(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
А.	AFFILIATE NAME	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.	
7.			
	Affiliate Description	BH&HCG IS THE PARENT CORPORATION.	
	Affiliate type of service	Parent Corporation	
	Tax Status	Not for Profit	
	Street Address	Brewster Road	
	Town	Bristol	
	State	Connecticut 06011 -	
	Zip Code CEO Name	Kurt Barwis	
	CEO Title	President	
	CT Agent Name	Kurt Barwis	
	CT Agent Company	Bristol Hospital, Inc.	
	CT Agent Company Street Address	Brewster Rd	
	CT Agent Town	Bristol	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06010 -	
В.	AFFILIATE NAME	BRISTOL HEALTH CARE INC.	
4	Affiliate Departmention		
	Affiliate Description	BRISTOL HEALTH CARE PROVIDES LONG TERM CARE AND ADULT DAY CARE SERVICES.	
	Affiliate type of service Tax Status	Long Term Care Not for Profit	
-	Street Address	400 North Main Street	
	Town	Bristol	
	State	Connecticut	
	Zip Code	06010 -	
	CEO Name	Kurt Barwis	
	CEO Title	President	
	CT Agent Name	Kurt Barwis	
	CT Agent Company	Bristol Hospital, Inc.	
	CT Agent Company Street Address	Brewster Rd	
13	CT Agent Town	Bristol	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06010 -	
C.	AFFILIATE NAME	BRISTOL HEALTH SERVICES, INC.	
1	Affiliate Description	HOLDING COMPANY FOR EMS.	
	Affiliate type of service	Other HealthCare Svcs(Specify)	
	Tax Status	Not for Profit	
	Street Address	Brewster Road	
	Town	Bristol	
	State	Connecticut	
	Zip Code	06011 -	
8	CEO Name	Kurt Bawis	
9	CEO Title	President	
	CT Agent Name	Kurt Barwis	
11	CT Agent Company	Bristol Hospital, Inc.	

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
	CT Agent Company Street Address	Brewster Road	
	CT Agent Town	Bristol	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06010 -	
D.	AFFILIATE NAME	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.	
<i>D</i> .		BROTOE HOOT THE DEVELOT MERT TOORDATION, INC.	
		BRISTOL HOSPITAL DEVELOPMENT FOUNDATION PROVIDES FUND RAISING AND MANAGEMENT	
1	Affiliate Description	SERVICES.	
2	Affiliate type of service	Fund Raising/Management	
3	Tax Status	Not for Profit	
4	Street Address	Brewster Road	
5	Town	Bristol	
6	State	Connecticut	
7	Zip Code	06011 -	
8	CEO Name	Kurt Barwis	
9		President	
	CT Agent Name	Kurt Barwis	
11	CT Agent Company	Bristol Hospital, Inc.	
	CT Agent Company Street Address	Brewster Rd	
	CT Agent Town	Bristol	
	CT Agent State CT Agent Zip Code	Connecticut 06010 -	
15		00010-	
E.	AFFILIATE NAME	BRISTOL HOSPITAL EMS, LLC.	
1	Affiliate Description	EMS-AMBULANCE SERVICE	
2	Affiliate type of service	Other HealthCare Svcs(Specify)	
3	Tax Status	For Profit	
4	Street Address	Brewster Road	
5	Town	Bristol	
6	State	Connecticut	
7	Zip Code	06011 -	
8		Kurt Barwis	
9		President Virt Denvie	
	CT Agent Name	Kurt Barwis	
11	CT Agent Company	Bristol Hospital, Inc.	
12 13	CT Agent Company Street Address	Brewster Road Bristol	
13	CT Agent Town CT Agent State	Connecticut	
14			
10			
	CT Agent Zip Code	06010 -	
F.	CT Agent Zip Code		
F.		06010 -	
F.	CT Agent Zip Code	06010 - BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC To practice medicine and provide healthcare services to all persons without regard to their ability to pay and	
1	CT Agent Zip Code AFFILIATE NAME Affiliate Description	06010 -         BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         To practice medicine and provide healthcare services to all persons without regard to their ability to pay and provide support for the tax-exempt charitable missions of Bristol Hospital.	
1 2	CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service	06010 -         BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         To practice medicine and provide healthcare services to all persons without regard to their ability to pay and provide support for the tax-exempt charitable missions of Bristol Hospital.         Other HealthCare Svcs(Specify)	
1 2 3	CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	06010 -         BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         To practice medicine and provide healthcare services to all persons without regard to their ability to pay and provide support for the tax-exempt charitable missions of Bristol Hospital.         Other HealthCare Svcs(Specify)         Not for Profit	
1 2 3 4	CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status Street Address	06010 -         BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         To practice medicine and provide healthcare services to all persons without regard to their ability to pay and provide support for the tax-exempt charitable missions of Bristol Hospital.         Other HealthCare Svcs(Specify)         Not for Profit         240 Main Street	
1 2 3	CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	06010 -         BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         To practice medicine and provide healthcare services to all persons without regard to their ability to pay and provide support for the tax-exempt charitable missions of Bristol Hospital.         Other HealthCare Svcs(Specify)         Not for Profit	

