(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
_			
Α.	AFFILIATE NAME	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES	
1	Affiliate Description	PARENT CORP	
2	Affiliate type of service	Parent Corporation	
3	Tax Status	Not for Profit	
4	Street Address	435 LEWIS AVENUE	
5	Town	MERIDEN	
6	State	Connecticut	
	Zip Code	06451 -	
	CEO Name	Lucille Janatka	
9	CEO Title	President	
	CT Agent Name	Winship Service Corp	
	CT Agent Company	Winship Service Corp.	
	CT Agent Company Street Address	One Constitution Plaza Hartford	
	CT Agent Town CT Agent State	Connecticut	
	CT Agent Zip Code	06103 -	
15			
в.	AFFILIATE NAME	CHS INSURANCE LIMITED	
1	Affiliate Description	Reinsurance	
2	Affiliate type of service	Insurance	
3	Tax Status	Not for Profit	
4	Street Address	F.B. Perry Building, 40 Church Street	
5	Town	Hamilton	
6	State	Bermuda	
7	Zip Code		
8	CEO Name CEO Title	Elliot Joseph President and CEO	
		Winship Service Corp.	
	CT Agent Name CT Agent Company	Winship Service Corp.	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 -	
C.	AFFILIATE NAME	CLINICAL LAB PARTNERS	
1	Affiliate Description	LAB	
2	Affiliate type of service	Lab For Profit	
3 4	Tax Status	129 PATRICIA GENOVA DRIVE	
4 5	Street Address Town	Newington	
6	State	Connecticut	
7	Zip Code	06111 -	
	CEO Name	James Fantus	
9	CEO Title	PRESIDENT	
	CT Agent Name	Winship Service Corp.	
11	CT Agent Company	Winship Service Corp.	
L	egont company		

(1)	(2)	(3)	
	DESCRIPTION		
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut 06103 -	
15	CT Agent Zip Code	06103 -	
D.	AFFILIATE NAME	HARTFORD HEALTH CARE CORP	
	Affiliate Description	PARENT CORPORATION	
2	Affiliate type of service	Parent Corporation	
3	Tax Status	Not for Profit	
4	Street Address	80 SEYMOUR ST	
5	Town	Hartford	
6	State	Connecticut	
	Zip Code	06102 -	
	CEO Name	Elliot Joseph	
	CEO Title	President andCEO	
	CT Agent Name	Winship Service Corp.	
	CT Agent Company	Winship Service Corp.	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 -	
E.	AFFILIATE NAME	HARTFORD HEALTHCARE PHYSICIANCARE INC	
1			
	Affiliate Description	Practice medicine and provide healthcare services to the public	
	Affiliate Description Affiliate type of service	Practice medicine and provide healthcare services to the public Foundation	
1		Foundation Not for Profit	
1 2 3	Affiliate type of service	Foundation	
1 2 3	Affiliate type of service Tax Status	Foundation Not for Profit	
1 2 3 4 5	Affiliate type of service Tax Status Street Address	Foundation Not for Profit 1290 Silas Dean Highway	
1 2 3 4 5 6 7	Affiliate type of service Tax Status Street Address Town State Zip Code	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield	
1 2 3 4 5 6 7	Affiliate type of service Tax Status Street Address Town State	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut	
1 2 3 4 5 6 7	Affiliate type of service Tax Status Street Address Town State Zip Code	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 -	
1 2 3 4 5 6 7 8 9	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr	
1 2 3 4 5 6 7 8 9 10 11	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President	
1 2 3 4 5 6 7 8 9 10 11 12	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp Winship Service Corp	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp Winship Service Corp One Constitution Plaza	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp Winship Service Corp One Constitution Plaza Hartford	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp Winship Service Corp One Constitution Plaza Hartford Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent State CT Agent Town CT Agent State CT Agent Zip Code	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp Winship Service Corp One Constitution Plaza Hartford Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent State CT Agent Town CT Agent State CT Agent Zip Code	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F.	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent Town CT Agent Town CT Agent Town CT Agent Zip Code Agent Zip Code	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F.	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent Town CT Agent Town CT Agent Town CT Agent Zip Code Affiliate Description	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F. 1 2	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent State CT Agent Town CT Agent State CT Agent Town Affiliate Description Affiliate type of service	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F. 1 2 3	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent State CT Agent Town CT Agent State CT Agent Zip Code Affiliate Description Affiliate type of service Tax Status	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F. 1 2 3 4	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent State CT Agent Town CT Agent State CT Agent Town CT Agent Zip Code Affiliate Description Affiliate type of service Tax Status Street Address	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F. F. 1 2 3 4 5	Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent State CT Agent Town CT Agent State CT Agent Zip Code Affiliate Description Affiliate type of service Tax Status	Foundation Not for Profit 1290 Silas Dean Highway Wethersfield Connecticut 06109 - James Watkins Jr President Winship Service Corp One Constitution Plaza Hartford Connecticut 06103 - 1919	

(1)	(2)	(3)	
	DESCRIPTION		
	Zip Code	06111 -	
	CEO Name	Rita Parisi	
	CEO Title	Pres & CEO	
	CT Agent Name	Winship Service Corp.	
	CT Agent Company	Winship Service Corp.	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 -	
G.	AFFILIATE NAME	HARTFORD HOSPITAL	
1	Affiliate Description	HOSPITAL	
	Affiliate type of service	Hospital	
	Tax Status	Not for Profit	
-	Street Address	80 SEYMOUR ST	
	Town	Hartford	
	State	Connecticut	
	Zip Code	06103 -	
	CEO Name	Stuart Markewicz	
-	CEO Title	President	
	CT Agent Name	Winship Service Corp.	
	CT Agent Company	Winship Service Corp.	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 -	
10			
Н.	AFFILIATE NAME	MERIDEN IMAGING CENTER, INC	
1	Affiliate Description	IMAGING SERVICES	
	Affiliate type of service	Imaging Services	
	Tax Status	For Profit	
	Street Address	435 LEWIS AVE	
5	Town	Meriden	
6	State	Connecticut	
	Zip Code	06451 -	
	CEO Name	GARY DEE, MD	
	CEO Title	PRESIDENT	
	CT Agent Name	Michael Kurs, Esq.	
	CT Agent Company	Pullman and Comely	
	CT Agent Company Street Address	One Statehouse Sq	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 -	
I.	AFFILIATE NAME	MIDSTATE MSO, LLC	
1	Affiliate Description	MANAGEMENT SERVICES ORGANIZATION TO SERVICE PHYSICIANS PRACTICES.	
<u> </u>			

(1)	(2)	(3)		
	DESCRIPTION			
	Affiliate type of service	Managed Services Org. (MSO)		
	Tax Status	For Profit		
	Street Address	435 Lewis Avenue		
-	Town	Meriden		
	State	Connecticut		
	Zip Code	06451 -		
	CEO Name	Ralph Becker		
	CEO Title	President		
	CT Agent Name	Winship Service Corp.		
	CT Agent Company	Winship Service Corp.		
	CT Agent Company Street Address	One Constitution Plaza		
	CT Agent Town	Hartford		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06103 -		
J.	AFFILIATE NAME	PRACTICE CENTRAL, LLC		
		Facilitate the adotpion of electronic health systems by physician practices in CT for effective data sharing		
	Affiliate Description	and clinical integration resulting in better coordinated care		
	Affiliate type of service	For Profit Services (Specify)		
	Tax Status	For Profit		
	Street Address	85 Seymour Street		
-	Town	Hartford		
	State	Connecticut		
	Zip Code	06102 -		
	CEO Name	Kent Stahl, MD		
	CEO Title	Managing Director		
	CT Agent Name	Wihship Services Corp		
	CT Agent Company	Winship Services Corp		
	CT Agent Company Street Address	One Constitution Plaza		
	CT Agent Town	Hartford		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06103 - 1919		
к.	AFFILIATE NAME	RUSHFORD CENTER, INC.		
	Affiliate Description	MENTAL HEALTH FACILITY		
	Affiliate type of service	Mental Health Facility		
	Tax Status	Not for Profit		
	Street Address	1250 Silver Street		
	Town	Middletown		
	State	Connecticut		
	Zip Code	06457 -		
	CEO Name	Jeffrey Walter		
	CEO Title	President		
	CT Agent Name	Richard W Tome, Esq.		
	CT Agent Company	Richard W Tomc and Associates		
	CT Agent Company Street Address	49 Main Street		
	CT Agent Town	Middletown		
	CT Agent State	Connecticut 06457 -		
15	CT Agent Zip Code	100407 -		

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
L.	AFFILIATE NAME	THE HOSPITAL OF CENTRAL CONNECTICUT
1	Affiliate Description	Hospital
2	Affiliate type of service	Hospital
3	Tax Status	Not for Profit
4	Street Address	100 Grand St
5	Town	New Britain
6	State	Connecticut
7	Zip Code	06050 -
8	CEO Name	Lucille Janatka
9	CEO Title	President
10	CT Agent Name	The Hospital of Central CT
11	CT Agent Company	Elizabeth Sclaff, Esq.
12	CT Agent Company Street Address	100 Grand St
	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -

* P.O. BOX IS UNACCEPTABLE WITHOUT A

STREET ADDRESS FOR EACH AGENT COMPANY

MIDSTATE MEDICAL CENTER 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
	MIDSTATE MEDICAL CENTER		
1		Unrestricted	\$96,806,371
2		Temporarily Restricted by Donor	\$2,047,687
3		Temporarily Restricted by Board Permanently Restricted by Donor	\$0 \$14,731,968
4 5		Intercompany Eliminations	(\$2,999,397)
5		Total:	\$110,586,629
			\$110,500,025
В.	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES		
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
С.	CHS INSURANCE LIMITED		
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
			م و
D.	CLINICAL LAB 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
Ε.	HARTFORD HEALTH CARE CORP		
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
-			
F.	HARTFORD HEALTHCARE PHYSICIANCARE INC		**
1		Unrestricted	\$0 \$0
2		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
Ť		Total:	\$0
			ψ0
G.	HARTFORD HEALTHCARE REHABILITATION NETWORK, 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

MIDSTATE MEDICAL CENTER 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
		Total:	\$0
	HARTFORD HOSPITAL		
1		Unrestricted	\$0 \$0
2 3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
-		Total:	\$0
Ι.	MERIDEN IMAGING CENTER, INC		
1		Unrestricted	\$2,075,702
2		Temporarily Restricted by Donor	\$C
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0 \$0
5		Intercompany Eliminations	
		Total:	\$2,075,702
J.	MIDSTATE MSO, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$C
3		Temporarily Restricted by Board	\$C
4		Permanently Restricted by Donor	\$C
5		Intercompany Eliminations	\$0
		Total:	\$0
K			
	PRACTICE CENTRAL, LLC	Liprostriated	
1 2		Unrestricted Temporarily Restricted by Donor	\$0 \$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$C
5		Intercompany Eliminations	\$C
		Total:	\$0
	RUSHFORD CENTER, INC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board Permanently Restricted by Donor	\$C \$C
4 5		Intercompany Eliminations	\$0
0		Total:	\$0
Μ.	THE HOSPITAL OF CENTRAL CONNECTICUT		
1		Unrestricted	\$C
2		Temporarily Restricted by Donor	\$C
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 Palanaa	¢445.664.700
	Intercompany Eliminations	Fund Balance:	\$115,661,728 (\$2,999,397)
	Total of all Affiliates		(\$2,333,397)

MIDSTATE MEDICAL CENTER 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	
Α.	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES				
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0	
1		Nothing to report	09/30/2013	\$0	
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0	
B.	CHS INSURANCE LIMITED				
ь.					
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$13,903,320	
1		Hospital buys malpractice insurance premiums	09/30/2013	(\$2,403,885)	
2		Payments	09/30/2013	\$2,403,885	
3		CHS buys support staff	09/30/2013	\$75,362	
4		Payments	09/30/2013	(\$85,182)	
5		Investment	09/30/2013	\$6,570,276	
6		Distribution	09/30/2013	(\$20,463,776)	
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0	
C.	CLINICAL LAB PARTNERS				
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$2,939	
1		Rental Of Space	09/30/2013	\$68,561	
2		Payments	09/30/2013	(\$60,021)	
3		CLP provides testing services	09/30/2013	\$1,796,135	
4		Payments	09/30/2013	(\$1,796,135)	
5		Hospital buys support staff	09/30/2013	(\$3,335,950)	
6		Payments	09/30/2013	\$3,335,950	
7		CLP buys Stat testing services	09/30/2013	(\$91,379)	
8		Payments Ending Unconsolidated Intercompany Balance:	09/30/2013 9/30/2013	\$91,379 \$11,479	
		Ending Unconsolidated Intercompany Balance.	9/30/2013	\$11,479	
D.	HARTFORD HEALTH CARE CORP				
		Designing Unequeelidated in the second Dela	0/00/00/0		
		Beginning Unconsolidated Intercompany Balance: Hospital pays monthly dues to parent	9/30/2012 09/30/2013	(\$87,184,849)	
1		Hospital pays monthly dues to parent Hospital pays various invoice allocation to parent	09/30/2013	(\$3,179,898)	
2		Hospital pays various invoice allocation to parent Hospital pays monthly interest to parent	09/30/2013	(\$1,544,780) (\$4,119,648)	
4		Hospital pays monthly interest to parent Hospital pays intercompany loan payment to parent	09/30/2013	(\$4 ,119,646) \$223,194	
4 5		Equity transfer	09/30/2013	(\$6,409,206)	
6		Payments for Services	09/30/2013	\$15,044,129	
7		Intercompany Accounts Payable	09/30/2013	\$2,287,478	

MIDSTATE MEDICAL CENTER 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	(\$84,883,580)	
Ε.	HARTFORD HEALTHCARE PHYSICIANCARE INC				
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0	
1		Rent	09/30/2013	\$481,947	
2		Intercompany Accounts Payable	09/30/2013	\$48,967	
3		Payments	09/30/2013 9/30/2013	(\$484,147)	
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$46,767	
F.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC				
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$925	
1		Hospital buys Rehabilitation services from ERN	09/30/2013	(\$1,305,507)	
2		Payments	09/30/2013	\$1,305,507	
3		Rent	09/30/2013	\$10,924	
4		Payments	09/30/2013	(\$10,034)	
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$1,815	
G.	HARTFORD HOSPITAL				
0.					
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	(\$1,124,660)	
1		Hospital buys Laundry service from HH	09/30/2013	(\$605,380)	
2		Hospital buys Library Service from HH	09/30/2013	(\$188,648)	
3		Hospital buys PA service from HH	09/30/2013	(\$4,285,044)	
4 5		Hospital buys Supplies from HH	09/30/2013 09/30/2013	(\$3,243,881)	
<u> </u>		Hospital buys Data services from HH Hospital buys various personel from HH	09/30/2013	<u>(\$4,188,654)</u> (\$2,513,568)	
7		Hospital buys various personer from HH	09/30/2013	(\$2,513,566) (\$283,994)	
8		Hospital buys Infectious Disease from HH	09/30/2013	(\$203,994) (\$103.684)	
9		Payment for Services	09/30/2013	\$15,151,316	
		Ending Unconsolidated Intercompany Balance:	9/30/2013	(\$1,386,197)	
				((),,,	
Н.	MERIDEN IMAGING CENTER, INC				
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0	
1		Nothing to report	09/30/2013	\$0	
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0 \$0	
I.	MIDSTATE MSO, LLC				

MIDSTATE MEDICAL CENTER ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
			DATE	TRANSFER TO / FROM
LINE		DESCRIPTION OF TRANSFER	DATE	HOSPITAL
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
1		Hospital Invests in MidState MSO LLC	09/30/2013	\$1,600,000
2		Payments	09/30/2013	(\$1,600,000)
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
-				
J.	PRACTICE CENTRAL, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$217,049
1		Practice Central buys support staff from Midstate	09/30/2013	\$111,856
2		Payments	09/30/2013	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$328,905
К.	RUSHFORD CENTER, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$2,016
1		IS Data Services	09/30/2013	\$11,248
2		Payments	09/30/2013	(\$6,720)
		Hospital buys support staff and Program support from		
3		Rushfor	09/30/2013	(\$1,107,152)
4		Payments	09/30/2013	\$1,107,152
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$6,544
L.	THE HOSPITAL OF CENTRAL CONNECTICUT			
		Basinging Unangelistated Internet Balances	0/00/0040	¢0
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
1		Services Reimbursement of services	09/30/2013 09/30/2013	\$164,277 (\$172,445)
2		Ending Unconsolidated Intercompany Balance:	9/30/2013	(\$173,445)
			9/30/2013	(\$9,168)
			Grand Total:	(\$85,883,435)

MIDSTATE MEDICAL CENTER ANNUAL REPORTING FISCAL YEAR 2013 REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

C. CLINICAL LAB PARTNERS Nothing to Report \$0 D. HARTFORD HEALTH CARE CORP Nothing to Report \$0 D. HARTFORD HEALTH CARE CORP Nothing to Report \$0 C. Total: 9/30/2013 \$0 C. Nothing to Report \$0 C. Nothing to Repor	(1)	(2)	(3)	(4)	(5)	(6)
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K. RUSHFORD CENTER, INC. Image: Center (Center) Image: Center) Image: Cente	ļ				0/00/00/0	\$0
				l otal:	9/30/2013	\$0
	к	RUSHFORD CENTER, INC.				
				Nothing to Report		\$0

MIDSTATE MEDICAL CENTER 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
			Total:	9/30/2013	\$0
L.	THE HOSPITAL OF CENTRAL CONNECTICUT				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
			Ending Unconsolidated Intercompany Balance	9/30/2013	\$0

MIDSTATE MEDICAL CENTER ANNUAL REPORTING FISCAL YEAR 2013 REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(1)	(2)		(3)	(4)
	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
			AMOUNT	DATE
Α.	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
В.	CHS INSURANCE LIMITED			
0	Nothing to Report	Total:	\$0	0/00/0040
_		Total:	\$0	9/30/2013
C.	CLINICAL LAB PARTNERS			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
D.	HARTFORD HEALTH CARE CORP			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
E .	HARTFORD HEALTHCARE PHYSICIANCARE INC		<u>^</u>	
0	Nothing to Report	Total:	\$0 \$0	9/30/2013
		Total.	φU	9/30/2013
F.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
G.	HARTFORD HOSPITAL			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
Н. 0	MERIDEN IMAGING CENTER, INC Nothing to Report		\$0	
0	Nothing to Report	Total:	\$0 \$0	9/30/2013
			**	0.00.2010
١.	MIDSTATE MSO, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
J.	PRACTICE CENTRAL, LLC			
0	Nothing to Report	Total	\$0	010010000
		Total:	\$0	9/30/2013
К.	RUSHFORD CENTER, INC.			
n .	Nothing to Report		\$0	
L		Total:	\$0 \$0	9/30/2013
L.	THE HOSPITAL OF CENTRAL CONNECTICUT			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
				A 14 A 14
		Grand Total:	\$0	9/30/2013

MIDSTATE MEDICAL CENTER 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
	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES		
A. 0	Nothing to Report	\$0	0
	Total:	\$0	
В.	CHS INSURANCE LIMITED		
0	Nothing to Report	\$0 \$0	0
	Total:	پ ۵	
C.	CLINICAL LAB PARTNERS		
0	Nothing to Report	\$0	0
	Total:	\$0	
	HARTFORD HEALTH CARE CORP		
0	Nothing to Report Total:	\$0 \$0	0
	Total.	\$0	
E.	HARTFORD HEALTHCARE PHYSICIANCARE INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
F. 0	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC	\$0	0
0	Nothing to Report Total:	\$0 \$0	0
G.	HARTFORD HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
<u>Н.</u> 0	MERIDEN IMAGING CENTER, INC Nothing to Report	\$0	0
0	Total:	\$0 \$0	0
١.	MIDSTATE MSO, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
J. 0	PRACTICE CENTRAL, LLC Nothing to Report	\$0	0
0	Nothing to Report	\$0 \$0	0
К.	RUSHFORD CENTER, INC.		
0	Nothing to Report	\$0	0
	- · ·		

MIDSTATE MEDICAL CENTER 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.	THE HOSPITAL OF CENTRAL CONNECTICUT		
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$0	

MIDSTATE MEDICAL CENTER 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%
Β.	Free Beds				
	Beginning Balance	\$1,009,055.00	\$1,018,331.00	\$9,276.00	1%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$80,476.00	\$95,279.00		18%
3	Expenditures	\$80,476.00	\$95,279.00	\$14,803.00	18%
4	Unrealized Gains and Losses	\$9,276.00	\$78,431.00		746%
	Ending Balance	\$1,018,331.00	\$1,096,762.00		8%
5	Projected Interest Income	\$75,000.00	\$90,000.00	\$15,000.00	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%
4	Unrealized Gains and Losses	\$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%

ANNUAL REPORTING

R	MIDSTATE MEDICAL CENTER ANNUAL REPORTING FISCAL YEAR 2013 EPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY TH	E HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applicati	ons for Hospital Bed Funds	6
2. A. Number of Patients	receiving Hospital Bed Fund Grants lar Amount provided to all patients from Hospital Bed Funds:	4
2. B. The Actual Total Dol	lar Amount provided to all patients from Hospital Bed Funds:	\$95,279.00
1	FB-Pooled	\$5,279.00
2	FB-Henry Stockder	\$16,085.06
3	FB-Henry Stockder	\$53,914.94
4	FB-Henry Stockder	\$20,000.00
	Grand Total	\$95,279.00

MIDSTATE MEDICAL CENTER					
ANNUAL REPORTING					
		FISCAL YEAR			
	REPORT 17B - HOSPITA				
B. BE	D FUND ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)
(-)	(-)	FMV of Principal	Actual Earnings	Earnings Reinvested	
Line	Name of Hospital Bed Fund			g	
(3)	Fair Market Value of the Principal of each	individual Hospital Be	d Fund, or the Princip	al attributable to each	Hospital Bed
(4)	Total Actual Earnings for each Hospital E	Bed Fund or the Earning	s attributable to eacl	h Hospital Bed Fund.	
	•			-	
(5)	Actual Dollar Amount of Earnings reinves	sted as Principal, if any.			
(6)	Actual Dollar Amount of Earnings availab	le for Patient Care.			
. ,					
	Henry H Stockder(Held by Trustee)	\$1,096,762.00	\$90,000.00	\$0.00	\$0.
	Kate A.L. Chapin	\$3,000.00	\$132.00	\$0.00	\$0.
	Hester A Curtiss	\$20,000.00	\$885.00	\$0.00	\$0.
	Martha E Fales	\$5,000.00	\$221.00	\$0.00	\$0.
	Hospital Endowed Bed Fund	\$5,000.00	\$221.00	\$0.00	\$0.
	Ladies Endowed Bed Fund	\$5,000.00	\$221.00	\$0.00	\$0.
	Blance Hixson Smith	\$25,000.00	\$1,107.00	\$0.00	\$0.
	Henry H Stockder	\$10,000.00	\$443.00	\$0.00	\$0.
	Benjamin W Collins	\$2,000.00	\$89.00	\$0.00	\$0.
	Hester A Curtiss	\$10,000.00	\$443.00	\$0.00	\$0.
	Martha Couch Doolittle	\$2,000.00	\$89.00	\$0.00	\$0.
	Fenner	\$2,000.00	\$89.00	\$0.00	\$0.
	Mattie P Foote	\$2,000.00	\$89.00	\$0.00	\$0.
	Founders Room	\$7,045.00	\$312.00	\$0.00	\$0.
	Charles F & G Gay Linsley	\$2,000.00	\$89.00	\$0.00	\$0.
	Arthur E Miller	\$2,000.00	\$89.00	\$0.00	\$0.
	WR & KS Mosher	\$5,000.00	\$221.00	\$0.00	\$0.
	Caroline Louise Nagel	\$2,000.00	\$89.00	\$0.00	\$0.
	Margaret A Schenck	\$2,000.00	\$89.00	\$0.00	\$0.
	Henery H Stockder-Swan Room	\$2,000.00	\$89.00	\$0.00	\$0.
	Nettie C Wilcox	\$2,000.00	\$89.00	\$0.00	\$0.
	Minnie E Zschirpe	\$4,167.00	\$183.00	\$0.00	\$0.

MIDSTATE MEDICAL CENTER 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	
A.	Hospital's processes and policies for assigning a debt to a Collection Agent	All collection agency and law firm accounts are sent by alpha split weekly. Transfer to agencies/law firm done electronically. Accounts are sent when the dunning cycle has been completed unsuccessfully and/or when all the internal collection efforts have been exhausted.
В.	Hospital's processes and policies for compensating a Collection Agent for services rendered	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed to the hospital as they occur.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	7.52%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
A	Collection Agent	
1	Collection Agent Name	Optimum outcomes
2	Collection Agent Type	Collection Agency
	Related / Not Related Entity	Not Related
4	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.	All collection agency and law firm accounts are sent by alpha split weekly. Transfer to agencies/law firm done electronically. Accounts are sent when the dunning cycle has been completed unsuccessfully and/or when all the internal collection efforts have been exhausted.
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.	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed to the hospital as they occur.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	6.99%
В	Collection Agent	

MIDSTATE MEDICAL CENTER ANNUAL REPORTING FISCAL YEAR 2013 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
1	Collection Agent Name	EOS CCA
2	Collection Agent Type	Collection Agency
3	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.	All collection agency and law firm accounts are sent by alpha split weekly. Transfer to agencies/law firm done electronically. Accounts are sent when the dunning cycle has been completed unsuccessfully and/or when all the internal collection efforts have been exhausted.
	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.	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed to the hospital as they occur.
	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	7.77%
	Collection Agent	
	Collection Agent Name	Sherlog Solutions
	Collection Agent Type	Collection Agency
3	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.	Secondary agency accounts are sent electronically after efforts have been exhausted by primary agency.
	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.	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed to the hospital as they occur.
6	Recovery Rate on Accounts Assigned (excluding Medicare	

MIDSTATE MEDICAL CENTER ANNUAL REPORTING FISCAL YEAR 2013 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION

MIDSTATE MEDICAL CENTER 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 and CEO	\$691,509	\$251,709	\$943,218
2. Chief Medical Officer	\$394,734	\$143,683	\$538,417
	\$394,734	\$143,003	\$336,417
3. Hospitalist	\$330,082	\$120,150	\$450,232
4. Vice President Operations	\$306,967	\$111,736	\$418,703
5. Hospitalist	\$281,463	\$102,453	\$383,916
6. Hospitalist	\$273,425	\$99,527	\$372,952
7. Hospitalist	\$268,117	\$97,595	\$365,712
8. Hospitalist	\$263,225	\$95,814	\$359,039
9. Hospitalist	\$255,413	\$92,970	\$348,383
10. Hospitalist	\$254,957	\$92,804	\$347,761
Grand Total:	\$3,319,892	\$1,208,441	\$4,528,333

MIDSTATE MEDICAL CENTER 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 ^A (Directly	
LINE	DESCRIPTION	Indirectly) ^C	or Indirectly) ^C	TOTAL
LINE	DESCRIPTION	indirectly)	or indirectly)	TOTAL
Α.	MIDSTATE MEDICAL CENTER AND SUBSIDIARIES	٦		
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
Β.	CHS INSURANCE LIMITED			
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
0		7		
C.	CLINICAL LAB PARTNERS	¢0	* 0	¢ 0
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
2		Φ υ	φυ	φυ
D.	HARTFORD HEALTH CARE CORP			
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
Ε.	HARTFORD HEALTHCARE PHYSICIANCARE INC	7		
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
		_		
_				
F.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC	^		<u> </u>
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
2		φU		<u> </u> ФО
G.	HARTFORD HOSPITAL	٦		
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
				•
Η.	MERIDEN IMAGING CENTER, INC	7		
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
		-		
Ι.	MIDSTATE MSO, LLC	* 2		\$ \$
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0 \$0	\$0 \$0	<u>\$0</u> \$0
2	Paid by the Hospital to Employees of the Entity Listed Above	<u>۵</u> 0	ψυ	φU
J.	PRACTICE CENTRAL, 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
_				
Κ.	RUSHFORD CENTER, 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
		_		
L.	THE HOSPITAL OF CENTRAL CONNECTICUT			.
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

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.

MIDSTATE MEDICAL CENTER 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

	ANNUAL	EDICAL CENTER REPORTING				
	FISC REPORT 23 - CHARITY CARE AND REDUCED	AL YEAR 2013				
	REPORT 23 - CHARITT CARE AND REDUCED	COST SERVICES		THE HUSPITAL		
(1)	(2)	(3)	(4)	(5)	(6)	
(1)	_/	FY 2012	FY 2013	AMOUNT	<u> </u>	
LINE	DESCRIPTION	<u>AMOUNT</u>	<u>AMOUNT</u>	DIFFERENCE	DIFFERENCE	
Α.	Hospital Charity Care (see Hospital Audited Financial S	Statement Notes)				
1.	Number of Applicants	3,601	6,890	3,289	919	
2.	Number of Approved Applicants	3,421	6,546	3,125	919	
3.	Total Charges (A)	\$4,233,596	\$7,131,143	\$2,897,547	689	
	Average Charges	\$1,238	\$1,089	(\$148)	-129	
4.	Ratio of Cost to Charges (RCC)	0.465012	0.436359	(0.028653)	-69	
4.	Total Cost	\$1,968,673	\$3,111,738	\$1,143,065	<u>-0</u>	
	Average Cost	\$575	\$475	(\$100)	-179	
5.	Charity Care - Inpatient Charges Charity Care - Outpatient Emergency Department	\$1,394,433	\$1,787,698	\$393,265	289	
6.	Charity Care - Outpatient Emergency Department Charges	1,782,883	3.716.293	1.933.410	108%	
	Charity Care - Outpatient Charges (Excludes ED	.,,	-,,	.,,		
7.	Charges)	1,056,280	1,627,152	570,872	549	
	Total Charges (A)	\$4,233,596	\$7,131,143	\$2,897,547	68%	
8.	Charity Care - Number of Patient Days	576	760	184	329	
<u> </u>	Charity Care - Number of Discharges	372	483	104	30	
<u>9.</u> 10.	Charity Care - Number of Outpatient ED Visits	3,596	6,870	3,274	919	
10.	Charity Care - Number of Outpatient Usits (Excludes ED	3,330	0,070	5,274	51	
11.	Visits)	1,233	2,072	839	689	
(A) Th	e total amount must agree with the total amount listed ir	n the Hospital Auc	dited Financial S	itatement Notes.		
. /		•				
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - Report 17)					
4	Number of Applicants				0	
<u>1.</u> 2.	Number of Applicants Number of Approved Applicants	6	6	-	0°	
<u> </u> .		•			•	
3.	Total Charges (B)	\$80,476	\$95,279	\$14,803	18	
	Average Charges	\$20,119	\$23,820	\$3,701	18	
4.	Ratio of Cost to Charges (RCC)	0.465012	0.436359	(0.028653)	-6'	
	Total Cost	\$37,422	\$41,576	\$4,154	11	
	Average Cost	\$9,356	\$10,394	\$1,038	119	
F	Pad Funda Innotiant Charges	\$80,476	¢05 370	¢14.902	1.0	
5.	Bed Funds - Inpatient Charges	۵ 00,470	\$95,279	\$14,803	189	
6.	Bed Funds - Outpatient Emergency Department Charges	0	0	0	0'	
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	0	0	0	09	
	Total Charges (B)	\$80,476	\$95,279	\$14,803	18'	
			23	1	5	
Q	Bed Funds - Number of Patient Dava					
8. 9	Bed Funds - Number of Patient Days Bed Funds - Number of Discharges	<u> 22 </u>		Λ	0	
9.	Bed Funds - Number of Discharges	4	4	0	0	
	Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits			0	0	
9.	Bed Funds - Number of Discharges	4	4			

ANNUAL REPORTING

MIDSTATE MEDICAL CENTER									
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				