96%
3	Outpatient Charges	\$123,301	\$134,892	\$11,591	9%
4	Outpatient Payments	\$31,110	\$24,227	(\$6,883)	-22%
5	Discharges	11	1	(10)	-91%
6	Patient Days	83	9	(74)	-89%
7	Outpatient Visits (Excludes ED Visits)	37	33	(4)	-11%
8	Emergency Department Outpatient Visits	17	15	(2)	-12%
9	Emergency Department Inpatient Admissions	10	11	1	10%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$810,277	\$191,014	(\$619,263)	-76%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$210,433	\$31,158	(\$179,275)	-85%
К.	SECURE HORIZONS				
1 1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
3	Outpatient Charges	\$0	<u>\$0</u>	\$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%
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 Outpatient Visits (Excludes ED Visits)	0	0	0	0% 0%
8	Emergency Department Outpatient Visits	0	0	0	0%
8	Emergency Department Inpatient Admissions	0	0	0	0%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0		\$0 \$0	0%
<u> </u>		Ψ	ΨŪ	Ψ	0 /0
Μ.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

		K HOSPITAL			
		IS ACTUAL FILING	i		
		YEAR 2013			
	REPORT 200 - HOSPITAL MEDI	CARE MANAGED C	CARE ACTIVITY	,	
		(2)	<i></i>	(-)	(0)
(1)	(2)	(3)	(4)	(5)	(6)
	DECODIDITION	FY 2012	FY 2013	AMOUNT	
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	Outratient Oberges	¢0.	<u> </u>	<b>^</b>	00
3 4	Outpatient Charges	\$0 \$0	<u>\$0</u> \$0	\$0 \$0	09
-	Outpatient Payments	· · ·			
5	Discharges	0	0	0	0% 0%
6 7	Patient Days	0	0	0	
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
Э	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	<b>\$0</b>	0 <b>\$0</b>	<b>\$0</b>	0% 0%
		\$0			
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	Ο¢	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$454,960	\$610,479	\$155,519	349
2	Inpatient Payments	\$147,480	\$131,934	(\$15,546)	-119
3	Outpatient Charges	\$166,118	\$93,597	(\$72,521)	-449
4	Outpatient Payments	\$35,934	\$36,485	\$551	29
5	Discharges	φ00,004 11	<u>430,403</u> 9	(2)	-18%
6	Patient Days	66	79	13	20%
7	Outpatient Visits (Excludes ED Visits)	68	15	(53)	-789
8	Emergency Department Outpatient Visits	6	4	(33)	-33%
9	Emergency Department Inpatient Admissions	9	9	0	0%
0	TOTAL INPATIENT & OUTPATIENT CHARGES	\$621,078	\$704,076	\$82,998	139
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$183,414	\$168,419	(\$14,995)	
		¥105,414	φ100, <del>4</del> 13	(\$14,333)	-07
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$26,976,401	\$30,346,099	\$3,369,698	129
	TOTAL INPATIENT PAYMENTS	\$7,379,091	\$8,009,830	\$630,739	99
	TOTAL OUTPATIENT CHARGES	\$14,793,586	\$17,664,073	\$2,870,487	199
	TOTAL OUTPATIENT PAYMENTS	\$3,467,265	\$3,627,517	\$160,252	59
	TOTAL DISCHARGES	653	643	(10)	
	TOTAL PATIENT DAYS	3,619	3,792	173	55
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	6,930	7,588	658	9
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT		•		
	VISITS	736	904	168	23
	TOTAL EMERGENCY DEPARTMENT INPATIENT				
	ADMISSIONS	574	562	(12)	-2
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$41,769,987	\$48,010,172	\$6,240,185	15
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$10,846,356	\$11,637,347	\$790,991	79

		IONTHS ACTUAL FI	LING		
	REPORT 250 - HOSPITAL		ED CARE ACTIVI	ГҮ	1
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
۹.	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 7	Patient Days Outpatient Visits (Excludes ED Visits)	0	0	0	0% 0%
8	Emergency Department Outpatient Visits	0	0	0	07
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%
в.	COMMUNITY HEALTH NETWORK OF CT				
1	Inpatient Charges	\$2,010,172	\$0	(\$2,010,172)	-100%
2	Inpatient Payments	\$503,767	\$0	(\$503,767)	-100%
3	Outpatient Charges	\$4,057,601	\$0	(\$4,057,601)	
4	Outpatient Payments	\$716,724	\$0	(\$716,724)	
5	Discharges	124	0	(124)	
6	Patient Days	291	0	(291)	
7	Outpatient Visits (Excludes ED Visits)	2,163	0	(2,163)	-100%
8 9	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	984 55	0	<u>(984)</u> (55)	
9	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,067,773	<b>\$0</b>	(\$6,067,773)	
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,220,491	\$0 \$0	(\$1,220,491)	-100
<b>)</b> .	HEALTHNET OF THE NORTHEAST, INC.				
<del>ر</del> 1	Inpatient Charges	\$0	\$0	\$0	00
2	Inpatient Payments	\$0	\$0	\$0	00
3	Outpatient Charges	\$0	\$0	\$0	09
4	Outpatient Payments	\$0	\$0	\$0	00
5	Discharges	0	0	0	00
6	Patient Days	0	0	0	00
7	Outpatient Visits (Excludes ED Visits)	0	0	0	00
8	Emergency Department Outpatient Visits	0	0	0	00
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0 \$0	\$0 \$0	\$0 \$0	00
	TOTAL INFATIENT & OUTFATIENT FATWENTS	φU	<b>\$</b> 0	<b>Φ</b> 0	0
).	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$2,274,677	\$0	(\$2,274,677)	
2	Inpatient Payments	\$395,173	\$0	(\$395,173)	
3	Outpatient Charges	\$1,654,096	\$0	(\$1,654,096)	
4	Outpatient Payments	\$367,546	\$0	(\$367,546)	
5	Discharges	73	0	(73)	
6	Patient Days	350	0	(350)	
7	Outpatient Visits (Excludes ED Visits)	1,056	0	(1,056)	
8	Emergency Department Outpatient Visits	351	0	(351) (16)	
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	16 <b>\$3,928,773</b>	<b>\$0</b>	(16) (\$3,928,773)	

NORWALK	HOSPITAL

	NOR				
		ONTHS ACTUAL FIL	ING		
	FI	SCAL YEAR 2013			
	REPORT 250 - HOSPITAL	MEDICAID MANAGE	ED CARE ACTIVI	ΓY	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMÒÚNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$762,719	\$0	(\$762,719)	-100%
-					
<b>E.</b> 1	WELLCARE OF CONNECTICUT Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	09
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, PREFERRED				
<b>F.</b> 1	ONE Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	09
2	Outpatient Charges	\$0	\$0 \$0	\$0	09
<u> </u>	Outpatient Charges	\$0 \$0	\$0 \$0		09
4 5	Discharges	<del>پ</del> 0	<del>پ0</del> 0	00	09
5 6	Patient Days	0	0	0	09
7	Outpatient Visits (Excludes ED Visits)	0	0	0	09
8	Emergency Department Outpatient Visits	0	0	0	09
9	Emergency Department Inpatient Admissions	0	0	0	09
9	TOTAL INPATIENT & OUTPATIENT CHARGES	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	09
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0 \$0	0%
G.	UNITED HEALTHCARE				
<u>0.</u> 1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	09
3	Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	09
4	Outpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0%
5	Discharges	φ0 0	0 0	0	09
6	Patient Days	0	0	0	09
7	Outpatient Visits (Excludes ED Visits)	0	0	0	09
8	Emergency Department Outpatient Visits	0	0	0	09
9	Emergency Department Inpatient Admissions	0	0	0	0%
0	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
ц	AETNA				
<u>н.</u> 1	Inpatient Charges	\$945,104	\$0	(\$945,104)	-1009
2	Inpatient Charges	\$193,547	\$0 \$0	(\$945,104) (\$193,547)	-1009
2	Outpatient Charges	\$193,547	\$0 \$0	(\$827,532)	-1009
4	Outpatient Charges	\$182,945	\$0 \$0	(\$182,945)	-1009
4 5	Discharges	47	<del>پ0</del>	(\$162,945)	-1009
6	Patient Days	153	0	(153)	-100%
7	Outpatient Visits (Excludes ED Visits)	372	0	(372)	-100
8	Emergency Department Outpatient Visits	191	0	(191)	-1009
<u> </u>	Emergency Department Inpatient Admissions	23	0	(191)	-1009
J	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,772,636	<b>\$0</b>	(\$1,772,636)	-1009
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$376,492	\$0 \$0	(\$376,492)	

	NOR	WALK HOSPITAL			
	TWELVE M	ONTHS ACTUAL F	ILING		
	F	ISCAL YEAR 2013			
	REPORT 250 - HOSPITAL	MEDICAID MANAG	SED CARE ACTIVI	ТҮ	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$5,229,953	\$0	(\$5,229,953)	-100%
	TOTAL INPATIENT PAYMENTS	\$1,092,487	\$0	(\$1,092,487)	-100%
	TOTAL OUTPATIENT CHARGES	\$6,539,229	\$0	(\$6,539,229)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$1,267,215	\$0	(\$1,267,215)	-100%
	TOTAL DISCHARGES	244	0	(244)	-100%
	TOTAL PATIENT DAYS	794	0	(794)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	3,591	0	(3,591)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	1,526	0	(1,526)	-100%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	94	0	(94)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,769,182	\$0	(\$11,769,182)	
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,359,702	\$0	(\$2,359,702)	-100%

		.K HEALTH SERVICES /ELVE MONTHS ACTU						
TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION								
		FY 2012	FY 2013	AMOUNT	%			
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
I.	ASSETS							
Α.	Current Assets:							
1	Cash and Cash Equivalents	\$85,492,679	\$82,407,195	(\$3,085,484)	-4%			
2	Short Term Investments	\$45,487,085	\$33,656,759	(\$11,830,326)	-26%			
	Accounts Receivable (Less: Allowance for		····	(+,,				
3	Doubtful Accounts)	\$32,330,519	\$28,873,592	(\$3,456,927)	-11%			
4	Current Assets Whose Use is Limited for Current Liabilities	\$278,083	\$0	(\$278,083)	-100%			
5	Due From Affiliates	\$0	\$0	\$0	0%			
6	Due From Third Party Payers	\$2,368,715	\$0	(\$2,368,715)	-100%			
7	Inventories of Supplies	\$2,568,063	\$2,717,050	\$148,987	6%			
8	Prepaid Expenses	\$2,373,762	\$1,589,839	(\$783,923)	-33%			
9	Other Current Assets	\$4,508,486	\$6,865,383	\$2,356,897	52%			
	Total Current Assets	\$175,407,392	\$156,109,818	(\$19,297,574)	-11%			
В.	Noncurrent Assets Whose Use is Limited:							
1	Held by Trustee	\$2,366,125	\$59,708,986	\$57,342,861	2423%			
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%			
3	Funds Held in Escrow	\$0	\$0	\$0	0%			
4	Other Noncurrent Assets Whose Use is Limited	\$2,450,281	\$327	(\$2,449,954)	-100%			
	Total Noncurrent Assets Whose Use is			<b>AF</b> / <b>AAA</b>				
	Limited:	\$4,816,406	\$59,709,313	\$54,892,907	1140%			
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%			
6	Long Term Investments	\$104,476,656	\$158,419,428	\$53,942,772	52%			
7	Other Noncurrent Assets	\$59,332,269	\$59,228,366	(\$103,903)	0%			
C.	Net Fixed Assets:							
1	Property, Plant and Equipment	\$424,678,503	\$440,926,532	\$16,248,029	4%			
2	Less: Accumulated Depreciation	\$293,885,243	\$312,199,270	\$18,314,027	\$0			
	Property, Plant and Equipment, Net	\$130,793,260	\$128,727,262	(\$2,065,998)	-2%			
3	Construction in Progress	\$8,602,012	\$34,252,962	\$25,650,950	298%			
-	Total Net Fixed Assets	\$139,395,272	\$162,980,224	\$23,584,952	17%			
	Total Assets	\$483,427,995	\$596,447,149	\$113,019,154	23%			
١١.	LIABILITIES AND NET ASSETS							
Α.	Current Liabilities:							

	NOR	WALK HEALTH SERVICES	CORPORATION					
		TWELVE MONTHS ACTU	AL FILING					
	FISCAL YEAR 2013							
	REPORT 300 - PARENT CO	RPORATION CONSOLIDA	TED BALANCE SHE	ET INFORMATION				
(1)	(3) FY 2012	(4) (5) FY 2013 AMOUNT	AMOUNT	(6) %				
<u>LINE</u>	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
1	Accounts Payable and Accrued Expenses	\$27,132,332	\$31,050,734	\$3,918,402	14%			
2	Salaries, Wages and Payroll Taxes	\$20,982,422	\$26,011,309	\$5,028,887	24%			
3	Due To Third Party Payers	\$5,022,080	\$5,008,734	(\$13,346)	0%			
4	Due To Affiliates	\$0	\$0	\$0	0%			
5	Current Portion of Long Term Debt	\$3,820,000	\$3,265,000	(\$555,000)	-15%			
6	Current Portion of Notes Payable	\$1,854,419	\$1,925,534	\$71,115	4%			
7	Other Current Liabilities	\$1,056,636	\$1,101,735	\$45,099	4%			
	Total Current Liabilities	\$59,867,889	\$68,363,046	\$8,495,157	14%			
В.	Long Term Debt:							
1	Bonds Payable (Net of Current Portion)	\$48,574,999	\$119,435,000	\$70,860,001	146%			
2	Notes Payable (Net of Current Portion)	\$7,521,400	\$5,595,298	(\$1,926,102)	-26%			
	Total Long Term Debt	\$56,096,399	\$125,030,298	\$68,933,899	123%			
3	Accrued Pension Liability	\$64,741,651	\$13,061,730	(\$51,679,921)	-80%			
4	Other Long Term Liabilities	\$98,583,332	\$97,627,328	(\$956,004)	-1%			
	Total Long Term Liabilities	\$219,421,382	\$235,719,356	\$16,297,974	7%			
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%			
C.	Net Assets:							
1	Unrestricted Net Assets or Equity	\$147,589,726	\$239,539,585	\$91,949,859	62%			
2	Temporarily Restricted Net Assets	\$47,103,146	\$43,370,310	(\$3,732,836)	-8%			
3	Permanently Restricted Net Assets	\$9,445,852	\$9,454,852	\$9,000	0%			
	Total Net Assets	\$204,138,724	\$292,364,747	\$88,226,023	43%			
	Total Liabilities and Net Assets	\$483,427,995	\$596,447,149	\$113,019,154	23%			

	NORWALK HEAL	TH SERVICES COR	PORATION		
		IONTHS ACTUAL FI	LING		
		SISCAL YEAR 2013			
(4)	REPORT 350 - PARENT CORPORATION CON				
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
<u>LINE</u>	DESCRIPTION	ACTUAL	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$961,852,662	\$979,538,787	\$17,686,125	2%
2	Less: Allowances	\$555,261,117	\$577,711,522	\$22,450,405	4%
3	Less: Charity Care	\$17,929,000	\$18,272,000	\$343,000	2%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$388,662,545	\$383,555,265	(\$5,107,280)	-1%
5	Provision for Bad Debts	\$0	\$18,754,828	\$18,754,828	0%
	Net Patient Service Revenue less provision for bad debts	\$388,662,545	\$364,800,437	(\$23,862,108)	-6%
<u> </u>					
6	Other Operating Revenue	\$18,207,098	\$15,543,696	(\$2,663,402)	-15%
7	Net Assets Released from Restrictions	\$5,341,417	\$3,450,936	(\$1,890,481)	-35%
	Total Operating Revenue	\$412,211,060	\$383,795,069	(\$28,415,991)	-7%
в.	Operating Expenses:				
1	Salaries and Wages	\$157,810,131	\$164,801,605	\$6,991,474	4%
2	Fringe Benefits	\$52,400,162	\$56,875,510	\$4,475,348	9%
3	Physicians Fees	\$8,163,443	\$8,321,347	\$157,904	2%
4	Supplies and Drugs	\$38,780,255	\$39,003,388	\$223,133	1%
5	Depreciation and Amortization	\$20,774,884	\$19,123,385	(\$1,651,499)	-8%
6	Bad Debts	\$22,763,777	\$0	(\$22,763,777)	-100%
7	Interest Expense	\$2,273,303	\$2,695,815	\$422,512	19%
8	Malpractice Insurance Cost	\$8,984,043	\$7,265,774	(\$1,718,269)	-19%
9	Other Operating Expenses	\$80,162,424	\$71,673,327	(\$8,489,097)	-11%
	Total Operating Expenses	\$392,112,422	\$369,760,151	(\$22,352,271)	-6%
	Income/(Loss) From Operations	\$20,098,638	\$14,034,918	(\$6,063,720)	-30%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,275,016	\$2,307,725	\$1,032,709	81%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$945,589)	(\$246,698)	\$698,891	-74%
	Total Non-Operating Revenue	\$329,427	\$2,061,027	\$1,731,600	526%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$20,428,065	\$16,095,945	(\$4,332,120)	-21%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$6,210,984	\$10,016,229	\$3,805,245	61%

		LTH SERVICES COR MONTHS ACTUAL FI			
		FISCAL YEAR 2013			
	<b>REPORT 350 - PARENT CORPORATION CON</b>		MENT OF OPERA	TIONS INFORMATI	ON
(1)	(2)	(3) FY 2012	(4) FY 2013	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	(\$283,937)	(\$1,345,837)	(\$1,061,900)	374%
	Total Other Adjustments	\$5,927,047	\$8,670,392	\$2,743,345	46%
	Excess/(Deficiency) of Revenue Over Expenses	\$26,355,112	\$24,766,337	(\$1,588,775)	-6%

	NORWALK HEALTH SERV			
	REPORT 385 - PARENT CORPORATION CONS	SOLIDATED FINANCIAL D	ATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$374,982,882	\$388,662,545	\$364,800,437
2	Other Operating Revenue	23,390,919	23,548,515	18,994,632
3	Total Operating Revenue	\$398,373,801	\$412,211,060	\$383,795,069
4	Total Operating Expenses	382,748,783	392,112,422	369,760,151
5	Income/(Loss) From Operations	\$15,625,018	\$20,098,638	\$14,034,918
6	Total Non-Operating Revenue	(4,026,811)	6,256,474	10,731,419
7	Excess/(Deficiency) of Revenue Over Expenses	\$11,598,207	\$26,355,112	\$24,766,337
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	3.96%	4.80%	3.56%
2	Parent Corporation Non-Operating Margin	-1.02%	1.50%	2.72%
3	Parent Corporation Total Margin	2.94%	6.30%	6.28%
4	Income/(Loss) From Operations	\$15,625,018	\$20,098,638	\$14,034,918
5	Total Operating Revenue	\$398,373,801	\$412,211,060	\$383,795,069
6	Total Non-Operating Revenue	(\$4,026,811)	\$6,256,474	\$10,731,419
7	Total Revenue	\$394,346,990	\$418,467,534	\$394,526,488
8	Excess/(Deficiency) of Revenue Over Expenses	\$11,598,207	\$26,355,112	\$24,766,337
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$126,940,368	\$147,589,726	\$239,539,585
2	Parent Corporation Total Net Assets	\$169,919,697	\$204,138,724	\$292,364,747
3	Parent Corporation Change in Total Net Assets	(\$4,775,433)	\$34,219,027	\$88,226,023
4	Parent Corporation Change in Total Net Assets %	97.3%	20.1%	43.2%
D.	Liquidity Measures Summary			
1	Current Ratio	2.41	2.93	2.28
2	Total Current Assets	\$162,996,642	\$175,407,392	\$156,109,818
3	Total Current Liabilities	\$67,582,092	\$59,867,889	\$68,363,046

	TWELVE MONTHS			
	REPORT 385 - PARENT CORPORATION COI	NSOLIDATED FINANCIAL	DATA ANALISIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
4	Days Cash on Hand	117	129	121
5	Cash and Cash Equivalents	\$77,594,791	\$85,492,679	\$82,407,195
6	Short Term Investments	\$38,584,167	\$45,487,085	\$33,656,759
7	Total Cash and Short Term Investments	\$116,178,958	\$130,979,764	\$116,063,954
8	Total Operating Expenses	\$382,748,783	\$392,112,422	\$369,760,151
9	Depreciation Expense	\$19,689,489	\$20,774,884	\$19,123,385
10	Operating Expenses less Depreciation Expense	\$363,059,294	\$371,337,538	\$350,636,766
11	Days Revenue in Patient Accounts Receivable	33	28	24
12	Net Patient Accounts Receivable	\$ 38,601,542	\$ 32,330,519	\$ 28,873,592
13	Due From Third Party Payers	\$81,421	\$2,368,715	\$0
14	Due To Third Party Payers	\$4,640,299	\$5,022,080	\$5,008,734
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 34,042,664	\$ 29,677,154	\$ 23,864,858
16	Total Net Patient Revenue	\$374,982,882	\$388,662,545	\$364,800,437
17	Average Payment Period	68	59	71
18	Total Current Liabilities	\$67,582,092	\$59,867,889	\$68,363,046
19	Total Operating Expenses	\$382,748,783	\$392,112,422	\$369,760,151
20	Depreciation Expense	\$19,689,489	\$20,774,884	\$19,123,385
20	Total Operating Expenses less Depreciation Expense	\$363,059,294	\$371,337,538	\$350,636,766
_	Calvanas Maaassa Communati			
E.	Solvency Measures Summary			
1	Equity Financing Ratio	39.4	42.2	49.0
2	Total Net Assets	\$169,919,697	\$204,138,724	\$292,364,747
3	Total Assets	\$431,464,740	\$483,427,995	\$596,447,149
4	Cash Flow to Total Debt Ratio	24.2	40.6	22.7
5	Excess/(Deficiency) of Revenues Over Expenses	\$11,598,207	\$26,355,112	\$24,766,337

	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR REPORT 385 - PARENT CORPORATION CONSO								
	REFORT 303 - FARENT CORFORATION CONSO	LIDATED FINANCIAL D	ATA ANAL 1515						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>					
6	Depreciation Expense	\$19,689,489	\$20,774,884	\$19,123,385					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$31,287,696	\$47,129,996	\$43,889,722					
8	Total Current Liabilities	\$67,582,092	\$59,867,889	\$68,363,046					
9	Total Long Term Debt	\$61,717,853	\$56,096,399	\$125,030,298					
10	Total Current Liabilities and Total Long Term Debt	\$129,299,945	\$115,964,288	\$193,393,344					
11	Long Term Debt to Capitalization Ratio	26.6	21.6	30.0					
12	Total Long Term Debt	\$61,717,853	\$56,096,399	\$125,030,298					
13	Total Net Assets	\$169,919,697	\$204,138,724	\$292,364,747					
14	Total Long Term Debt and Total Net Assets	\$231,637,550	\$260,235,123	\$417,395,045					

			NO	RWALK HOSPITA	AL I		
				MONTHS ACTUA			
	FISCAL YEAR 2013						
		REPORT 40	PARTMENT				
(1) (2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
(-)	(0)	(eu)	(02)	(.)	(0)	OCCUPANCY	OCCUPANCY
	PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE DESCRIPTION	DAYS	CU/CCU # PATIEN		BEDS (A)	BEDS	BEDS (A)	BEDS
1 Adult Medical/Surgical	31,337	8,905	7,137	86	155	99.8%	55.4%
2 ICU/CCU (Excludes Neonatal ICU)	12,009	1,782	0	33	49	99.7%	67.1%
3 Psychiatric: Ages 0 to 17	10	1	1	1	1	2.7%	2.7%
4 Psychiatric: Ages 18+	3,194		473	9	19	97.2%	46.1%
TOTAL PSYCHIATRIC	3,204		474	10	20	87.8%	43.9%
5 Rehabilitation	2,295	202	168	7	25	89.8%	25.2%
6 Maternity	4,328	1,478	1,475	12	32	98.8%	37.1%
7 Newborn	3,318	1,298	1,293	10	20	90.9%	45.5%
8 Neonatal ICU	2,018	167	0	6	16	92.1%	34.6%
9 Pediatric	1,102	522	518	4	17	75.5%	17.8%
10 Other	0	0	0	0	0	0.0%	0.0%
TOTAL EXCLUDING NEWBORN	56,293	11,747	9,772	158	314	97.6%	49.1%
TOTAL INPATIENT BED UTILIZATION	59,611	13,045	11,065	168	334	97.2%	48.9%
TOTAL INPATIENT REPORTED YEAR	59,611	13,045	11,065	168	334	97.2%	48.9%
TOTAL INPATIENT PRIOR YEAR	67,341		12,632	193	320	95.6%	57.7%
DIFFERENCE #: REPORTED VS. PRIOR YEAR	-7,730	-1,958	-1,567	-25	14	1.6%	-8.8%
DIFFERENCE %: REPORTED VS. PRIOR YEAR	-11%	-13%	-12%	-13%	4%	2%	-15%
Total Licensed Beds and Bassinets	366						
(A) This number may not exceed the number of avail	able beds for eac	ch department or in t	otal.				
Note: Total discharges do not include ICU/CCU patie	nts.						