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
7	Zip Code	06010 -
8	CEO Name	Karen Guadagnini, MD
9	CEO Title	President
10	CT Agent Name	MCR&P SERVICE CORPORATION
11	CT Agent Company	
12	CT Agent Company Street Address	C/O MURTHA CULLINA LLP,, CITYPLACE 1, 185 ASYLUM STREET
13	CT Agent Town	HARTFORD
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 3469
G.	AFFILIATE NAME	BRISTOL MSO, LLC
1	Affiliate Description	PROVIDES RADIOLOGY SERVICE
	Affiliate type of service	Imaging Services
	Tax Status	For Profit
_	Street Address	Brewster Rd
	Town	Bristol
	State	Connecticut
	Zip Code	06010 -
	CEO Name	John Walker MD
	CEO Title	President
_	CT Agent Name	Kurt Barwis
	CT Agent Company	Radiologic Associates, PC
	CT Agent Company CT Agent Company Street Address	Brewtser Rd
	CT Agent Town	Bristol
	CT Agent State	Connecticut
	CT Agent Zip Code	06010 -
15	CT Agent Zip Code	
н.	AFFILIATE NAME	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC
1	Affiliate Description	Provide Endoscopy Services
	Affiliate type of service	Ambulatory Services
	Tax Status	For Profit
	Street Address	40 Hart Street
5	Town	New Britian
	State	Connecticut
	Zip Code	06052 -
	CEO Name	Mark R. Versland, MD
	CEO Title	Manager
	CT Agent Name	Manager Mark F. Korber
	CT Agent Company	MCR&P Service Corporation
	CT Agent Company CT Agent Company Street Address	185 Asylum Street
	CT Agent Town	Hartford
	CT Agent State	Connecticut
	CT Agent Zip Code	06103 - 3469
13		
١.	AFFILIATE NAME	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS
1	Affiliate Description	Manage and Market Occupational Health Services

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
	Affiliate type of service	Occupational Heath	
3	Tax Status	For Profit	
4	Street Address	675 Tower Avenue, Suite 404B	
5	Town	Hartford	
6	State	Connecticut	
	Zip Code	06112 -	
-	CEO Name	Derrick Amato	
	CEO Title	President & CEO	
	CT Agent Name	Diane Bertrand	
	CT Agent Company	Connecticut Occupational Medical Partners	
	CT Agent Company Street Address	675 Tower Avenue, Suite 404B	
	CT Agent Town CT Agent State	Hartford	
	CT Agent Zip Code	Connecticut 06112 -	
15	CT Agent Zip Code		
J.	AFFILIATE NAME		
0.			
		Ingraham Manor is a skilled nursing facility providing long term care. It is the wholly-owned subsidiary of	
1	Affiliate Description	Bristol Health Care, Inc.	
2	Affiliate type of service	Long Term Care	
3	Tax Status	Not for Profit	
4	Street Address	400 North Main Street	
5	Town	Bristol	
6	State	Connecticut	
7	Zip Code	06010 -	
8	CEO Name	Kurt Barwis	
9	CEO Title	President	
10	CT Agent Name	Kurt Barwis	
	CT Agent Company		
	CT Agent Company Street Address	400 North Main Street	
	CT Agent Town	Bristol	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06010 -	
К.	AFFILIATE NAME	MEDCONN COLLECTION AGENCY, LLC	
1	Affiliate Description	COLLECTION AGENCY	
	Affiliate type of service	Collection Agency	
3	Tax Status	For Profit	
	Street Address	2049 Silas Deane Highway, 3rd	
	Town	Rocky Hill	
	State	Connecticut	
	Zip Code	06067 -	
	CEO Name	Daniel Cass	
	CEO Title	Executive Director	
	CT Agent Name	Stephen J. Anderson	
	CT Agent Company	MedConn Collection Agency	
	CT Agent Company Street Address	136 West Main Street	
	CT Agent Town	New Britain	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06050 -	

(1)	(2)	(3)
	DESCRIPTION	AFFILIATE INFORMATION
L.	AFFILIATE NAME	MEDWORKS, LLC
1	Affiliate Description	
1	Affiliate Description Affiliate type of service	PROVIDES OCCUPATIONAL HEALTH SERVICES. Occupational Heath
3	Tax Status	For Profit
4	Street Address	375 E. Cedar Street
4 5	Town	Newington
6	State	Connecticut
7	Zip Code	06111 -
8	CEO Name	Derrick Amato
9	CEO Title	President & CEO
		Diane Bertrand
	CT Agent Name CT Agent Company	Medworks, LLC
	CT Agent Company Street Address	675 Tower Avenue, Suite 404B
	CT Agent Town	Hartford
	CT Agent State	Connecticut
	CT Agent Zip Code	06112 -
15	CT Agent Zip Code	00112
_		
м.	AFFILIATE NAME	TOTAL LAUNDRY COLLABORATIVE, LLC
1	Affiliate Description	Provide laundry services to Members, Members' Affiliates, and others.
2	Affiliate type of service	Affilate Support Services
3	Tax Status	For Profit
4	Street Address	114 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	David Crowell
	CEO Title	Cheif Operating Officer
	CT Agent Name	Teresa M. Bolton
-	CT Agent Company	Total Laundry Collaborative, LLC
	CT Agent Company Street Address	114 Woodland Street
	CT Agent Town	Hartford
	CT Agent State	Connecticut
	CT Agent Zip Code	06105 -

\* P.O. BOX IS UNACCEPTABLE WITHOUT A

STREET ADDRESS FOR EACH AGENT COMPANY

## BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
. /		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2013
Α.	BRISTOL HOSPITAL		
1		Unrestricted	\$15,896,282
2		Temporarily Restricted by Donor	\$3,555,410
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$7,020,579
5		Intercompany Eliminations	\$0
		Total:	\$26,472,271
В.	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.		
1		Unrestricted	\$28,607,725
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$34,778,542)
		Total:	(\$6,170,817)
С.	BRISTOL HEALTH CARE INC.		
1		Unrestricted	\$845,896
2		Temporarily Restricted by Donor	\$29,793
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$875,689
D.	BRISTOL HEALTH SERVICES, INC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
Ε.	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.		
1		Unrestricted	\$6,209,935
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$6,209,935
F.	BRISTOL HOSPITAL EMS, LLC.		
1	· · ·	Unrestricted	\$810,386
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$810,386
			70.0,000
G.	BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC		
1		Unrestricted	\$410,261
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
5		remporancy resultied by Dualu	ψŪ

## BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
		FUND DESCRIPTION /	BALANCE AS OF
LINE		FUND PURPOSE	9/30/2013
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$410,261
н.	BRISTOL MSO, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
-			
1.	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC		
1		Unrestricted	\$0 \$0
<u>2</u> 3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
<u> </u>		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
-		Total:	\$0
J.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
К.	INGRAHAM MANOR		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
L. 1	MEDCONN COLLECTION AGENCY, LLC	Uprostricted	\$0
2		Unrestricted Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Doard	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	MEDWORKS, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0
5		Total:	\$0 \$0
			\$0
Ν.	TOTAL LAUNDRY COLLABORATIVE, LLC		

## BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2013
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$63,386,267
	Intercompany Eliminations		(\$34,778,542)
	Total of all Affiliates	Fund Balance:	\$28,607,725

### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE		DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Α.	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.			
А.	BRISTOL HOSPITAL & HEALTH CARE GROOP, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$10,631,335
1		Net Asset Transfer	09/30/2013	\$15,840,935
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$26,472,270
				+ -, , -
В.	BRISTOL HEALTH CARE INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$1,689,948
1		Payments	09/30/2013	(\$1,807,210)
2		Sale of Services	09/30/2013	\$1,066,405
3		Interest	09/30/2013	\$767,587
4		Employee Benefits	09/30/2013	\$167,078
5		Rent	09/30/2013	\$2,022
6		Pension and Forgiveness of Debt	09/30/2013	(\$1,414,373)
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$471,457
С.	BRISTOL HEALTH SERVICES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report	0/00/0010	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
D.	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$8,182,969
1		Beneficial Interest	09/30/2013 09/30/2013	(\$6,806,099)
2 3		Rent Salaries & Benefits	09/30/2013	\$6,000 \$540,049
4		Purchase of Services	09/30/2013	\$11,975
5		Forgiveness of Debt	09/30/2013	(\$1,473,516)
Ű		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$461,378
				+
E.	BRISTOL HOSPITAL EMS, LLC.			
<u> </u>				
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$45,486
1		Rent	09/30/2013	\$49,000
2		Purchase of Services	09/30/2013	\$289,285
3		Payments	09/30/2013	(\$496,419)
4		Salaries & Benefits	09/30/2013	\$172,481

#### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$59,833
F.	BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$44,888
1		Salaries & Benefits	09/30/2013	\$167,597
2		Rent	09/30/2013	\$268,295
3		Purchase of Services	09/30/2013	(\$5,062,809)
4		Cash Transfer	09/30/2013	\$5,055,000
5		Forgiveness of Debt	09/30/2013	(\$472,971)
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
-				
G.	BRISTOL MSO, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
H.	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
1.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
J.	INGRAHAM MANOR			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
Κ.	MEDCONN COLLECTION AGENCY, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0

#### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
L.	MEDWORKS, LLC			
		Beginning Unconsolidated Intercompany Balance: Nothing to Report	9/30/2012	<b>\$0</b> \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
М.	TOTAL LAUNDRY COLLABORATIVE, LLC			
		Beginning Unconsolidated Intercompany Balance: Nothing to Report Ending Unconsolidated Intercompany Balance:	9/30/2012	\$0 \$0 \$0
		Linding Onconsolidated intercompany Balance.	9/30/2013	<b>\$</b> 0
			Grand Total:	\$27,464,938

#### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Beginning Unconsolidated Intercompany Balance	10/01/2012	¢7 500 404
Α.	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.		Intercompany Balance	10/01/2012	\$7,508,194
	BRIDTOE HOOT THE WITERE TH DARE DROOT, INC.		Parent Company Investment in		
1		BRISTOL HOSPITAL EMS, LLC.	Subsidiary Net Assets	09/30/2013	\$134,618
		BRISTOL HOSPITAL DEVELOPMENT	Parent Company Investment in		
2		FOUNDATION, INC.	Subsidiary Net Assets	09/30/2013	(\$590,707)
			Parent Company Investment in		<b>*</b> · · · · <b>-</b> · · ·
3		BRISTOL HEALTH CARE INC. BRISTOL HOSPITAL MULTISPECIALTY GROUP,	Subsidiary Net Assets Parent Company Investment in	09/30/2013	\$1,243,713
4		INC	Subsidiary Net Assets	09/30/2013	\$40,248
			Total:	9/30/2013	\$827,872
				0/00/2010	<b>Q</b> 021,012
В.	BRISTOL HEALTH CARE INC.				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
С.	BRISTOL HEALTH SERVICES, INC.				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
-					
D.	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.		Nothing to Report		\$0
┣───			Total:	9/30/2013	\$0 <b>\$0</b>
			Total.	9/30/2013	40
E.	BRISTOL HOSPITAL EMS, LLC.				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
F.	BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
G.	BRISTOL MSO, LLC		Nothing to Doport		<b>#</b> 0
}			Nothing to Report Total:	9/30/2013	\$0 <b>\$0</b>
			rotai:	9/30/2013	<b>پ</b> ۵
Н.	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC				
<u>⊢ …</u>			Nothing to Report		\$0
			Total:	9/30/2013	\$0
١.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0

#### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
J.	INGRAHAM MANOR				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
К.	MEDCONN COLLECTION AGENCY, LLC				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
L.	MEDWORKS, LLC				• •
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
М.	TOTAL LAUNDRY COLLABORATIVE, LLC				<b>*</b>
			Nothing to Report	0/00/0040	\$0
			Total:	9/30/2013	\$0
			Ending Unconcolidated		
			Ending Unconsolidated Intercompany Balance	9/30/2013	\$8,336,066

### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(1)	(2)		(3)	(4)
	AFFILIATE NAME &			
LINE	DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
Α.	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.			
<b>А</b> . 0	Nothing to Report		\$0	
		Total:	\$0 \$0	9/30/2013
В.	BRISTOL HEALTH CARE INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
<b>C</b> .	BRISTOL HEALTH SERVICES, INC. Nothing to Report		\$0	
Ŭ		Total:	\$0 \$0	9/30/2013
D.	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
-				
Е. 0	BRISTOL HOSPITAL EMS, LLC. Nothing to Report		¢0.	
0	Nothing to Report	Total:	\$0 <b>\$0</b>	9/30/2013
		Totall	φ <b>υ</b>	5/50/2015
F.	BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
G.	BRISTOL MSO, LLC			
0	Nothing to Report	Totol	\$0	0/00/0040
		Total:	\$0	9/30/2013
н.	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC			
0	Nothing to Report		\$0	
	5 1	Total:	\$0	9/30/2013
I.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
<b>—</b>				
<b>J.</b> 0	INGRAHAM MANOR Nothing to Report		\$0	
⊢—́		Total:	\$0 \$0	9/30/2013
К.	MEDCONN COLLECTION AGENCY, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
<b>-</b>				
L. 0	MEDWORKS, LLC Nothing to Report		<b>*</b> ^	
		Total:	\$0 <b>\$0</b>	9/30/2013
		. otun	φυ	5/50/2015
м.	TOTAL LAUNDRY COLLABORATIVE, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
				010010010
		Grand Total:	\$0	9/30/2013

#### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
A.	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
В.	BRISTOL HEALTH CARE INC.	¢0	
0	Nothing to Report Total:	\$0 <b>\$0</b>	0
C.	BRISTOL HEALTH SERVICES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
<b>D.</b> 0	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC. Nothing to Report	\$0	0
0	Total:	\$0 <b>\$0</b>	0
E.	BRISTOL HOSPITAL EMS, LLC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
<b>F</b> .	BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC Nothing to Report	\$0	0
•	Total:	\$0 \$0	
G.	BRISTOL MSO, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
<b>Н.</b> 0	CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC Nothing to Report	\$0	0
	Total:	\$0	-
١.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS		
0	Nothing to Report	\$0	0
	Total:	\$0	
J.	INGRAHAM MANOR		
<b>J</b> . 0	Nothing to Report	\$0	0
	Total:	\$0	
К.	MEDCONN COLLECTION AGENCY, LLC		
0	Nothing to Report	\$0	0

#### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
	Total:	\$0	
L.	MEDWORKS, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
М.	TOTAL LAUNDRY COLLABORATIVE, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$0	

## BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR INDIGENT CARE AND FREE BEDS

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013		
LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
Α.	Indigent Care				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
В.	Free Beds				
	Beginning Balance	\$1,338,939.00	\$1,582,881.00	\$243,942.00	18%
1	Donations	\$0.00	\$0.00	\$0.00	0%
	Income	\$24,617.00	\$1,971.00	(\$22,646.00)	-92%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$219,325.00	\$57,679.00	(\$161,646.00)	-74%
	Ending Balance	\$1,582,881.00	\$1,642,531.00		4%
5	Projected Interest Income	\$25,000.00	\$20,000.00	(\$5,000.00)	-20%
С.	Other				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	-	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

ANNUAL REPORTING

BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL						
A. Patient Activity	A. Patient Activity					
(1) (2) (3)						
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount				
1. Number of Applications for H	ospital Bed Funds	0				
	Grand Total \$0.00					

		BRISTOL HOS ANNUAL REPO			
		FISCAL YEAR			
	REPORT 17B - HOSPIT	AL BED FUNDS HELD C	OR ADMINISTERED E	BY THE HOSPITAL	
B. BE	ED FUND ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)
		FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
Line	Name of Hospital Bed Fund	-	U		
(3)	Fair Market Value of the Principal of eac	h individual Hospital Be	d Fund or the Princi	nal attributable to each	Hospital Bed
(3)					i nospital beu
(1)					
(4)	Total Actual Earnings for each Hospital	Bed Fund or the Earning	gs attributable to eac	h Hospital Bed Fund.	
(5)	Actual Dollar Amount of Earnings reinve	ested as Principal, if any	•		
(6)	Actual Dollar Amount of Earnings availa	ble for Patient Care.			
(•)					
	Meader Fund	\$1,642,531.00	\$69,899.00	\$59,650.00	\$10,249.00
	Total Bed Funds :		. ,	. ,	
	Total Deu Fullus :	\$1,642,531.00	\$69,899.00	\$59,650.00	\$10,249.00

# BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I.	GENERAL COLLECTION PROCESSES AND PROCEDURES	
	Hospital's processes and policies for assigning a debt to a Collection Agent	Patients who have not paid their balances or complied with payment agreements following 60 days of prior activity will be referred to a collection agency. Patient account balances deemed delinquent by Bristol Hospital will be referred to an agency on a monthly basis.
В.	Hospital's processes and policies for compensating a Collection Agent for services rendered	24% on Regular Accounts, 40% on Legal Accounts, 50% on Out of State Legal Accounts, 14% on Compensation Accounts.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	17.72%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
Α	Collection Agent	
1	Collection Agent Name	American Adjustment Bureau
	Collection Agent Type	Collection Agency
	Related / Not Related Entity	Not Related
	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Through February 2013, each monthly referral consisted of the accounts in common categories and encompassed accounts with patients last names beginning with the letter A through L totaling 50% of total dollars deemed delinquent in Hospital 1. After February 2013, each monthly referral will consist
	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	13% on Regular Accounts, 26% on Legal Accounts, 50% on Out of State Legal Accounts
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	15.10%
В	Collection Agent	
	Collection Agent Name	MedConn Collection Agency, LLC
2	Collection Agent Type	Collection Agency

# BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
3	Related / Not Related Entity	Related
	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Through February 2013, each Monthly referral consisted of the accounts in common categories and encompassed accounts with patients last names beginning with the letters M through Z totaling 50% of dollars deemed delinquent in Hospital I and 100% of total dollars deemed delinquent in Hospital II. Af
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	24% on Regular Accounts, 40% on Legal Accounts, 50% on Out of State Legal Accounts, 14% on Compensation Accounts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	29.11%

### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL POSITIONS

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO	\$619,807	\$39,935	\$659,742
			F	
2.	Sr. Vice President, Chief Medical Officer	\$344,456	\$30,679	\$375,135
3.	Vice President of Finance/CFO	\$297,114	\$31,159	\$328,273
	+	· · · ·	· · · · ·	
4.	Sr. Vice President, Patient Care Services & CNO	\$276,270	\$32,705	\$308,975
		• ·	••••	
5.	Assistant VIce President, Information Services	\$179,824	\$30,448	\$210,272
6.	Vice President, Human Resources and Support Svcs	\$176,524	\$30,839	\$207,363
7.	Assistant Vice President, Chief Development Office	\$167,919	\$18,862	\$186,781
8.	Occupational Health Physician	\$165,428	\$11,697	\$177,125
9.	Director of Revenue Cycle	\$139,717	\$17,839	\$157,556
10.	Manager of Programming & Business Intelligence	\$128,232	\$28,520	\$156,752
<u> </u>	Grand Total:	\$2,495,291	\$272,683	\$2,767,974

### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

### PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

Dr.         Dr.         SALARIES (Directly or indirectly) <sup>C</sup> FRINCE BENETTS*(Directl y of Indirectly) <sup>C</sup> FRINCE BENETTS*(Directl y of Indirectly) <sup>C</sup> FRINCE TOTAL           A.         BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.         50         \$0         \$0         \$0           1         Pad by the Extity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Extity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Extity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Extity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0         \$0           2         Pad by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Pad by the Entity Listed A	(1)	(2)	(3)	(4)	(5)
LINE DESCRIPTION BENEFITS*(Direct) Directly or Indirectly <sup>0</sup> BENEFITS*(Direct) y or Indirectly <sup>0</sup> TOTAL A. BRISTOL HOSPITAL & HEALTH CARE GROUP, INC. 1 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 2 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed Above to Hospital Employees(6) 50 50 50 3 Paid by the Entity Listed A	(-)				(•)
LINE         DESCRIPTION         Indirecity <sup>©</sup> y or Indirecity <sup>©</sup> TOTAL           A.         BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0         S0           Paid by the Entity Listed Above to Hospital Employees(B)         S0         S0         S0					
A.         BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.           1         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0         \$0           1         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees to Hospital Employees(B)         \$0         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees to Hospital Employees(B)         \$0		DESCRIPTION	• •	•	τοται
1         Paid by the Entity Listed Above to Hospital Employees(B)         \$0			indirectly)	y of manecity)	TOTAL
1         Paid by the Entity Listed Above to Hospital Employees(B)         \$0	Α.	BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.			
2         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0           B.         BRISTOL HEALTH CARE INC.         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           1         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0         \$0           2         Paid by the Hospital Employees(B)         \$0         \$0         \$0         \$0         \$0           2         Paid by the Hospital EmS, LLC         \$0	-		\$0	\$0	\$0
1         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0 <td>-</td> <td></td> <td></td> <td></td> <td></td>	-				
1         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees(B)         \$0         \$0 <td></td> <td></td> <td></td> <td></td> <td></td>					
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         0       BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.       1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2	Β.				
Ristol. HEALTH SERVICES, INC.           1         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           2         Paid by the Intspitat to Employees of the Entity Listed Above         \$0         \$0         \$0           1         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           2         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           4         Paid by the Hospital to Employees of the Entity Listed Above         \$0         \$0         \$0           5         Paid by the Entity Listed Above to Hospital Employees (B)         \$0         \$0         \$0           6         BRISTOL MOSO, LLC					
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         D.       BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.	2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         D.       BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.	C				
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         D.       BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC	-		¢0	¢0	0.9
D.       BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         1 <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
1     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       2     Paid by the Hospital to Employees of the Entity Listed Above     \$0     \$0     \$0       2     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       3     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       4     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       7     BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC     ************************************			φυ	ψυ	ΨΟ
1     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       2     Paid by the Hospital to Employees of the Entity Listed Above     \$0     \$0     \$0       2     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       3     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       4     Paid by the Entity Listed Above to Hospital Employees(B)     \$0     \$0     \$0       7     BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC     ************************************	D .	BRISTOL HOSPITAL DEVELOPMENT FOUNDATION, INC.			
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         E       BRISTOL HOSPITAL EMS, LLC.       50       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         3       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         5       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         5       Paid by the Entity Listed Above to Hospital Employees(B)		Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         6       BRISTOL MSO, LLC	2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         6       BRISTOL MSO, LLC					
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         F.       BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         6       BRISTOL MSO, LLC					<b>A a</b>
F.       BRISTOL HOSPITAL MULTISPECIALTY GROUP, INC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         6       BRISTOL MSO, LLC		Paid by the Entity Listed Above to Hospital Employees(B)			
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         5       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         6       I       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         7       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         9       I       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0	2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         5       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         6       I       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         7       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         9       I       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0	F				
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       BRISTOL MSO, LLC			\$0	\$0	\$0
G.       BRISTOL MSO, LLC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         H.       CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC	-				
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         H       CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC       \$0       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0       \$0         3       INGRAHAM MANOR			<b>*</b> *	<b>*</b> *	<b>*</b> *
2       Paid by the Hospital to Employees of the Entity Listed Åbove       \$0       \$0       \$0         H.       CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC         1       Paid by the Entity Listed Åbove to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Åbove to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Åbove       \$0       \$0       \$0         1       Paid by the Entity Listed Åbove to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Åbove to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Åbove to Hospital Employees(B)       \$0       \$0       \$0         3       INGRAHAM MANOR	G.	BRISTOL MSO, LLC			
H.       CENTRAL CONNECTICUT ENDOSCOPY CENTER, LLC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1.       CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS       1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0       \$0         3.       INGRAHAM MANOR	-				
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         3       INGRAHAM MANOR	2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         3       INGRAHAM MANOR			_		
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         1       CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         3       INGRAHAM MANOR			0.9	02	¢0
I.       CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0         2       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0         3.       INGRAHAM MANOR					
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         J.       INGRAHAM MANOR			ψυ	ΨΟ	ΨΟ
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         J.       INGRAHAM MANOR	1.	CONNECTICUT OCCUPATIONAL MEDICAL PARTNERS			
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         J.       INGRAHAM MANOR			\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         X       MEDCONN COLLECTION AGENCY, LLC	2			\$0	
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         X       MEDCONN COLLECTION AGENCY, LLC					
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         K.       MEDCONN COLLECTION AGENCY, LLC					÷
K.       MEDCONN COLLECTION AGENCY, LLC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         L.       MEDWORKS, LLC	-				
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       TOTAL LAUNDRY COLLABORATIVE, LLC       50       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0	2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         3       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         4       TOTAL LAUNDRY COLLABORATIVE, LLC       50       \$0       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0	ĸ				
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         L.       MEDWORKS, LLC			<u></u>	\$0	\$0
L.       MEDWORKS, LLC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0         M.       TOTAL LAUNDRY COLLABORATIVE, LLC       Vertical Employees(B)       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0					
1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0         2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         M       TOTAL LAUNDRY COLLABORATIVE, LLC       50       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0					T -
2       Paid by the Hospital to Employees of the Entity Listed Above       \$0       \$0       \$0         M.       TOTAL LAUNDRY COLLABORATIVE, LLC       50       \$0       \$0         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0       \$0	L.				
M.       TOTAL LAUNDRY COLLABORATIVE, LLC         1       Paid by the Entity Listed Above to Hospital Employees(B)       \$0       \$0	-				
1 Paid by the Entity Listed Above to Hospital Employees(B) \$0 \$0 \$0	2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
1 Paid by the Entity Listed Above to Hospital Employees(B) \$0 \$0 \$0					
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### BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

### PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
		SALARIES	FRINGE	
		(Directly or	BENEFITS <sup>A</sup> (Directl	
LINE	DESCRIPTION	Indirectly) <sup>C</sup>	y or Indirectly) <sup>C</sup>	TOTAL

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

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

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

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

## BRISTOL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
Α	Transfer of Assets or Operations	
	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of	
1.	Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

ANNUAL REPORTING

		HOSPITAL REPORTING			
		L YEAR 2013			
	REPORT 23 - CHARITY CARE AND REDUCED		PROVIDED BY	THE HOSPITAL	
			-		
(1)	(2)	(3) (4)		(5)	(6)
(.)		(3) FY 2012 <u>AMOUNT</u>	FY 2013	AMOUNT DIFFERENCE	0) % DIFFERENCE
LINE			AMOUNT		
4	Number of Applicants	2 402	6.046	2 514	103
<u>1.</u> 2.	Number of Approved Applicants	3,402 3,402	6,916 6,916	3,514 3,514	103 103
۷.		3,402	0,010	3,514	105
3.	Total Charges (A)	\$3,781,958	\$5,306,456	\$1,524,498	40
	Average Charges	\$1,112	\$767	(\$344)	-31
4.	Ratio of Cost to Charges (RCC)	0.375611	0.343878	(0.031733)	-8
	Total Cost	\$1,420,545	\$1,824,773	\$404,228	28
	Average Cost	\$418	\$264	(\$154)	-37
5.	Charity Care - Inpatient Charges	\$879,504	\$1,177,843	\$298,339	34
c	Charity Care - Outpatient Emergency Department	2 000 470	2 020 054	000 570	A <b>F</b>
6.	Charges Charity Care - Outpatient Charges (Excludes ED	2,080,472	3,020,051	939,579	45
7.	Charges)	821,982	1,108,562	286,580	35
7.	Total Charges (A)	\$3,781,958	\$5,306,456	\$1,524,498	33 40
		<i>\\</i> 0,701,000	<b>40,000,400</b>	ψ1,024,400	
8.	Charity Care - Number of Patient Days	206	223	17	8
9.	Charity Care - Number of Discharges	64	74	10	16
10.	Charity Care - Number of Outpatient ED Visits	2,044	3,805	1,761	86
	Charity Care - Number of Outpatient Visits (Excludes ED	_,• · · ·	-,	.,	
11.	Visits)	1,173	2,643	1,470	125
(A) Th	e total amount must agree with the total amount listed in	the Hospital Aud	lited Financial S	tatement Notes.	
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - R	eport 17)			
	Number of Applicants				0
1	INUTIOELOLADOUCAUIS	-	-	-	
<u>1.</u> 2.		-	-	-	
1. 2.	Number of Approved Applicants	-	-		
	Number of Approved Applicants	- - \$0		- - - \$0	0
2.		- - \$0 <b>\$0</b>	- - \$0 <b>\$0</b>	- - \$0 <b>\$0</b>	0 C
2. 3.	Number of Approved Applicants Total Charges (B) Average Charges	\$0	\$0 <b>\$0</b>	\$0	0 
2.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)	<b>\$0</b> 0.375611	\$0 <b>\$0</b> 0.343878	<b>\$0</b> (0.031733)	0 0 0 -8
2. 3.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost	\$0 0.375611 <b>\$0</b>	\$0 <b>\$0</b> 0.343878 <b>\$0</b>	<b>\$0</b> (0.031733) <b>\$0</b>	0 0 0 -8
2. 3.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)	<b>\$0</b> 0.375611	\$0 <b>\$0</b> 0.343878	<b>\$0</b> (0.031733)	0 0 0 -8
2. 3.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost	\$0 0.375611 <b>\$0</b>	\$0 <b>\$0</b> 0.343878 <b>\$0</b>	<b>\$0</b> (0.031733) <b>\$0</b>	0 C 0 -8 0 0 0
2. 3. 4.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges	\$0 0.375611 \$0 \$0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b>	\$0 (0.031733) \$0 \$0	0 0 0 -8 -8 0 0 0 0
2. 3. 4.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost	\$0 0.375611 \$0 \$0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b>	\$0 (0.031733) \$0 \$0	0 0 0 -8 -8 0 0 0 0