		RWALK HOSPITAL			
		MONTHS ACTUAL FIL	ING		
	REPORT 450 - HOSPITAL INPATIENT AND	ISCAL YEAR 2013		ZATION AND FTES	
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
A.	CT Scans (A)				
1	Inpatient Scans	8,135	7,458	-677	-8%
	Outpatient Scans (Excluding Emergency Department	,	,		
2	Scans)	12,900	11,858	-1,042	-8%
	Emergency Department Scans	6,548	8,560	2,012	31%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	27,583	27,876	293	19
В.	MRI Scans (A)				
1	Inpatient Scans	1,174	1,072	-102	-9%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	10,408	10,362	-46	0%
3	Emergency Department Scans	284	197	-87	-31%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	11,866	11,631	-235	-2%
C.	PET Scans (A)				
1	Inpatient Scans	1	1	0	0%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	568	480	-88	-15%
	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	569	481	-88	-15%
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	0	0	0	0%
	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	e scans, the Hospital	must obtain the fis	cal year	
	volume of each of these types of scans from the	primary provider of th	e scans.		
E.	Linear Accelerator Procedures				
1	Inpatient Procedures	339	182	-157	-46%
2	Outpatient Procedures	6,978	7,362	384	6%
	Total Linear Accelerator Procedures	7,317	7,544	227	39
F.	Cardiac Catheterization Procedures				
<u>г.</u> 1	Inpatient Procedures	101	124	23	23%
2	Outpatient Procedures	37	34	-3	-8%
	Total Cardiac Catheterization Procedures	138	158	20	149
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	50	53	3	6%
	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	50	53	3	6%
2					•
Н.	Electrophysiology Studies				
	Electrophysiology Studies Inpatient Studies Outpatient Studies	100 185	99 212	-1 27	-19 159

		ORWALK HOSPITAL			
		E MONTHS ACTUAL FIL FISCAL YEAR 2013	ING		
	REPORT 450 - HOSPITAL INPATIENT AN		R SERVICES UTILI	ZATION AND FTES	
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
١.	Surgical Procedures				
1	Inpatient Surgical Procedures	3,248	2,792	-456	-14
2	Outpatient Surgical Procedures	8,886	7,972	-914	-109
	Total Surgical Procedures	12,134	10,764	-1,370	-11
J.	Endoscopy Procedures				
1	Inpatient Endoscopy Procedures	706	584	-122	-17
2	Outpatient Endoscopy Procedures	8,683	6,638	-2,045	-249
	Total Endoscopy Procedures	9,389	7,222	-2,167	-23
K.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	9,699	8,469	-1,230	-13
2	Emergency Room Visits: Treated and Discharged	39,550	39,838	288	1
_	Total Emergency Room Visits	49,249	48,307	-942	-29
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	09
2	Dental Clinic Visits	1,308	1,381	73	69
3	Psychiatric Clinic Visits	11,371	9,887	-1,484	-139
4	Medical Clinic Visits	0	0	0	0
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0
6 7	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0
<u>/</u> 8	Medical Clinic Visits - Family Practice Clinic Medical Clinic Visits - Other Medical Clinics	0	0	0	<u> </u>
9	Specialty Clinic Visits	10,928	0	-10,928	-100
10	Specialty Clinic Visits - Cardiac Clinic	0	0	-10,928	0
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0
	Specialty Clinic Visits - Other Speciality Clinics	0	8,284	8,284	0
10	Total Hospital Clinic Visits	23,607	19,552	-4,055	-17
М.	Other Hospital Outpatient Visits				
1 1	Rehabilitation (PT/OT/ST)	8,493	9,130	637	8
2	Cardiac Rehabilitation	773	487	-286	-37
3	Chemotherapy	450	457	7	2
4	Gastroenterology	9,411	7,419	-1,992	-21
5	Other Outpatient Visits	165,160	169,456	4,296	3
	Total Other Hospital Outpatient Visits	184,287	186,949	2,662	1
Ν.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	453.2	450.4	-2.8	-1
2	Total Physician FTEs	90.7	91.8	1.1	1
3	Total Non-Nursing and Non-Physician FTEs Total Hospital Full Time Equivalent Employees	1,154.9 <b>1,698.8</b>	1,143.2 <b>1,685.4</b>	-11.7 - <b>13.4</b>	-1º - <b>1</b> '
		1,030.0	1,003.4	-13.4	-1

	NORWALK	HOSPITAL							
	TWELVE MONTH	S ACTUAL FILIN	G						
	FISCAL Y	'EAR 2013							
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EMI	ERGENCY RO	OM SERVICES E	BY LOCATION				
(1)	(2)	(3)	(4)	(5)	(6)				
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE				
Α.	Outpatient Surgical Procedures								
1	Norwalk Hospital	8,886	7,972	-914	-10%				
	Total Outpatient Surgical Procedures(A)	8,886	7,972	-914	-10%				
В.	Outpatient Endoscopy Procedures								
1	Norwalk Hospital	8,683	6,638	-2,045	-24%				
	Total Outpatient Endoscopy Procedures(B)	8,683	6,638	-2,045	-24%				
C.	Outpatient Hospital Emergency Room Visits								
1	Norwalk Hospital	39,550	39,838	288	1%				
	Total Outpatient Hospital Emergency Room Visits(C)	39,550	39,838	288	1%				
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.									
								(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.	
	(C) Must agree with Emergency Room Visits Treated an	d Discharged on	Report 450.						

	NORWALK HOS TWELVE MONTHS AC FISCAL YEAR	TUAL FILING			
	REPORT FORM 500 - CALCULATION O			ІТ	
	AND BASELINE UNDERPAYMENT DAT				
			ACTUAL		0/
	PECCHIPTION	ACTUAL	ACTUAL	AMOUNT	
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
••					
Α.	MEDICARE				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$249,956,905	\$243,146,941	(\$6,809,964)	-3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$75,932,454	\$72,173,862	(\$3,758,592)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.38%	29.68%	-0.69%	-2%
4	DISCHARGES	6,147	5,319	(828)	-13%
5	CASE MIX INDEX (CMI)	1.34560	1.44060	0.09500	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	8,271.40320	7,662.55140	(608.85180)	-7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,180.12	\$9,419.04	\$238.92	3%
8	PATIENT DAYS	35,256	31,377	(3,879)	-11%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,153.75	\$2,300.22	\$146.47	7%
10	AVERAGE LENGTH OF STAY	5.7	5.9	0.2	3%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$123,833,405	\$139,541,554	\$15,708,149	13%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$21,742,314	\$28,335,378	\$6,593,064	30%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.56%	20.31%	2.75%	16%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	49.54%	57.39%	7.85%	16%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,045.34072	3,052.56370	7.22298	0%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,139.53	\$9,282.49	\$2,142.95	30%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$373,790,310	\$382,688,495	\$8,898,185	2%
18	TOTAL ACCRUED PAYMENTS	\$97,674,768	\$100,509,240	\$2,834,472	3%
19	TOTAL ALLOWANCES	\$276,115,542	\$282,179,255	\$6,063,713	2%
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)				
	NON-GOVERNMENT INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$146,446,753	\$132,429,295	(\$14,017,458)	-10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$75,378,318	\$75,483,598	\$105,280	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	51.47%	57.00%	5.53%	11%
4	DISCHARGES	5,799	4,907	(892)	-15%
5	CASE MIX INDEX (CMI)	1.00310	1.07500	0.07190	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,816.97690	5,275.02500	(541.95190)	-9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$12,958.33	\$14,309.62	\$1,351.29	10%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,778.21)	(\$4,890.58)	(\$1,112.37)	29%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$21,977,786)	(\$25,797,938)	(\$3,820,152)	17%
10	PATIENT DAYS	20,211	17,156	(3,055)	-15%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,729.57	\$4,399.84	\$670.27	18%
12	AVERAGE LENGTH OF STAY	3.5	3.5	0.0	0%
	NON-GOVERNMENT OUTPATIENT				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$252,731,072	\$252,355,457	(\$375,615)	0%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$126,071,470	\$126,499,308	\$427,838	0%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	49.88%	50.13%	0.24%	0%

	NORWALK HO TWELVE MONTHS A	CTUAL FILING			
	FISCAL YEA				
	REPORT FORM 500 - CALCULATION (				
	AND BASELINE UNDERPAYMENT DA	TA: COMPARAT		S	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
16	OUTPATIENT CHARGES / INPATIENT CHARGES	172.58%	190.56%	17.98%	10%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	10,007.64753	9,350.71222	(656.93531)	-7%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,597.51	\$13,528.31	\$930.79	7%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$5,457.98)	(\$4,245.82)	\$1,212.16	-22%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$54,621,529)	(\$39,701,458)	\$14,920,071	-27%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$399,177,825	\$384,784,752	(\$14,393,073)	-4%
22	TOTAL ACCRUED PAYMENTS	\$201,449,788	\$201,982,906	\$533,118	0%
23	TOTAL ALLOWANCES	\$197,728,037	\$182,801,846	(\$14,926,191)	-8%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$76,599,315)	(\$65,499,396)	\$11,099,919	-14%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$363,988,504	\$349,638,109	(\$14,350,395)	-4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$199,162,505	\$199,129,397	(\$33,108)	0%
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)				
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$164,825,999	\$150,508,712	(\$14,317,287)	-9%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.28%	43.05%	-2.24%	
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$6,389,236	\$5,189,210	(\$1,200,026)	-19%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$167,271	\$458,039	\$290,768	174%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	2.62%	8.83%	6.21%	237%
4	DISCHARGES	267	193	(74)	-28%
5	CASE MIX INDEX (CMI)	0.96430	1.06510	0.10080	10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	257.46810	205.56430	(51.90380)	-20%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$649.68	\$2,228.20	\$1,578.53	243%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$12,308.66	\$12,081.42	(\$227.24)	-2%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$8,530.44	\$7,190.83	(\$1,339.61)	-16%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,196,316	\$1,478,179	(\$718,138)	-33%
11	PATIENT DAYS	844	590	(254)	-30%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$198.19	\$776.34	\$578.15	292%
13	AVERAGE LENGTH OF STAY	3.2	3.1	(0.1)	-3%
				. , ,	
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$28,798,363	\$29,957,432	\$1,159,069	4%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,120,010	\$2,395,471	\$275,461	13%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	7.36%	8.00%	0.63%	9%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	450.73%	577.30%	126.57%	28%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,203.45577	1,114.19356	(89.26221)	-7%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,761.60	\$2,149.96	\$388.36	22%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$10,835.91	\$11,378.35	\$542.44	5%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,377.93	\$7,132.53	\$1,754.59	33%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,472,104	\$7,947,014	\$1,474,911	23%
		÷=,,,.	÷:,5:.,011	÷ , , , , , , , , , , , , , , , , , , ,	
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$35,187,599	\$35,146,642	(\$40,957)	0%

	TWELVE MONT	K HOSPITAL						
	FISCAL YEAR 2013							
	REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT							
	AND BASELINE UNDERPAYME	NT DATA: COMPARAT		S				
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE			
24	TOTAL ACCRUED PAYMENTS	\$2,287,281	\$2,853,510	\$566,229	25%			
25	TOTAL ALLOWANCES	\$32,900,318	\$32,293,132	(\$607,186)	-2%			
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,668,420	\$9,425,193	\$756,773	9%			
D.	STATE OF CONNECTICUT MEDICAID							
υ.	STATE OF CONNECTICOT MEDICAID							
	MEDICAID INPATIENT							
1	INPATIENT ACCRUED CHARGES	\$75,819,360	\$74,431,040	(\$1,388,320)	-2%			
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$20,337,542	\$15,518,342	(\$4,819,200)	-24%			
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.82%	20.85%	-5.97%	-22%			
4	DISCHARGES	3,002	2,782	(220)	-7%			
5	CASE MIX INDEX (CMI)	0.93800	0.95902	0.02102	2%			
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,815.87600	2,667.99364	(147.88236)	-5%			
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,222.46	\$5,816.48	(\$1,405.97)	-19%			
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,735.88	\$8,493.14	\$2,757.26	48%			
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,957.66	\$3,602.55	\$1,644.89	84%			
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,512,531	\$9,611,591	\$4,099,060	74%			
11	PATIENT DAYS	11,609	10,948	(661)	-6%			
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,751.88	\$1,417.46	(\$334.42)	-19%			
13	AVERAGE LENGTH OF STAY	3.9	3.9	0.1	2%			
	MEDICAID OUTPATIENT							
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$57,507,931	\$69,452,300	\$11,944,369	21%			
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,243,246	\$17,506,571	\$2,263,325	15%			
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.51%	25.21%	-1.30%	-5%			
17	OUTPATIENT CHARGES / INPATIENT CHARGES	75.85%	93.31%	17.46%	23%			
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,276.97529	2,595.91024	318.93495	14%			
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,694.52	\$6,743.90	\$49.39	1%			
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,903.00	\$6,784.40	\$881.40	15%			
21	MEDICARE - MEDICAID OP PMT / OPED	\$445.02	\$2,538.58	\$2,093.56	470%			
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,013,297	\$6,589,928	\$5,576,631	550%			
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)							
23	TOTAL ACCRUED CHARGES	\$133,327,291	\$143,883,340	\$10,556,049	8%			
24	TOTAL ACCRUED PAYMENTS	\$35,580,788	\$33,024,913	(\$2,555,875)	-7%			
25	TOTAL ALLOWANCES	\$97,746,503	\$110,858,427	\$13,111,924	13%			
26		¢c 505 000	¢16 004 540	¢0 675 000	4.400/			
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,525,828	\$16,201,519	\$9,675,692	148%			
Е.	OTHER MEDICAL ASSISTANCE (O.M.A.)							
	OTHER MEDICAL ASSISTANCE INPATIENT							
1	INPATIENT ACCRUED CHARGES	\$1,219,617	\$578,536	(\$641,081)	-53%			
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$481,053	\$94,864	(\$386,189)	-80%			
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.44%	16.40%	-23.05%	-58%			
4	DISCHARGES	40	21	(19)	-48%			
5	CASE MIX INDEX (CMI)	1.02920	1.01380	(0.01540)	-1%			
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	41.16800	21.28980	(19.87820)	-48%			

	NORWALK HO TWELVE MONTHS AC	TUAL FILING						
	FISCAL YEAF							
	REPORT FORM 500 - CALCULATION O							
	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS							
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE			
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,685.12	\$4,455.84	(\$7,229.28)	-62%			
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$1,273.21	\$9,853.78	\$8,580.56	674%			
9	MEDICARE - O.M.A. IP PMT / CMAD	(\$2,505.00)	\$4,963.20	\$7,468.20	-298%			
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$103,126)	\$105,665	\$208,791	-202%			
11	PATIENT DAYS	197	79	(118)	-60%			
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,441.89	\$1,200.81	(\$1,241.08)	-51%			
13	AVERAGE LENGTH OF STAY	4.9	3.8	(1.2)	-24%			
	OTHER MEDICAL ASSISTANCE OUTPATIENT							
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$529,485	\$656,835	\$127,350	24%			
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$179,741	\$61,369	(\$118,372)	-66%			
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	33.95%	9.34%	-24.60%	-72%			
17	OUTPATIENT CHARGES / INPATIENT CHARGES	43.41%	113.53%	70.12%	162%			
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	17.36562	23.84214	6.47652	37%			
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,350.40	\$2,573.97	(\$7,776.42)	-75%			
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$2,247.12	\$10,954.34	\$8,707.22	387%			
21	MEDICARE - O.M.A. OP PMT / CMAD	(\$3,210.86)	\$6,708.51	\$9,919.38	-309%			
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$55,759)	\$159,945	\$215,704	-387%			
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE							
23	TOTAL ACCRUED CHARGES	\$1,749,102	\$1,235,371	(\$513,731)	-29%			
24	TOTAL ACCRUED PAYMENTS	\$660,794	\$156,233	(\$504,561)	-76%			
25	TOTAL ALLOWANCES	\$1,088,308	\$1,079,138	(\$9,170)	-1%			
		(0,1=0,00=)	<b>*</b> ~~ <b>~</b> ~ <i>· · ·</i>	<b>•</b> • • • • • • <b>-</b>				
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	(\$158,885)	\$265,611	\$424,495	-267%			
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA		<u>۱</u>					
••			1					
	TOTAL MEDICAL ASSISTANCE INPATIENT							
1	INPATIENT ACCRUED CHARGES	\$77,038,977	\$75,009,576	(\$2,029,401)	-3%			
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$20,818,595	\$15,613,206	(\$5,205,389)	-25%			
3	INPATIENT PAYMENTS / INPATIENT CHARGES	27.02%	20.81%	,	-23%			
4	DISCHARGES	3,042	2,803	(239)	-8%			
5	CASE MIX INDEX (CMI)	0.93920	0.95943	0.02023	2%			
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,857.04400	2,689.28344	(167.76056)	-6%			
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,286.76	\$5,805.71	(\$1,481.05)	-20%			
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,671.57	\$8,503.91	\$2,832.34	50%			
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,893.36	\$3,613.33	\$1,719.97	91%			
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,409,405	\$9,717,257	\$4,307,852	80%			
11	PATIENT DAYS	11,806	11,027	(779)	-7%			
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,763.39	\$1,415.91	(\$347.48)	-20%			
13	AVERAGE LENGTH OF STAY	3.9	3.9	0.1	1%			
	TOTAL MEDICAL ASSISTANCE OUTPATIENT							
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$58,037,416	\$70,109,135	\$12,071,719	21%			
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$15,422,987	\$17,567,940	\$2,144,953	14%			
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.57%	25.06%	-1.52%	-6%			
		75.040/	93.47%	18.13%	24%			
17	OUTPATIENT CHARGES / INPATIENT CHARGES	75.34%	33.4770	10.1376	247			

	NORWALK HOS TWELVE MONTHS AC				
	FISCAL YEAR	2013			
	REPORT FORM 500 - CALCULATION O		PAYMENT LIM	IT	
	AND BASELINE UNDERPAYMENT DAT				
		ACTUAL	ACTUAL	AMOUNT	%
I INF	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
		<u></u>			
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,722.19	\$6,705.95	(\$16.23)	0%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,875.33	\$6,822.35	\$947.03	16%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$417.35	\$2,576.53	\$2,159.18	517%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$957,538	\$6,749,873	\$5,792,335	605%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN	IT)			
23	TOTAL ACCRUED CHARGES	\$135,076,393	\$145,118,711	\$10,042,318	7%
24	TOTAL ACCRUED PAYMENTS	\$36,241,582	\$33,181,146	(\$3,060,436)	-8%
25	TOTAL ALLOWANCES	\$98,834,811	\$111,937,565	\$13,102,754	13%
G.	CHAMPUS / TRICARE				
	CHAMPUS / TRICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$518,914	\$477,701	(\$41,213)	-8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$104,982	\$166,560	\$61,578	59%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	20.23%	34.87%	14.64%	72%
4	DISCHARGES	15	16	1	7%
5	CASE MIX INDEX (CMI)	0.84590	1.52850	0.68260	81%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	12.68850	24.45600	11.76750	93%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,273.79	\$6,810.60	(\$1,463.19)	-18%
8	PATIENT DAYS	68	51	(17)	-25%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,543.85	\$3,265.88	\$1,722.03	112%
10	AVERAGE LENGTH OF STAY	4.5	3.2	(1.3)	-30%
	CHAMPUS / TRICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$394,920	\$325,124	(\$69,796)	-18%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$59,947	\$56,187	(\$3,760)	-6%
	<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>				
13	TOTAL ACCRUED CHARGES	\$913,834	\$802,825	(\$111,009)	-12%
14	TOTAL ACCRUED PAYMENTS	\$164,929	\$222,747	\$57,818	35%
15	TOTAL ALLOWANCES	\$748,905	\$580,078	(\$168,827)	-23%
Η.	OTHER DATA				
1	OTHER OPERATING REVENUE	\$20,310,592	\$16,843,048	(\$3,467,544)	-17%
2	TOTAL OPERATING EXPENSES	\$361,951,445	\$338,981,125	(\$22,970,320)	-6%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)				
4	CHARITY CARE (CHARGES)	\$17,929,000	\$18,272,000	\$343,000	2%
5	BAD DEBTS (CHARGES)	\$23,530,477	\$17,836,044	(\$5,694,433)	-24%
6	UNCOMPENSATED CARE (CHARGES)	\$41,459,477	\$36,108,044	(\$5,351,433)	-13%
7	COST OF UNCOMPENSATED CARE	\$14,412,817	\$12,667,409	(\$1,745,408)	-12%
	TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODO	LOGY)			
8	TOTAL ACCRUED CHARGES	\$135,076,393	\$145,118,711	\$10,042,318	7%
9	TOTAL ACCRUED PAYMENTS	\$36,241,582	\$33,181,146	(\$3,060,436)	-8%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$46,957,451	\$50,910,486	\$3,953,035	8%

	NORWALK HOS TWELVE MONTHS AC	TUAL FILING			
	FISCAL YEAR			-	
	REPORT FORM 500 - CALCULATION O				
	AND BASELINE UNDERPAYMENT DAT	A: COMPARAT	IVE ANALYSI	5	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$10,715,869	\$17,729,340	\$7,013,471	65%
	AGGREGATE DATA	φ10,710,000	ψ11,120,040	<i>ψι</i> ,οιο,+ <i>ι</i> ι	0070
A.	TOTALS - ALL PAYERS				
1	TOTAL INPATIENT CHARGES	\$473,961,549	\$451,063,513	(\$22,898,036)	-5%
2	TOTAL INPATIENT PAYMENTS	\$172,234,349	\$163,437,226	(\$8,797,123)	-5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	36.34%	36.23%	-0.11%	0%
4	TOTAL DISCHARGES	15,003	13,045	(1,958)	-13%
5	TOTAL CASE MIX INDEX	1.13031	1.19979	0.06948	6%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	16,958.11260	15,651.31584	(1,306.79676)	-8%
7	TOTAL OUTPATIENT CHARGES	\$434,996,813	\$462,331,270	\$27,334,457	6%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	91.78%	102.50%	10.72%	12%
9	TOTAL OUTPATIENT PAYMENTS	\$163,296,718	\$172,458,813	\$9,162,095	6%
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	37.54%	37.30%	-0.24%	-1%
11	TOTAL CHARGES	\$908,958,362	\$913,394,783	\$4,436,421	0%
	TOTAL PAYMENTS	. , ,		\$364,972	
12		\$335,531,067	\$335,896,039		0%
13	TOTAL PAYMENTS / TOTAL CHARGES	36.91%	36.77%	-0.14%	0%
14	PATIENT DAYS	67,341	59,611	(7,730)	-11%
В.	TOTALS - ALL GOVERNMENT PAYERS				
1	INPATIENT CHARGES	\$327,514,796	\$318,634,218	(\$8,880,578)	-3%
2	INPATIENT PAYMENTS	\$96,856,031	\$87,953,628	(\$8,902,403)	-9%
3	GOVT. INPATIENT PAYMENTS / CHARGES	29.57%	27.60%	-1.97%	-7%
4	DISCHARGES	9,204	8,138	(1,066)	-12%
5	CASE MIX INDEX	1.21047	1.27504	0.06458	5%
6	CASE MIX ADJUSTED DISCHARGES	11,141.13570	10,376.29084	(764.84486)	-7%
7	OUTPATIENT CHARGES	\$182,265,741	\$209,975,813	\$27,710,072	15%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	55.65%	65.90%	10.25%	18%
9	OUTPATIENT PAYMENTS	\$37,225,248	\$45,959,505	\$8,734,257	23%
9 10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.42%	21.89%	1.46%	7%
		\$509,780,537	\$528,610,031	\$18,829,494	4%
11	TOTAL CHARGES		\$133,913,133		
12	TOTAL PAYMENTS	\$134,081,279	25.33%	(\$168,146)	0%
13	TOTAL PAYMENTS / CHARGES PATIENT DAYS	26.30%		-0.97%	-4%
14 15	TOTAL GOVERNMENT DEDUCTIONS	47,130 \$375,699,258	42,455 \$394,696,898	(4,675) \$18,997,640	-10% 5%
C.					
	AVERAGE LENGTH OF STAY				001
		5.7	5.9	0.2	3%
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.5	0.0	0%
	UNINSURED	3.2	3.1	(0.1)	-3%
4		3.9	3.9	0.1	2%
5	OTHER MEDICAL ASSISTANCE	4.9	3.8	(1.2)	-24%
6 7	CHAMPUS / TRICARE TOTAL AVERAGE LENGTH OF STAY	4.5 4.5	3.2	(1.3)	-30%
-		4.5	4.0	0.1	<u> </u>
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$908,958,362	\$913,394,783	\$4,436,421	0%
2	TOTAL GOVERNMENT DEDUCTIONS	\$375,699,258	\$394,696,898	\$18,997,640	5%

	NORWALK HOSPITAL							
	TWELVE MONTHS AC							
	FISCAL YEAR 2013							
	REPORT FORM 500 - CALCULATION OI							
	AND BASELINE UNDERPAYMENT DAT	A: COMPARA		5				
		ACTUAL	ACTUAL	AMOUNT	%			
LINE	DESCRIPTION	<u>FY 2012</u>	<u>FY 2013</u>	DIFFERENCE	DIFFERENCE			
3	UNCOMPENSATED CARE	\$41,459,477	\$36,108,044	(\$5,351,433)				
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$164,825,999	\$150,508,712	(\$14,317,287)	-9%			
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,986,753	\$11,644,353	\$657,600	6%			
6	TOTAL ADJUSTMENTS	\$592,971,487	\$592,958,007	(\$13,480)	0%			
7	TOTAL ACCRUED PAYMENTS	\$315,986,875	\$320,436,776	\$4,449,901	1%			
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%			
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$315,986,875	\$320,436,776	\$4,449,901	1%			
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3476362485	0.3508195820	0.0031833335	1%			
11	COST OF UNCOMPENSATED CARE	\$14,412,817	\$12,667,409	(\$1,745,408)	-12%			
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$10,715,869	\$17,729,340	\$7,013,471	65%			
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%			
14	TOTAL COST OF UNCOMPENSATED CARE AND							
	MEDICAL ASSISTANCE UNDERPAYMENT	\$25,128,686	\$30,396,748	\$5,268,063	21%			
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>						
1	MEDICAID	\$1,013,297	\$6,589,928	\$5,576,631	550%			
2	OTHER MEDICAL ASSISTANCE	(\$158,885)	\$265,611	\$424,495	-267%			
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,668,420	\$9,425,193	\$756,773	9%			
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$9,522,832	\$16,280,732	\$6,757,900	71%			
۷.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600	<u> </u>						
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$15,544,363	\$17,735,548	\$2,191,185	14.10%			
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$27,736,810	(\$1,764,125)	(\$29,500,935)	-106.36%			
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$363,267,877	\$334,131,914	(\$29,135,963)	-8.02%			
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%			
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$908,958,362	\$913,394,783	\$4,436,421	0.49%			
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%			
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$41,459,477	\$36,108,044	(\$5,351,433)	-12.91%			

	NORWALK HOSPITA						
	TWELVE MONTHS ACTUAL	-					
	FISCAL YEAR 20						
	REPORT 550 - CALCULATION OF DSH UPPE	R PAYMENT LIMIT AND					
BASELINE UNDERPAYMENT DATA							
(1)	(2)	(3)	(4)	(5)			
(1)	(*)			(0)			
		ACTUAL	ACTUAL <u>FY</u>	AMOUNT			
INE	DESCRIPTION	<u>FY 2012</u>	<u>2013</u>	DIFFERENCE			
I.	ACCRUED CHARGES AND PAYMENTS						
1.	ACCROED CHARGES AND FAIMENTS						
	INPATIENT ACCRUED CHARGES						
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$146,446,753	\$132,429,295	(\$14,017,458)			
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$249,956,905 \$77,038,977	243,146,941 75,009,576	<u>(\$6,809,964</u> (\$2,029,401			
	MEDICAID	\$75,819,360	74,431,040	(\$1,388,320			
	OTHER MEDICAL ASSISTANCE	\$1,219,617	578,536	(\$641,081			
		\$518,914	477,701	(\$41,213			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$6,389,236 \$327,514,796	5,189,210 <b>\$318,634,218</b>	(\$1,200,026) (\$8,880,578)			
	TOTAL INPATIENT GOVERNMENT CHARGES	\$473,961,549	\$451,063,513	(\$22.898.036			
		÷ · · · · · · · · · · · · · · · · · · ·		,+==,200,000			
		<b>*</b> 252 704 070	<b>*</b> 050.055.457	(0075.045			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$252,731,072 \$123.833.405	\$252,355,457 139,541,554	<u>(\$375,615)</u> \$15,708,149			
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$58,037,416	70,109,135	\$12,071,719			
	MEDICAID	\$57,507,931	69,452,300	\$11,944,369			
	OTHER MEDICAL ASSISTANCE	\$529,485	656,835	\$127,350			
-	CHAMPUS / TRICARE	\$394,920	325,124	(\$69,796			
7		\$28,798,363	29,957,432	\$1,159,069			
	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$182,265,741 \$434,996,813	\$209,975,813 \$462,331,270	<u>\$27,710,072</u> \$27,334,457			
		<u> </u>	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	φ21,004,401			
	TOTAL ACCRUED CHARGES						
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$399,177,825	\$384,784,752	(\$14,393,073			
	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$373,790,310 \$135,076,393	\$382,688,495 \$145,118,711	<u>\$8,898,185</u> \$10,042,318			
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$133,327,291	\$143,883,340	\$10,556,049			
	TOTAL OTHER MEDICAL ASSISTANCE	\$1,749,102	\$1,235,371	(\$513,731			
6	TOTAL CHAMPUS / TRICARE	\$913,834	\$802,825	(\$111,009			
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$35,187,599	\$35,146,642	(\$40,957			
	TOTAL GOVERNMENT CHARGES TOTAL CHARGES	\$509,780,537 \$908,958,362	\$528,610,031 \$913,394,783	\$18,829,494 \$4,436,421			
		\$900,950,302	\$913,394,763	\$4,430,421			
D.	INPATIENT ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$75,378,318	\$75,483,598	\$105,280			
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$75,932,454	, , ,	(\$3,758,592			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,818,595 \$20,337,542	15,613,206 15,518,342	(\$5,205,389) (\$4,819,200)			
	OTHER MEDICAL ASSISTANCE	\$481,053	94,864	(\$386,189			
	CHAMPUS / TRICARE	\$104,982	166,560	\$61,578			
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$167,271	458,039	\$290,768			
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$96,856,031	\$87,953,628	(\$8,902,403			
	TOTAL INPATIENT PAYMENTS	\$172,234,349	\$163,437,226	(\$8,797,123			
E.	OUTPATIENT ACCRUED PAYMENTS						
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$126,071,470	\$126,499,308	\$427,838			
2	MEDICARE	\$21,742,314	28,335,378	\$6,593,064			
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$15,422,987	17,567,940	\$2,144,953			
	MEDICAID OTHER MEDICAL ASSISTANCE	\$15,243,246 \$179,741	17,506,571 61,369	\$2,263,325 (\$118,372			
	CHAMPUS / TRICARE	\$59,947	56,187	(\$3,760			
-	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,120,010	2,395,471	\$275,461			
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$37,225,248	\$45,959,505	\$8,734,257			
	TOTAL OUTPATIENT PAYMENTS	\$163,296,718	\$172,458,813	\$9,162,095			
F.	TOTAL ACCRUED PAYMENTS						
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$201,449,788	\$201,982,906	\$533,118			
	TOTAL MEDICARE	\$97,674,768	\$100,509,240	\$2,834,472			
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$36,241,582	\$33,181,146	(\$3,060,436			
		\$35,580,788	\$33,024,913	(\$2,555,875			
	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$660,794 \$164,929	\$156,233 \$222,747	<u>(\$504,561)</u> \$57,818			
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$164,929	\$2,853,510	\$566,229			
	TOTAL GOVERNMENT PAYMENTS	\$134,081,279	\$133,913,133	(\$168,146			

	NORWALK HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013	3		
	REPORT 550 - CALCULATION OF DSH UPPER PAY BASELINE UNDERPAYMENT DATA		)	
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL <u>FY</u> 2013	AMOUNT DIFFERENCE
т				
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16.11%		-1.61%
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.50% 8.48%	26.62% 8.21%	-0.88% -0.26%
4	MEDICAID	8.34%	8.15%	-0.19%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.13%	0.06%	-0.07%
-	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.70%		-0.13%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	36.03%		-1.15%
	TOTAL INPATIENT PAYER MIX	52.14%	49.38%	-2.76%
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	27.80%	27.63%	-0.18%
		13.62%		1.65%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	<u>6.39%</u> 6.33%	7.68% 7.60%	<u> </u>
5	OTHER MEDICAL ASSISTANCE	0.06%	0.07%	0.01%
6	CHAMPUS / TRICARE	0.04%	0.04%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	<u>3.17%</u> <b>20.05%</b>		0.11% <b>2.94</b> %
	TOTAL OUTPATIENT GOVERNMENT PATER MIX	47.86%		2.947
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS	100.0076	100.00 %	0.007
		00.470/	00.470/	0.010
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	<u>22.47%</u> 22.63%	<u>22.47%</u> 21.49%	0.01%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.20%	4.65%	-1.56%
	MEDICAID	6.06%		-1.44%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.14%	0.03%	-0.12%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.05%		0.02%
	TOTAL INPATIENT GOVERNMENT PAYER MIX TOTAL INPATIENT PAYER MIX	28.87% 51.33%		-2.68% -2.67%
_	OUTPATIENT PAYER MIX	51.33%	40.00%	-2.077
D.	OUTPATIENT PATER MIX DASED ON ACCRUED PATMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	37.57%		0.09%
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	<u>6.48%</u> 4.60%		<u> </u>
4	MEDICAID	4.54%		0.67%
	OTHER MEDICAL ASSISTANCE	0.05%		-0.04%
6	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.02%		0.00%
,	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	11.09%		2.59%
	TOTAL OUTPATIENT PAYER MIX	48.67%	51.34%	2.67%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
Α.	DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,799	4,907	(892
2	MEDICARE	6,147	5,319	(828
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,042	-	(239
4	MEDICAID OTHER MEDICAL ASSISTANCE	3,002	/	<u>(220</u> (19
5	CHAMPUS / TRICARE	15	16	1
5 6	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT DISCHARGES	15 267 <b>9,204</b>	193	<u> </u>

	NORWALK HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013	i						
	REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA							
(4)	(2)	-	(4)	(5)				
(1)	DESCRIPTION	(3) ACTUAL FY 2012	ACTUAL <u>FY</u> 2013	AMOUNT DIFFERENCE				
		<u>F1 2012</u>	2013	DIFFERENCE				
В.	PATIENT DAYS							
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	20,211	17,156	(3,055				
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	35,256	,	(3,879				
<u>3</u> 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	<u>11,806</u> 11,609	,	(779)				
5	OTHER MEDICAL ASSISTANCE	197	79	(118				
6	CHAMPUS / TRICARE	68		(17				
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT PATIENT DAYS	<u>844</u> 47,130		(254 (4,675				
	TOTAL PATIENT DATS	67,341		(7,73)				
C.	AVERAGE LENGTH OF STAY (ALOS)							
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.5	0.0				
	MEDICARE	5.7		0.0				
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.9		0.2				
4	MEDICAID	3.9		0.1				
5	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	4.9		(1.2				
6 7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.5		(1.3				
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.1		0.4				
	TOTAL AVERAGE LENGTH OF STAY	4.5	4.6	0.1				
D.	CASE MIX INDEX							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.00310		0.07190				
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	<u>1.34560</u> 0.93920		0.09500				
4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93920		0.0202				
5	OTHER MEDICAL ASSISTANCE	1.02920		(0.0154)				
6	CHAMPUS / TRICARE	0.84590		0.68260				
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	0.96430		0.10080				
	TOTAL CASE MIX INDEX	1.13031	1.19979	0.06948				
E.	OTHER REQUIRED DATA							
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$363,988,504	\$349,638,109	(\$14,350,39				
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$199,162,505	\$199,129,397	(\$33,108				
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)							
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$164,825,999	\$150,508,712	(\$14,317,287				
		45.28%		-2.249				
	EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$15,544,363 \$10,986,753	\$17,735,548 \$11,644,353	\$2,191,185 \$657,600				
	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$0	\$0					
8	OHCA INPUT) CHARITY CARE	\$17,929,000	\$18,272,000	\$343,000				
	BAD DEBTS	\$23,530,477	\$17,836,044	(\$5,694,433				
	TOTAL UNCOMPENSATED CARE	\$41,459,477	\$36,108,044	(\$5,351,433				
	TOTAL OTHER OPERATING REVENUE	\$20,310,592	\$16,843,048	(\$3,467,54				
12	TOTAL OPERATING EXPENSES	\$361,951,445	\$338,981,125	(\$22,970,32				
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS							
Α.	CASE MIX ADJUSTED DISCHARGES							
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,816.97690	5,275.02500	(541.95190				
2	MEDICARE	8,271.40320	7,662.55140	(608.85180				
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	2,857.04400	2,689.28344	(167.76056				
4 5	OTHER MEDICAL ASSISTANCE	2,815.87600 41.16800	2,667.99364 21.28980	(147.88236) (19.87820				
6	CHAMPUS / TRICARE	12.68850	24.45600	11.76750				
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	257.46810	205.56430	(5				

		<u>^</u>		
	TWELVE MONTHS ACTUAL FILIN	5		
	FISCAL YEAR 2013		<u> </u>	
	REPORT 550 - CALCULATION OF DSH UPPER PA		)	
	BASELINE UNDERPAYMENT DAT	A		
(4)		(2)	(4)	(5)
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL FY	AMOUNT
INF	DESCRIPTION	FY 2012	2013	DIFFERENCE
			2010	DITTERENO
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	11,141.13570	10,376.29084	(764.8448
	TOTAL CASE MIX ADJUSTED DISCHARGES	16,958.11260	15,651.31584	(1,306.7967
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,007.64753	9,350.71222	-656.935
	MEDICARE	3,045.34072		7.222
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,294.34090	2,619.75237	325.411
	MEDICAID	2,276.97529	,	318.934
	OTHER MEDICAL ASSISTANCE	17.36562		6.476
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	11.41576 1,203.45577		-0.526 -89.262
1	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	5,351.09738		-09.202 332.108
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	15,358.74492	,	-324.827
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
		<b>(</b> 10 050 55	<b>*</b> ( ) 000 55	<b>*</b> 4 <b>~</b>
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$12,958.33 \$9,180.12	\$14,309.62 \$9,419.04	\$1,351.2 \$238.9
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$9,180.12	\$9,419.04 \$5,805.71	. \$238 (\$1,481)
	MEDICAL ASSISTANCE (INCLUDING OTHER MILDICAL ASSISTANCE)	\$7,222.46	\$5,816.48	(\$1,405.
	OTHER MEDICAL ASSISTANCE	\$11,685.12	\$4,455.84	(\$7,229.2
6	CHAMPUS / TRICARE	\$8,273.79	\$6,810.60	(\$1,463.)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$649.68	\$2,228.20	\$1,578.
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,693.55	\$8,476.40	(\$217.*
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$10,156.46	\$10,442.40	\$285.9
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
υ.	OUTPATIENT PATMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,597.51	\$13,528.31	\$930.7
2	MEDICARE	\$7,139.53	\$9,282.49	\$2,142.9
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,722.19		(\$16.2
	MEDICAID	\$6,694.52	\$6,743.90	\$49.3
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$10,350.40 \$5,251.25	\$2,573.97 \$5,159.68	<u>(</u> \$7,776.4) (\$91.5)
-	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,761.60	\$3,139.08	\$388.3
1	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	ψ1,701.00	ψ2,143.30	ψ000.
		\$6,956.56	\$8,086.90	\$1,130.3
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$10,632.17	\$11,471.32	\$839.1
<b>V</b> .	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
				•
		\$1,013,297	\$6,589,928	\$5,576,6
	OTHER MEDICAL ASSISTANCE UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$158,885) \$8,668,420	\$265,611 \$9,425,193	\$424,49 \$756,77
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$9,522,832	\$16,280,732	\$6,757,9
		\$9,522,632	\$10,200,732	\$0,757,9t
VI	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	062)		
V I.	CALCOLATED UNDERFATMENT BEI UNE UPPER LIMIT (BASLEINE METHODOL			
1	TOTAL CHARGES	\$908,958,362	\$913,394,783	\$4,436,42
2	TOTAL GOVERNMENT DEDUCTIONS	\$375,699,258	\$394,696,898	\$18,997,64
	UNCOMPENSATED CARE	\$41,459,477	\$36,108,044	(\$5,351,4
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$164,825,999	\$150,508,712	(\$14,317,2
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,986,753	\$11,644,353 \$592,958,007	\$657,6
	TOTAL ADJUSTMENTS TOTAL ACCRUED PAYMENTS	\$592,971,487 \$315,986,875	\$592,958,007 \$320,436,776	<mark>(\$13,4)</mark> \$4,449,9
	UCP DSH PAYMENTS (OHCA INPUT)	\$315,960,675	\$320,430,778	φ4,449,9
	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$315,986,875	\$320,436,776	\$4,449,9
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3476362485	0.3508195820	0.00318333
11	COST OF UNCOMPENSATED CARE	\$14,412,817	\$12,667,409	(\$1,745,4
	MEDICAL ASSISTANCE UNDERPAYMENT	\$10,715,869	\$17,729,340	\$7,013,4
	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	:
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	¢05 400 600	\$30,396,748	¢E 060 0
		\$25,128,686	<b>৯</b> ১৩, <b>১</b> 96,748	\$5,268,00
VII	RATIOS			

IPICAL VERA 2013 DASELINE UNDERPAYMENT DIALTANDA           INCLULATION OF DISH UPPER PAYMENTI BIAD DASELINE UNDERPAYMENT DIALTANDA           INCLULATION OF DISH UPPER PAYMENTI BIAD DASELINE UNDERPAYMENT DIALTANDA           INCLULATION OF DISH UPPER PAYMENT DIALTANDA           INCLUE OF DIALTANDE DISTONALIZE OF DIALTANDA           INCLUE OF DIALTANDE DI PAYMENTS TO INPATIENT CHARGES         INCLUE OF DIALTANDE DISTONALIZE OF DIALTANDE         INCLUE OF DIALTANDE DISTONALIZE OF D		NORWALK HOSPITAL					
REPORT SS0 - CALCULATION OF DISH UPPER PAYMENT DIAT           10         (0) <th (<="" colspan="2" th=""><th></th><th>TWELVE MONTHS ACTUAL FILING</th><th>6</th><th></th><th></th></th>	<th></th> <th>TWELVE MONTHS ACTUAL FILING</th> <th>6</th> <th></th> <th></th>			TWELVE MONTHS ACTUAL FILING	6		
BASELINE UNDERPAYMENT DATA           (1)         (2)         (3)         (6)         (6)         (7)           (1)         (2)         (3)         (6)         (7)         <							
ACTUAL         ACTUAL         ACTUAL         ACTUAL         ACTUAL         Y         AMOUNT           INE DESCRIPTION         ACTUAL         EV 2012         2013         DIFFERENCE           A RATIO OF INPARIENT AVMENTS TO INPATIENT CHARGES         5147%         77.00%         5557           A MEDICAL ASSISTANCE         27.00%         20.81%         92.86%         -0.87%           A MEDICAL ASSISTANCE         20.40%         20.85%         -0.85%         -0.85%         -0.85%           A MEDICAL ASSISTANCE         20.45%         0.84%         92.85%         -0.87%         -0.85%         -0.15%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%         -0.25%				)			
ACTUAL INE_DESCRIPTION         ACTUAL PY 2012         ACTUAL 2013         ACTUAL PY 2012         ACTUAL 2013         PY DIFFERENCE           ANTIO OF INFAILENT FAVILENTS TO INFATIENT CHARGES         514.7%         5557           MEDICAL ASSISTANCE 000500/EDU ASSISTANCE         30.3%         29.85%         -0.587           MEDICAL SSISTANCE 000500/EDU ASSISTANCE         30.4%         10.45%         -0.45%           100500/EDU ASSISTANCE 000500/EDU ASSISTANCE         28.5%         27.6%         -1.47%           100500/EDU ASSISTANCE 000500/EDU ASSISTANCE         28.5%         27.6%         -1.47%           100500/EDU ASSISTANCE 000500/EDU ASSISTANCE 000500/EDU ASSISTANCE         28.5%         25.5%         27.6%           100500/EDU ASSISTANCE 000500/EDU ASSISTANCE         48.8%         50.13%         0.27%           100500/EDU ASSISTANCE 000500/EDU ASSISTANCE         28.5%         25.5%         25.5%         25.5%           100500/EDU ASSISTANCE 000500/EDU ASSISTANCE         10.5%         25.5%         25.5%         25.5% <th></th> <th></th> <th></th> <th></th> <th></th>							
LINE DESCRIPTION         FY 2012         2013         DIFFERENCE           A         RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	(1)	(2)	(3)	(4)	(5)		
RATO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         Control           NUM-GOVERNMENT INCLUDING SILE PAY LUNNSURED)         51 475, 57 200, 52 30 30, 57 200, 57 30, 57 200, 57 30, 57 200, 57 30, 57 200, 57 30, 57 200, 57 30, 57 200, 57 30, 57 200, 57 30, 57 200, 57 30, 57 30, 57 200, 57 30, 50 3			ACTUAL	ACTUAL FY	AMOUNT		
In NON-GOVERNMENT INCLUDING SELF PAY (UNINSURED)         51-478         57.00%         5.537           IMEDICAL ASSISTANCE         27.02%         20.81%         6.21%           IMEDICAL ASSISTANCE         27.02%         20.81%         6.21%           IMEDICAL ASSISTANCE         20.25%         20.85%         6.21%           IMEDICAL ASSISTANCE         20.25%         20.85%         20.85%           IMEDICAL ASSISTANCE         20.25%         20.85%         20.85%           IMEDICAL ASSISTANCE         20.25%         20.85%         21.84%           INTAL GOVERNMENT RATIO OF INPARTENT PAYMENTS TO INPARTENT CHARGES         20.87%         27.66%         -1.97           INTAL GOVERNMENT RATIO OF INPARTENT PAYMENTS TO OUTPARTENT CHARGES         40.89%         50.13%         0.24%           IMEDICAL ASSISTANCE (INCLUDING SELF PAY / UNNSURED)         27.65%         26.65%         26.25%         -1.97           INTER VENCLUDING SELF PAY / UNNSURED         17.55%         50.34%         -2.76         -1.97           IMEDICAL ASSISTANCE (INCLUDING SELF PAY / UNNSURED)         27.65%         26.25%         -1.92         -1.97           IMEDICAL ASSISTANCE (INCLUDING SELF PAY / UNNSURED)         17.55%         27.16%         -1.97           IMEDICAL ASSISTANCE (INCLUDING SELF PAY / UNNSURED)	LINE	DESCRIPTION	<u>FY 2012</u>	<u>2013</u>	DIFFERENCE		
2         MEDICAL         30.33%         28.69%         -0.69%           2         MEDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         27.02%         28.61%         -6.27           4         MEDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         20.22%         21.65%         -6.27           4         MEDICAL ASSISTANCE         20.22%         21.65%         -6.27           7         UNINDURED IN NON-GOVERNMENT         10.74.60%         4.57%         -6.27%           7         TOTAL RATIO OF INPATIENT TAYMENTS TO INPATIENT CHARGES         -6.77         -7.78%         27.60%         -1.97           10.01.60%/DENMENT (INCLUDING OTHER MEDICAL ASSISTANCE)         28.57%         27.60%         -1.97           10.01.60%/DENMENT (INCLUDING OTHER MEDICAL ASSISTANCE)         27.57%         23.05%         -0.25%           2         MEDICAL ASSISTANCE         -7.55%         23.05%         -1.52%           10.01.60%/DENMENT (INCLUDING OTHER MEDICAL ASSISTANCE)         28.57%         23.05%         -0.25%           2         MEDICAL ASSISTANCE         -7.55%         23.05%         -1.52%           2         MEDICAL ASSISTANCE         23.26%         -0.34%         -1.52%           2         MEDICAL ASSISTANCE         23.26%         -0.34%	Α.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES					
3         MEDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         27.22%         28.81%         6.827           4         MEDICAL ASSISTANCE         39.44%         16.40%         23.085%         5.97           5         OTHER MEDICAL ASSISTANCE         39.44%         16.40%         23.05%         5.97           6         OTHER MEDICAL ASSISTANCE         39.44%         16.40%         23.05%         5.97           7         OTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         28.57%         27.80%         -1.97           7         OTAL RATIO OF UIPATIENT PAYMENTS TO OUTPATIENT CHARGES         28.57%         25.05%         -1.97           8         RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         -1.97         -1.97         -1.97           9         MEDICAL ASSISTANCE         28.57%         26.05%         -2.76           9         MEDICAL ASSISTANCE         28.57%         26.05%         -2.76           9         INDIR-COURD SELF PAY (UNROUNCED)         28.57%         26.05%         -2.76           9         OTHER MEDICAL ASSISTANCE         -1.90         -1.90         -1.90           9         OTHER MEDICAL ASSISTANCE         28.57%         26.05%         -2.24           10         TOTAL ACC					5.53%		
4         MEDICAL         22.8%         20.85%         5.97           6         OTHER MEDICAL ASSISTANCE         33.44%         64.6%         62.6%           6         OTHER MEDICAL ASSISTANCE         20.2%         34.8%         62.7%           10         UNINSURCE (INCLUDED IN NON-GOVERNMENT)         2.6%         6.8.3%         62.7%           10         TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         22.5%         22.6%         6.8.3%           10         NON-GOVERNMENT (INCLUDING SELE PAY / UNINSURED)         40.8%         50.13%         0.24           1         NON-GOVERNMENT (INCLUDING OTHER MEDICAL ASSISTANCE)         23.5%         22.6%         1.5%           1         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         23.5%         23.6%         1.4.5%           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         23.5%         23.6%         0.4.4%           4         MEDICAL ASSISTANCE (INCLUDING ASSISTANCE)         23.5%         23.6%         0.4.5%           4         OTHER MEDICAL ASSISTANCE         23.5%         23.6%         0.4.5%           10         UNINSURGE (INCLUDE DIN NON-GOVERNMENT)         7.3%%         9.044         7.1.5%           10         UNINSURGE (INCLUDED IN N							
5         01HER MEDICAL ASSISTANCE         334.4%         10.40%         -23.07           6         CHAMPUS TRICARE         20.25%         34.87%         14.44           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         2.62%         8.83%         6.21           101AL GOVERNMENT RATIO OF IMPATIENT PAYMENTS TO INPATIENT CHARGES         20.57%         27.66%         -1.47           101AL GOVERNMENT (INCLUDING SELF PAY/LINISURED)         40.88%         50.13%         0.24           100CACQVERNMENT (INCLUDING SELF PAY/LINISURED)         40.88%         50.13%         0.24           2         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         25.57%         22.05%         -1.37           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         26.57%         22.1%         -1.30           4         MEDICAL ASSISTANCE         25.57%         22.1%         -1.37           5         CHMAPUS / INCLADE NON-GOVERNMENT)         11.1%         17.28%         2.10           101AL GOVERNMENT FALL         S3.55%         26.0%         4.52           101AL GOVERNMENT FALL         S3.55%         37.5%         37.30%         -0.42           101AL GOVERNMENT FALL         S3.55%         36.0%         0.65%         1.60%							
6         CHAMPUS TRICARE         20.2%         34.87%         14.64           1         UNINSURED INCOLOCED IN NON-GOVERNMENT         2.65%         8.83%         6.21           1         TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         20.57%         27.60%         -1.97           1         TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         36.34%         36.23%         0.24           8         RATIO OF CULTATIENT PAYMENTS TO INPATIENT CHARGES         0.24         0.24         0.24           1         REDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         26.57%         29.09%         -1.52           3         MEDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         26.57%         29.09%         -1.52           4         MEDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         26.57%         29.09%         -1.52           5         OTHER MEDICAL ASSISTANCE         23.39%         9.34%         -24.40           7         UNINSURED INCIN-GOVERNMENT AND OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         10.042         10.05           6         OTHAL MODION OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         -1.46           7         TOTAL COVERNMENT ATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         30.535.531.067					-23.05%		
7         UNINSURED INCOLOGE IN NON-GOVERNMENT)         2.62%         8.83%         6.21           TOTAL GOVERNMENT ATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         28.57%         27.60%         -1.97           TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         28.57%         27.60%         -1.97           INPATIENT PAYMENTS TO OUTPATIENT CHARGES         40.98%         50.13%         0.277           1         MEDICAL SASISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         22.65%         20.31%         2.278           4         MEDICAL ASSISTANCE INCLUDING OTHER MEDICAL ASSISTANCE)         26.51%         29.21%         -1.30           6         OTHER MEDICAL ASSISTANCE         33.99%         0.34%         -24.80           6         OTHER MEDICAL ASSISTANCE         10.15%         17.28%         2.10           10         UNINSURED INCLUDED IN NON-GOVERNMENT)         10.15%         17.28%         2.10           10         UNINSURED INCLUDED IN NON-GOVERNMENT)         10.15%         17.28%         2.40           10         UNINSURED INCLUDED IN NON-GOVERNMENT)         10.15%         17.28%         2.10           10         UNINSURED INCLUDED IN NON-GOVERNMENT)         2.10         10.10%         37.30%         -2.41           10         UNINSURED INCLUDED	-				14.64%		
Part of the second se			2.62%	8.83%	6.21%		
TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES         38.34%         36.23%         -0.11           R. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES		TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES					
Instruction         Instruction         Instruction           Non-GOVERNMENT (INCLUDING SULP PAY/LININSURED)         49.88%         50.13%         0.24           Non-GOVERNMENT (INCLUDING OTHER MEDICAL ASSISTANCE)         26.5%         25.6%         1.275           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         26.5%         25.5%         25.6%         1.425           4         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         26.5%         25.2%         1.46           5         OFHAMPUS (ITRICARE         26.5%         25.2%         1.46           7         UNINSURFED INCLUDE ON NON-GOVERNMENT         7.3%         9.00%         0.692           7         UNINSURFED INCLUDE ON NON-GOVERNMENT         7.3%         9.00%         0.692           7         TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         1.46           7         TOTAL ACTOR OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         27.74%         37.30%         -9.24%           7         TOTAL ACTIVE OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         27.74%         37.30%         -9.24%           7         TOTAL ACCRUE DAYMENTS         S0         53.35.51.007         \$335.58.96.093         \$354.97.           1         <			29.57%	27.60%	-1.97%		
1         NON-GOVERNMENT (INCLUDING SELF PAY/UNINSURED)         49.89%         50.13%         0.24           1         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         76.56%         25.05%         1.52           3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         28.57%         25.65%         25.21%         1.33           3         OTHER MEDICAL ASSISTANCE         33.95%         9.34%         24.60           4         MEDICAL ASSISTANCE         33.95%         9.34%         24.60           5         OTHER MEDICAL ASSISTANCE         33.95%         9.34%         24.60           6         CHAMPUS TRICARE         20.42%         21.99%         1.46           7         OUNINSURED (INCLUDED IN NON-GOVERNMENTS TO OUTPATIENT CHARGES         37.54%         37.30%         8.00%         0.63           7         TOTAL GOVERNMENT FAITO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         37.54%         37.30%         4.60         37.54%         37.30%         8.00%         0.63           7         TOTAL ACCRUED PAYMENTS         TOTAL ACCRUED PAYMENTS         1.00         1.00         1.00         1.00         1.00         1.00         1.00         1.00         1.00         1.00         1.00         1.00         1.00		TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	36.34%	36.23%	-0.11%		
2         MEDICARE         17.56%         20.31%         2.77%           2         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         28.57%         25.21%         -1.52           4         MEDICAL ASSISTANCE         33.96%         9.34%         -24.60           6         CHAMPUS / TRICARE         15.16%         17.28%         2.10           7         JUNINSURFED INCLUDED IN NON-GOVERNMENT         7.36%         8.00%         0.433           7         TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         -4.60           7         TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         37.54%         37.30%         -0.24           7         TOTAL ACCRUED PAYMENTS         TOTAL ACCRUED PAYMENTS         2335.690.039         \$344.97           1         TOTAL ACCRUED PAYMENTS         PLUS DEPAYMENTS         \$335.690.039         \$344.97           1         PUTAL ACCRUED PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA         \$335.690.039         \$344.97           2         PLUS DEPAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA         \$335.896.039         \$344.97           3         PLUS (MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE         \$335.896.039         \$344.97	В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES					
3         MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)         26.57%         25.67%         25.07%	1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	49.88%	50.13%	0.24%		
4         MEDICALD         26.51%         22.21%         1.30°           5         OTHER MEDICAL ASSISTANCE         33.39%         9.34%         -24.60°           6         CHAMPUS / TRICARE         15.18%         17.28%         2.10°           10         UNINSURED IN NON-GOVERNMENT)         7.38%         8.00%         0.63°           10         TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         1.46°           10         TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         1.46°           10         TOTAL COVENMENT RATIO OF OUTPATIENT CHARGES         20.42%         1.46°         16           11         TOTAL ACCRUED PAYMENTS         COUPPATIENT PAYMENTS PLUS UPER LIMIT ADJ.) (OHCA         50         50         50           11         TOTAL ACCRUED PAYMENTS         S335.531.067         \$335.5896.039         \$364.97'           2         PLUS SH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPER LIMIT ADJ.) (OHCA         50         50         \$35           12         TOTAL ACCRUED PAYMENTS TO OHCA DEFINED NET REVENUE         \$335.531.067'         \$335.6980.039         \$364.97'           2         PLUS SIMITA ADJITMENTS TO OHCA DEFINED NET REVENUE         \$335.531.067'         \$334.13					2.75%		
5         OTHER NEDICAL ASSISTANCE         33.95%         9.34%         -24.60%           6         CHARMUS TRICARE         15.19%         17.28%         8.00%         0.63%           7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         7.36%         8.00%         0.63%           10TAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         1.46%           10TAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         37.54%         37.30%         -0.24%           VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS							
6       CHAMPUS / TRICARE       15.19%       17.28%       2.07         7       UNINSURED IN NON-GOVERNMENT]       7.38%       8.00%       0.63         7       UNINSURED IN NON-GOVERNMENT]       7.38%       8.00%       0.63         7       UNINSURED IN NON-GOVERNMENT ATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES       20.42%       21.89%       1.49         10       TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES       37.54%       37.30%       -0.24         VIII       NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	-						
7         UNINSURED (INCLUDED IN NON-GOVERNMENT)         7.36%         8.00%         0.63           TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         20.42%         21.89%         1.46           TOTAL AGIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         37.54%         37.30%         -0.24           TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES         37.54%         37.30%         -0.24           VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS							
TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES       20.42%       21.89%       1.46         TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES       37.54%       37.30%       -0.24         TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES       37.54%       37.30%       -0.24         VIII       NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	-				0.63%		
TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES       37.34%       37.30%       -0.24         VIII.       NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS			1.00 / 0	0.0070	0.0070		
A.       RECONCLIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			1.46% -0.24%		
A.       RECONCLIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	VIII.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT					
TOTAL ACCRUED PAYMENTS         \$335,531,067         \$335,896,039         \$364,97.           1         TOTAL ACCRUED PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA NPUT)         \$0							
2       PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)       \$0       \$0       \$0         0       OHCA DEFINED NET REVENUE       \$335,531,067       \$3335,896,039       \$364,977         3       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE       \$27,736,810       (\$1,764,125)       (\$29,500,931         4       CALCULATED NET REVENUE       \$334,131,914       (\$57,224,051         5       NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$363,267,877       \$334,131,914       (\$29,036,087         6       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$28,088,087       \$0       (\$28,088,087         1       OHCA DEFINED GROSS REVENUE       \$2908,958,362       \$913,394,783       \$4,436,427         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,427         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         3       GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,427         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4	Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	3				
2       PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)       \$0       \$0       \$0         0       OHCA DEFINED NET REVENUE       \$335,531,067       \$3335,896,039       \$364,977         3       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE       \$27,736,810       (\$1,764,125)       (\$29,500,931         4       CALCULATED NET REVENUE       \$334,131,914       (\$57,224,051         5       NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$363,267,877       \$334,131,914       (\$29,036,087         6       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$28,088,087       \$0       (\$28,088,087         1       OHCA DEFINED GROSS REVENUE       \$2908,958,362       \$913,394,783       \$4,436,427         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,427         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         3       GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,427         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4							
INPUT)         S0         S0           OHCA DEFINED NET REVENUE         \$335,531,067         \$335,890,039         \$364,977           3         PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE         \$27,736,810         (\$1,764,125)         (\$29,500,393           4         CALCULATED NET REVENUE         \$391,355,964         \$333,131,914         (\$57,224,057           5         NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)         \$363,267,877         \$334,131,914         (\$29,135,965           6         VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)         \$28,088,087         \$0         \$20           7         \$04CA DEFINED GROSS REVENUE         \$100 HOSPITAL AUDITED FINANCIAL STATEMENTS         \$100 HCA DEFINED GROSS REVENUE         \$100 HCA DEFINED HCOMPORENCAL STATEMENT			\$335,531,067	\$335,896,039			
OHCA DEFINED NET REVENUE         \$335,531,067         \$335,696,039         \$364,977           3         PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE         \$27,736,810         (\$1,764,126)         (\$29,500,934           4         CALCULATED NET REVENUE         \$331,355,364         \$334,131,914         (\$57,224,051           5         NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)         \$363,267,877         \$334,131,914         (\$29,135,961           6         VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)         \$28,088,087         \$0         (\$28,088,087           7         OHCA DEFINED GROSS REVENUE         OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS			\$0	\$0	<b>Ф</b> О		
4       CALCULATED NET REVENUE       \$391,355,964       \$334,131,914       (\$57,224,051         5       NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$363,267,877       \$334,131,914       (\$29,135,961         6       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$28,088,087       \$0       (\$28,088,087         8       RECONCLIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS       1       0HCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         3       GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         5       C       C       RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS       \$41,459,477       \$36,108,044       \$56,351,433 <t< td=""><td></td><td></td><td>+ -</td><td>+ ·</td><td>\$364,972</td></t<>			+ -	+ ·	\$364,972		
4       CALCULATED NET REVENUE       \$391,355,964       \$334,131,914       (\$57,224,051         5       NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$363,267,877       \$334,131,914       (\$29,135,961         6       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$28,088,087       \$0       (\$28,088,087         8       RECONCLIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS       1       0HCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         3       GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         5       C       C       RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS       \$41,459,477       \$36,108,044       \$56,351,433 <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>							
5       NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$363,267,877       \$334,131,914       (\$29,135,96)         6       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$28,088,087       \$0       (\$28,088,087)         7       0       \$28,088,087       \$0       (\$28,088,087)         8       RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS					(+ - / / /		
REPORTING)       Additional and the second sec	4		\$391,355,964	\$334,131,914	(\$57,224,050)		
6       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$28,088,087       \$0       (\$28,088,087         6       RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS       \$0       \$3         1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,427         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$1         3       GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,427         3       GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$908,958,362       \$913,394,783       \$4,436,427         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$1         1       OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS       \$41,459,477       \$36,108,044       \$5,351,433         2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE       \$0       \$0       \$3         3       UNCOMPENSATED CARE (CHARITY CARE AND BA	5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL	\$363,267,877	\$334,131,914	(\$29,135,963)		
B.       RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS         1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42'         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         3       GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$908,958,362       \$913,394,783       \$4,436,42'         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         1       OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		REPORTING)					
1       OHCA DEFINED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42'         2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         3       GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$908,958,362       \$913,394,783       \$4,436,42'         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         1       OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,43:         2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE       \$0       \$0       \$0         3       UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,43:         4       UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,43:         4       UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,43:         4       UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,43: <td>6</td> <td>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</td> <td>\$28,088,087</td> <td>\$0</td> <td>(\$28,088,087)</td>	6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$28,088,087	\$0	(\$28,088,087)		
2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         CALCULATED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42°         3       GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$908,958,362       \$913,394,783       \$4,436,42°         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         5       C       C       C       C       C       C         1       OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,433         2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE       \$0       \$0       \$0         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)       \$41,459,477       \$36,108,044       (\$5,351,433         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)       \$41,459,477       \$36,108,044       (\$5,351,433	B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEME	NTS				
2       PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE       \$0       \$0       \$0         CALCULATED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42°         3       GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$908,958,362       \$913,394,783       \$4,436,42°         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0       \$0         5       C       C       C       C       C       C         1       OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,433         2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE       \$0       \$0       \$0         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)       \$41,459,477       \$36,108,044       (\$5,351,433         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)       \$41,459,477       \$36,108,044       (\$5,351,433	1		\$008 050 262	¢012 204 702	¢1 100 101		
CALCULATED GROSS REVENUE       \$908,958,362       \$913,394,783       \$4,436,42'         3       GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)       \$908,958,362       \$913,394,783       \$4,436,42'         4       VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)       \$0       \$0       \$0         6							
REPORTING)       Image: Constraint of the second seco					\$4,436,421		
REPORTING)       Image: Constraint of the second seco	0		¢000.050.000	¢040.004.700	¢4 400 404		
C.       RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS         1       OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)         2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)		•	\$908,958,362	\$913,394,783	\$4,436,421		
1         OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)         \$41,459,477         \$36,108,044         (\$5,351,432           2         PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE         \$0 <td>4</td> <td>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</td> <td>\$0</td> <td>\$0</td> <td>\$0</td>	4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0		
2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE       \$0       \$0       \$0         CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,433)         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)       \$41,459,477       \$36,108,044       (\$5,351,433)	C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENT	<u>[</u>				
2       PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE       \$0       \$0       \$0         CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)       \$41,459,477       \$36,108,044       (\$5,351,433)         3       UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)       \$41,459,477       \$36,108,044       (\$5,351,433)			<b>A</b> 4 4 5 0 4	<b>#</b> 22.422.5	(05.051.105)		
CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)         \$41,459,477         \$36,108,044         (\$5,351,43)           3         UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)         \$41,459,477         \$36,108,044         (\$5,351,43)			. , ,				
3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$41,459,477 \$36,108,044 (\$5,351,433					\$0 (\$5 351 433)		
		VALOULATED UNOUNIT LINATED VAILE (UTAILITT VAILE AND DAD DEDTO)	φ+1,403,477	φ30,100,044	(40,001,400)		
4     VARIANCE (MUST RELESS THAN OR FOLIAL TO \$500)     \$0     \$0	3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$41,459,477	\$36,108,044	(\$5,351,433)		
	4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0		

NORWALK HOSPITAL	
TWELVE MONTHS ACTUAL FILING	
FISCAL YEAR 2013	
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(2)	(3)
(2)	ACTUAL
	FY 2013
	<u>F12013</u>
GES AND PAYMENTS	
D CHARGES	
(INCLUDING SELF PAY / UNINSURED)	\$132,429,295
	243,146,941
CE (INCLUDING OTHER MEDICAL ASSISTANCE)	75,009,576
	74,431,040
SISTANCE	578,536
	477,701
	5,189,210
DVERNMENT CHARGES	\$318,634,218 \$451,063,513
IAR GES	\$451,005,515
ED CHARGES	
(INCLUDING SELF PAY / UNINSURED)	\$252,355,457
	139,541,554
CE (INCLUDING OTHER MEDICAL ASSISTANCE)	70,109,135
	69,452,300
SISTANCE	656,835
	325,124
DED IN NON-GOVERNMENT) GOVERNMENT CHARGES	29,957,432 \$209,975,813
CHARGES	\$209,973,813
UTAKOE0	<u> </u>
IARGES	
IMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$384,784,752
T ACCRUED CHARGES	528,610,031
IARGES	\$913,394,783
D PAYMENTS (INCLUDING SELF PAY / UNINSURED)	¢75,492,509
INCLUDING SELF PAY / UNINSURED)	\$75,483,598 72,173,862
CE (INCLUDING OTHER MEDICAL ASSISTANCE)	15,613,206
	15,518,342
SISTANCE	94,864
	166,560
DED IN NON-GOVERNMENT)	458,039
OVERNMENT PAYMENTS	\$87,953,628
AYMENTS	\$163,437,226
ED PAYMENTS	
INCLUDING SELF PAY / UNINSURED)	\$126,499,308
	28,335,378
CE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,567,940
	17,506,571
SISTANCE	61,369
	56,187
DED IN NON-GOVERNMENT)	2,395,471
GOVERNMENT PAYMENTS	\$45,959,505
PAYMENTS	\$172,458,813
VMENTS	
YMENTS IMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$201,982,906
IMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	<u>\$201,982,906</u> 133,913,133
	\$335,896,039
ARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
	AYMENTS ARGES, CASE MIX INDEX AND OTHER REQUIRED DATA GES

	NORWALK HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(י)	(2)	ACTUAL
	DESCRIPTION	FY 2013
		<u>1 1 2015</u>
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,90
	MEDICARE	5,31
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,80
4 5	MEDICAID OTHER MEDICAL ASSISTANCE	2,78
	CHAMPUS / TRICARE	1
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	19
	TOTAL GOVERNMENT DISCHARGES	8,13
	TOTAL DISCHARGES	13,04
В.	CASE MIX INDEX	1
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.0750
2		1.4406
3 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	0.9594
-	OTHER MEDICAL ASSISTANCE	1.0138
-	CHAMPUS / TRICARE	1.5285
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.0651
	TOTAL GOVERNMENT CASE MIX INDEX	1.2750
	TOTAL CASE MIX INDEX	1.19979
	OTHER REQUIRED DATA	
	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$349,638,109
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$199,129,397
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$150,508,712
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	43.05%
	EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$17,735,548
0		\$11,644,353
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
		\$18,272,000
-	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$17,836,044 \$36,108,044
10		\$30,100,044
11	TOTAL OTHER OPERATING REVENUE	\$16,843,048
12	TOTAL OPERATING EXPENSES	\$338,981,125
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
Α.	RECONCILIATION OF ORCA DEFINED NET REVENUE TO ROSPITAL ADDITED FIN. STATEMENTS	
	TOTAL ACCRUED PAYMENTS	\$335,896,039
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
		\$335,896,039
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$1,764,125
-	CALCULATED NET REVENUE	\$334,131,914
4		<b>ФООЛ 101 01</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$334,131,914
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$913,394,783
	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

E

Т

-

	NORWALK HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2013	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
		ACTUAL
LINE	DESCRIPTION	FY 2013
	CALCULATED GROSS REVENUE	\$913,394,783
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$913,394,783
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$36,108,044
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$30,108,044
-	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$36,108,044
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$36,108,044
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

		S ACTUAL FILING					
	FISCAL YEAR 2013 REPORT 650 - HOSPITAL UNCOMPENSATED CARE						
	REPORT 000 - NOSPITAL	UNCOMPENSATEL	JCARE				
(1)	(2)	(3)	(4)	(5)	(6)		
(-)	(-)	ACTUAL	ACTUAL	AMOUNT	%		
INE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE		
Α.	Hospital Charity Care (from HRS Report 500)						
1	Number of Applicants	5,008	5,135	127	3%		
2	Number of Approved Applicants	4,318	4,361	43	19		
~		¢47.000.000	¢10.070.000	<b>\$</b> 0.40,000			
3	Total Charges (A)	\$17,929,000	\$18,272,000	\$343,000	29		
4	Average Charges	\$4,152	\$4,190	\$38	19		
5	Ratio of Cost to Charges (RCC)	0.390722	0.389501	(0.001221)	0%		
6	Total Cost	\$7,005,255	\$7,116,962	\$111,708	2%		
7	Average Cost	\$1,622	\$1,632	\$10	19		
-		<i> </i>	+ - ,				
8	Charity Care - Inpatient Charges	\$2,742,745	\$2,478,477	(\$264,268)	-10%		
9	Charity Care - Outpatient Charges (Excludes ED Charges)	10,121,147	10,856,254	735,107	79		
10	Charity Care - Emergency Department Charges	5,065,108	4,937,269	(127,839)	-3%		
11	Total Charges (A)	\$17,929,000	\$18,272,000	\$343,000	2%		
12	Charity Care - Number of Patient Days	1,366	1,450	84	6%		
13	Charity Care - Number of Discharges	330	319	(11)	-3%		
14	Charity Care - Number of Outpatient ED Visits	2,289	2,276	(13)	-19		
••	Charity Care - Number of Outpatient Visits (Excludes ED	2,200	2,210	(10)			
15	Visits)	14,697	15,478	781	5%		
			,				
В.	Hospital Bad Debts (from HRS Report 500)						
1	Bad Debts - Inpatient Services	\$7,434,470	\$4,741,877	(\$2,692,593)	-36%		
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	6,223,202	3,232,452	(2,990,750)	-48%		
3	Bad Debts - Emergency Department	9,872,805	9,861,715	(11,090)	0%		
4	Total Bad Debts (A)	\$23,530,477	\$17,836,044	(\$5,694,433)	-24%		
C.	Hospital Uncompensated Care (from HRS Report 500)						
1	Charity Care (A)	\$17,929,000	\$18,272,000	\$343,000	29		
2	Bad Debts (A)	23,530,477	17,836,044	(5,694,433)	-24%		
3	Total Uncompensated Care (A)	\$41,459,477	\$36,108,044	(\$5,351,433)	-13%		
4	Uncompensated Care - Inpatient Services	\$10,177,215	\$7,220,354	(\$2,956,861)	-29%		
•	Uncompensated Care - Outpatient Services (Excludes ED	<i>\(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>	÷.,220,001	(+=,000,001)			
5	Unc. Care)	16,344,349	14,088,706	(2,255,643)	-149		
6	Uncompensated Care - Emergency Department	14,937,913	14,798,984	(138,929)	-19		
7	Total Uncompensated Care (A)	\$41,459,477	\$36,108,044	(\$5,351,433)	-139		

		NORWALK HOSPIT	AL		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 201	•		
	REPORT 685 - HOSPITAL NON	I-GOVERNMENT GROSS RE	· · · · · · · · · · · · · · · · · · ·	ALLOWANCES,	
	ACCRUI	ED PATMENTS AND DISCOU	JNIPERCENTAGE		
(1)	(2)	(3) FY 2012	(4) FY 2013	(5)	(6)
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$363,988,504	\$349,638,109	(\$14,350,395)	-4%
2	Total Contractual Allowances	\$164,825,999	\$150,508,712	(\$14,317,287)	-9%
	Total Accrued Payments (A)	\$199,162,505	\$199,129,397	(\$33,108)	0%
	Total Discount Percentage	45.28%	43.05%	-2.24%	-5%
	Downersta and sisted with New Ocurrent				d Care
(A) A0	ccrued Payments associated with Non-Governme	nt contractual Allowances r	nust exclude any reduction	n for Uncompensate	a care.

### TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY 2013</u>
А.	Gross and Net Revenue			
1	Inpatient Gross Revenue	\$456,194,748	\$473,961,549	\$451,063,513
2	Outpatient Gross Revenue	\$397,763,358	\$434,996,813	\$462,331,270
3	Total Gross Patient Revenue	\$853,958,106	\$908,958,362	\$913,394,783
4	Net Patient Revenue	\$350,594,448	\$363,267,877	\$334,131,914
В.	Total Operating Expenses			
1	Total Operating Expense	\$338,475,864	\$361,951,445	\$338,981,125
C.	Utilization Statistics			
1	Patient Days	70,355	67,341	59,611
2	Discharges	14,878	15,003	13,045
3	Average Length of Stay	4.7	4.5	4.6
4	Equivalent (Adjusted) Patient Days (EPD)	131,699	129,146	120,711
0	Equivalent (Adjusted) Discharges (ED)	27,850	28,773	26,416
D.	Case Mix Statistics			
1	Case Mix Index	1.17288	1.13031	1.19979
2	Case Mix Adjusted Patient Days (CMAPD)	82,518	76,117	71,521
3	Case Mix Adjusted Discharges (CMAD)	17,450	16,958	15,651
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	154,466	145,975	144,828
5	Case Mix Adjusted Equivalent Discharges (CMAED)	32,665	32,522	31,694
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$12,138	\$13,498	\$15,323
2	Total Gross Revenue per Discharge	\$57,397	\$60,585	\$70,019
3	Total Gross Revenue per EPD	\$6,484	\$7,038	\$7,567
4	Total Gross Revenue per ED	\$30,662	\$31,591	\$34,578
5	Total Gross Revenue per CMAEPD	\$5,528	\$6,227	\$6,307
6	Total Gross Revenue per CMAED	\$26,143	\$27,949	\$28,820
7	Inpatient Gross Revenue per EPD	\$3,464	\$3,670	\$3,737
8	Inpatient Gross Revenue per ED	\$16,380	\$16,473	\$17,075

### TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL
<u>LINE</u>	DESCRIPTION	<u>FY 2011</u>	<u>FY 2012</u>	<u>FY 2013</u>
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$4,983	\$5,394	\$5,605
2	Net Patient Revenue per Discharge	\$23,565	\$24,213	\$25,614
3	Net Patient Revenue per EPD	\$2,662	\$2,813	\$2,768
4	Net Patient Revenue per ED	\$12,589	\$12,625	\$12,649
5	Net Patient Revenue per CMAEPD	\$2,270	\$2,489	\$2,307
6	Net Patient Revenue per CMAED	\$10,733	\$11,170	\$10,543
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$4,811	\$5,375	\$5,687
2	Total Operating Expense per Discharge	\$22,750	\$24,125	\$25,986
3	Total Operating Expense per EPD	\$2,570	\$2,803	\$2,808
4	Total Operating Expense per ED	\$12,153	\$12,580	\$12,832
5	Total Operating Expense per CMAEPD	\$2,191	\$2,480	\$2,341
6	Total Operating Expense per CMAED	\$10,362	\$11,129	\$10,696
Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$45,217,418	\$46,217,962	\$46,255,451
2	Nursing Fringe Benefits Expense	\$12,997,496	\$14,427,766	\$15,513,984
3	Total Nursing Salary and Fringe Benefits Expense	\$58,214,914	\$60,645,728	\$61,769,435
I.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$15,263,892	\$9,930,604	\$11,928,508
2	Physician Fringe Benefits Expense	\$3,697,361	\$2,996,514	\$3,620,814
3	Total Physician Salary and Fringe Benefits Expense	\$18,961,253	\$12,927,118	\$15,549,322
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$71,810,399	\$77,433,917	\$80,198,641
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$25,879,074	\$30,346,364	\$32,551,822
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$97,689,473	\$107,780,281	\$112,750,463

### TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY 2013</u>
К.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$132,291,709	\$133,582,483	\$138,382,600
2	Total Fringe Benefits Expense	\$42,573,931	\$47,770,644	\$51,686,620
3	Total Salary and Fringe Benefits Expense	\$174,865,640	\$181,353,127	\$190,069,220
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	462.7	453.2	450.4
2	Total Physician FTEs	103.9	90.7	91.8
3	Total Non-Nursing, Non-Physician FTEs	1131.8	1154.9	1143.2
4	Total Full Time Equivalent Employees (FTEs)	1,698.4	1,698.8	1,685.4
М.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$97,725	\$101,981	\$102,699
2	Nursing Fringe Benefits Expense per FTE	\$28,091	\$31,835	\$34,445
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$125,816	\$133,817	\$137,144
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$146,909	\$109,488	\$129,940
2	Physician Fringe Benefits Expense per FTE	\$35,586	\$33,038	\$39,442
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$182,495	\$142,526	\$169,383
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense r	ber FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$63,448	\$67,048	\$70,153
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$22,865	\$26,276	\$28,474
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$86,313	\$93,324	\$98,627
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$77,892	\$78,633	\$82,107
2	Total Fringe Benefits Expense per FTE	\$25,067	\$28,120	\$30,667
3	Total Salary and Fringe Benefits Expense per FTE	\$102,959	\$106,754	\$112,774
Q.	Total Salary and Fringe Ben. Expense per Statistic			

### TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2013

-				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2011</u>	ACTUAL <u>FY 2012</u>	ACTUAL <u>FY 2013</u>
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,485	\$2,693	\$3,188
2	Total Salary and Fringe Benefits Expense per Discharge	\$11,753	\$12,088	\$14,570
3	Total Salary and Fringe Benefits Expense per EPD	\$1,328	\$1,404	\$1,575
4	Total Salary and Fringe Benefits Expense per ED	\$6,279	\$6,303	\$7,195
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,132	\$1,242	\$1,312
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,353	\$5,576	\$5,997