2. 3. 4. 5. 6.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges	\$0 0.375611 \$0 \$0 \$0 0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b> \$0 0	\$0 (0.031733) \$0 \$0 \$0 0	0 C 0 -8 -8 0 0 C C
2. 3. 4. 5.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges         Bed Funds - Outpatient Charges (Excludes ED Charges)	\$0 0.375611 \$0 \$0 \$0 \$0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b> \$0	\$0 (0.031733) \$0 \$0 \$0	0 0 0 -8 0
2. 3. 4. 5. 6.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges	\$0 0.375611 \$0 \$0 \$0 0 0	\$0 \$0 0.343878 \$0 \$0 \$0 0 0	\$0 (0.031733) \$0 \$0 \$0 \$0 0 0	0 0 0 -8 -8 0 0 0 0 0 0 0
2. 3. 4. 5. 6.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges         Bed Funds - Outpatient Charges (Excludes ED Charges)	\$0 0.375611 \$0 \$0 \$0 0 0	\$0 \$0 0.343878 \$0 \$0 \$0 0 0	\$0 (0.031733) \$0 \$0 \$0 \$0 0 0	0 0 0 -8 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges         Bed Funds - Outpatient Charges (Excludes ED Charges)         Total Charges (B)         Bed Funds - Number of Patient Days         Bed Funds - Number of Discharges	\$0 0.375611 \$0 \$0 \$0 \$0 0 0 \$0 \$0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b> <b>\$0</b> 0 <b>\$0</b> <b>\$0</b> <b>\$0</b> 0 <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b>	\$0 (0.031733) \$0 \$0 \$0 0 0 \$0 \$0	0 0 0 8
2. 3. 4. 5. 6. 7. 8.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges         Bed Funds - Outpatient Charges (Excludes ED Charges)         Total Charges (B)         Bed Funds - Number of Patient Days         Bed Funds - Number of Discharges         Bed Funds - Number of Outpatient ED Visits	\$0 0.375611 \$0 \$0 \$0 \$0 0 \$0 \$0 0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b> <b>\$0</b> 0 <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b>	\$0 (0.031733) \$0 \$0 \$0 0 0 \$0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 8
2. 3. 4. 5. 6. 7. 8. 9. 10.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges         Bed Funds - Outpatient Charges (Excludes ED Charges)         Total Charges (B)         Bed Funds - Number of Patient Days         Bed Funds - Number of Outpatient ED Visits         Bed Funds - Number of Outpatient ED Visits	\$0 0.375611 \$0 \$0 \$0 \$0 0 0 \$0 0 0 0 0 0 0 0 0 0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b> <b>\$0</b> 0 0 <b>\$0</b> 0 <b>\$0</b> 0 0 0 0 0 0 0 0 0 0 0 0 0	\$0 (0.031733) \$0 \$0 \$0 0 0 \$0 \$0 0 0 0 0 0 0 0 0 0 0	0 0 0 -8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
2. 3. 4. 5. 6. 7. 8. 9.	Number of Approved Applicants         Total Charges (B)         Average Charges         Ratio of Cost to Charges (RCC)         Total Cost         Average Cost         Bed Funds - Inpatient Charges         Bed Funds - Outpatient Emergency Department Charges         Bed Funds - Outpatient Charges (Excludes ED Charges)         Total Charges (B)         Bed Funds - Number of Patient Days         Bed Funds - Number of Discharges         Bed Funds - Number of Outpatient ED Visits	\$0 0.375611 \$0 \$0 \$0 \$0 0 0 \$0 0 0 0 0 0 0 0 0 0	\$0 <b>\$0</b> 0.343878 <b>\$0</b> <b>\$0</b> <b>\$0</b> 0 <b>\$0</b> <b>\$0</b> <b>\$0</b> 0 <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b> <b>\$0</b>	\$0 (0.031733) \$0 \$0 \$0 0 0 \$0 \$0 0 0 0 0 0 0 0 0 0 0	0 0 0 8

ANNUAL REPORTING

BRISTOL HOSPITAL								
ANNUAL REPORTING								
FISCAL YEAR 2013								
REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL								
(1)	(2)	(3)	(4)	(5)	(6)			
		FY 2012	FY 2013	AMOUNT	%			
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE			