ANNUAL REPORTING

FISCAL YEAR 2013

REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
A.	AFFILIATE NAME	WINDHAM COMMUNITY MEMORIAL HOSPITAL	
1	Affiliate Description	Hospital	
2	Affiliate type of service	Hospital	
3	Tax Status	Not for Profit	
4	Street Address	112 Mansfield Avenue	
5	Town	Willimantic	
6	State	Connecticut	
7	Zip Code	06226 -	
8	CEO Name	David Whitehead	
	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut 06226 -	
15	CT Agent Zip Code	00220 -	
В.	AFFILIATE NAME	CHS INSURANCE LIMITED	
Ь.	AFFICIATE NAME	ONO INCONANCE EMILIED	
1	Affiliate Description	Reinsurance	
2	Affiliate type of service	Insurance	
3	Tax Status	For Profit	
4	Street Address	F.B Perry Building, 40 Church Street	
	Town	Hamilton	
6	State	Bermuda	
	Zip Code		
	CEO Name	Elliot Joseph	
	CEO Title	President & CEO	
	CT Agent Name CT Agent Company	Winship Service Corporation Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Company Street Address CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	
	3- 1		
C.	AFFILIATE NAME	CLINICAL LABORATORY PARTNERS, LLC	
	Affiliate Description		
	Affiliate Description	Lab	
3	Affiliate type of service	Lab Esp Profit	
4	Tax Status Street Address	For Profit 129 Patricia Genova Drive	
	Town	Newington	
	State	Connecticut	
	Zip Code	06111 -	
	CEO Name	James Fantus	
9	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
		•	

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	
D.	AFFILIATE NAME	EASTERN REHABILITATION NETWORK, LLC.	
 	ATTICIATE NAME	EROTEIN RETROTING LES.	
	Affiliate Description	Rehabilitation Services	
	Affiliate type of service	Rehabilitation Services	
3	Tax Status	For Profit	
4	Street Address	181 Patricia Genova Drive	
5	Town	Newington	
6	State	Connecticut	
7	Zip Code	06111 -	
8	CEO Name	Rita Parisi	
9	CEO Title	President & CEO	
10	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	
E.	AFFILIATE NAME	HARTFORD HEALTH CARE CORPORATION	
E.	AFFILIATE NAME	HARTFORD HEALTH CARE CORPORATION	
1	Affiliate Description	Parent Corporation	
1 2	Affiliate Description Affiliate type of service	Parent Corporation Parent Corporation	
1 2 3	Affiliate Description Affiliate type of service Tax Status	Parent Corporation Parent Corporation Not for Profit	
1 2 3 4	Affiliate Description Affiliate type of service Tax Status Street Address	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19	
1 2 3 4 5	Affiliate Description Affiliate type of service Tax Status Street Address Town	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford	
1 2 3 4 5 6	Affiliate Description Affiliate type of service Tax Status Street Address Town State	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut	
1 2 3 4 5 6 7	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 -	
1 2 3 4 5 6 7 8	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph	
1 2 3 4 5 6 7	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 -	
1 2 3 4 5 6 7 8	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph	
1 2 3 4 5 6 7 8 9	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO	
1 2 3 4 5 6 7 8 9	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation	
1 2 3 4 5 6 7 8 9 10 11	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation	
1 2 3 4 5 6 7 8 9 10 11 12	Affiliate Description 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	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description 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	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description 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 Town CT Agent State	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description 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 CT Agent State CT Agent State CT Agent State CT Agent Zip Code	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description 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 Town CT Agent State	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description 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 CT Agent State CT Agent State CT Agent State CT Agent Zip Code	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description 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 CT Agent State CT Agent Zip Code AFFILIATE NAME	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919 HARTFORD HOSPITAL	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description 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 CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919 HARTFORD HOSPITAL	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F.	Affiliate Description 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 CT Agent State CT Agent State Affiliate Description Affiliate type of service	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919 HARTFORD HOSPITAL Hospital	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F.	Affiliate Description 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 CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919 HARTFORD HOSPITAL Hospital Hospital Not for Profit	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F.	Affiliate Description 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 CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status Street Address	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919 HARTFORD HOSPITAL Hospital Not for Profit 80 Seymour Street	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 F.	Affiliate Description 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 CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	Parent Corporation Parent Corporation Not for Profit One State Street, Suite 19 Hartford Connecticut 06103 - Elliot Joseph President & CEO Winship Service Corporation Winship Service Corporation One Constitution Plaza Hartford Connecticut 06103 - 1919 HARTFORD HOSPITAL Hospital Hospital Not for Profit	

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
7	Zip Code	06103 -	
8	CEO Name	Jeff Flaks	
9	CEO Title	President and CEO	
10	CT Agent Name	Winship Service Corporation	
11	CT Agent Company	Winship Service Corporation	
12	CT Agent Company Street Address	One Constitution Plaza	
13	CT Agent Town	Hartford	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 -	
G.	AFFILIATE NAME	HATCH HOSPITAL CORPORATION	
		HATCH HOSPITAL IS ON THE CAMPUS, AND PHYSICALLY ATTACHED TO, WINDHAM HOSPITAL.	
1	Affiliate Description	UNDER THE TERMS OF AN OPERATING AGREEMENT BETWEEN PARTIES WINDHAM HOSPITAL OPERATES WITHIN THE PHYSICAL PLANT OWNED BY HATCH HOSPITAL CORPORATION.	
	Affiliate type of service	Outpatient Care	
	Tax Status	Not for Profit	
4	Street Address	112 MANSFIELD AVENUE, WILLIMANTIC,CT	
	Town	Willimantic	
	State	Connecticut	
	Zip Code	06226 -	
	CEO Name	David Whitehead	
	CEO Title	PRESIDENT & CEO	
	CT Agent Name	David Whitehead	
	CT Agent Company	HATCH HOSPITAL CORP	
	CT Agent Company Street Address	112 Mansfield Avenue, Willimantic, CT	
	CT Agent Town	Willimantic	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06226 -	
	3-1		
Н.	AFFILIATE NAME	IMMEDIATE MEDICAL CARE CENTER, INC.	
	Affiliate Description	Other Health Care Services - Walk in Primary Carer Centers	
	Affiliate type of service	Other HealthCare Svcs(Specify)	
	Tax Status	For Profit	
	Street Address	400 Wahington Street	
5	Town	Hartford	
	State	Connecticut	
	Zip Code	06102 -	
	CEO Name	Kent Stahl, M.D.	
	CEO Title	President Windows Communication	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company Street Address	Winship Service Corporation	
	CT Agent Town	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent Zin Code	Connecticut 06103 - 1919	
15	CT Agent Zip Code	00100 - 1919	
I.	AFFILIATE NAME	MED-EAST ASSOCIATES,LLC.	
1	Affiliate Description	This is an urgent care alk in clinic for patients that are not emergent, but who need attention urgently.A 50% ownership is held by Windham Community Memorial Hospital.	

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
2	Affiliate type of service	Outpatient Care	
3	Tax Status	For Profit	
4	Street Address	1703 Main Street	
5	Town	Willimantic	
6	State	Connecticut	
7	Zip Code	06226 -	
8	CEO Name	David Whitehead	
9	CEO Title	CEO/President	
10	CT Agent Name	David Treiber	
	CT Agent Company	David Treiber	
12	CT Agent Company Street Address	1125 Main St	
13	CT Agent Town	Willimantic	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06226 -	
J.	AFFILIATE NAME	MIDSTATE MEDICAL CENTER	
1	Affiliate Description	Hospital	
2	Affiliate type of service	Hospital	
3	Tax Status	Not for Profit	
4	Street Address	435 Lewis Avenue	
5	Town	Meridan	
6	State	Connecticut	
	Zip Code	06451 -	
8	CEO Name	Lucille Janatka	
9	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	
V	AFFU IATE MANE	NATCHAUG HOSPITAL	
K.	AFFILIATE NAME	NATCHAUG HOSPITAL	
1	Affiliate Description	MENTAL HEALTH FACILITY	
2	Affiliate type of service	Mental Health Facility	
3	Tax Status	Not for Profit	
4	Street Address	189 Storrs Road	
5	Town	Mansfield Center	
6	State	Connecticut	
	Zip Code	06250 -	
8	CEO Name	Stephen Larcen, Ph.D.	
	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)			
LINE	DESCRIPTION	AFFILIATE INFORMATION			
L.	AFFILIATE NAME	RUSHFORD CENTER INC			
1	Affiliate Description	Mental Health Facility			
2	Affiliate type of service	Mental Health Facility			
3	Tax Status	Not for Profit			
4	Street Address	1250 Silver Street			
5	Town	Middletown			
6	State	Connecticut			
7	Zip Code	06457 -			
8	CEO Name	Jeffery Walter			
9	CEO Title	President & CEO			
	CT Agent Name	Richard W. Tomc & Associates			
	CT Agent Company	Richard W. Tomc, Esquire			
	CT Agent Company Street Address	49 Main Street			
	CT Agent Town	Middletown			
	CT Agent State	Connecticut 06457 -			
15	CT Agent Zip Code	00437 -			
м.	AFFILIATE NAME	THE HOSPITAL OF CENTRAL CONNECTICUT			
IVI.	AFFILIATE NAIME	THE HOOF THAE OF CENTRAL CONNECTION			
1	Affiliate Description	Hospital			
2	Affiliate type of service	Hospital			
3	Tax Status	Not for Profit			
4	Street Address	100 Grand Street			
5	Town	New Britain			
6	State	Connecticut			
	Zip Code	06050 -			
	CEO Name	Lucille Janatka			
9	CEO Title	President/CEO			
	CT Agent Name CT Agent Company	The Hospital of Central Ct Elizabeth Schlaff, Esq			
	CT Agent Company Street Address	100 Grand St			
	CT Agent Company Street Address CT Agent Town	New Britain			
	CT Agent Town CT Agent State	Connecticut			
	CT Agent State CT Agent Zip Code	06505 -			
N.	AFFILIATE NAME	WINDHAM FAMILY MEDICAL SERVICES,PC			
,		PROVIDES PHYSICIAN RECRUITMENT AND PRACTICE MANAGEMENT SERVICES IN THE			
1	Affiliate Description	HOSPITAL'S SERVICE AREA			
2	Affiliate type of service	Affilate Support Services			
3	Tax Status	For Profit			
<u>4</u> 5	Street Address Town	112 MANSFIELD AVE, WILLIMANTIC,CT Willimantic			
6	Town State	Connecticut			
7	Zip Code	06226 -			
8	CEO Name	MICHAEL KEENAN,MD			
9	CEO Title	PRESIDENT			
	CT Agent Name	Winship Service Corporation			
	CT Agent Name CT Agent Company	Winship Service Corporation Winship Service Corporation			
	CT Agent Company Street Address	Winship Service Corporation One Constitution Plaza			
14	or Agent Company Offeet Address	One Constitution Flaza			

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)		
LINE	DESCRIPTION	AFFILIATE INFORMATION		
13	CT Agent Town	Hartford		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06103 - 1919		
0.	AFFILIATE NAME	WINDHAM HEALTH SERVICES		
		,		
1	Affiliate Description	CORPORATE ENTITY FORMED TO INVEST IN NORTHEAST HOME CARE INC.		
2	Affiliate type of service	For Profit Services (Specify)		
	Tax Status	For Profit		
4	Street Address	112 Mansfield Avenue, Willimantic, CT		
5	Town	Willimantic		
6	State	Connecticut		
7	Zip Code	06226 -		
8	CEO Name	David Whitehead		
	CEO Title	President & CEO		
10	CT Agent Name	Winship Service Corporation		
	CT Agent Company	Winship Service Corporation		
	CT Agent Company Street Address	112 Mansfield Avenue, Willimantic, CT		
	CT Agent Town	Willimantic		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06226 -		
l_		WIND HAVE BOOK A TOUR ATION		
P.	AFFILIATE NAME	WINDHAM HOSPITAL FOUNDATION		
1	Affiliate Description	Fundraisng for the Hospital.		
2	Affiliate type of service	Foundation		
3	Tax Status	Not for Profit		
4	Street Address	112, Mansfield Avenue		
5	Town	Willimantic		
6	State	Connecticut		
7	Zip Code	06226 -		
	CEO Name	Shawn Maynard		
9	CEO Title	President		
	CT Agent Name	Winship Service Corporation		
	CT Agent Company	Winship Service Corporation		
	CT Agent Company Street Address	One Constitution Plaza		
	CT Agent Town	Hartford		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06103 - 1919		
Q.	AEEU IATE NAME	WINDHAM HOSPITAL-PHYSICIAN HOSPITAL ORGANIZATION,INC.		
<u>ل</u> ا.	AFFILIATE NAME	THE DIAM HOUTHALT III SIGIAN HOUTHAL ONGANIZATION, INC.		
1	Affiliate Description	PHYSICIAN HOSPITAL ORGANIZATION		
2	Affiliate type of service	Physicians Hospital Org. (PHO)		
3	Tax Status	Not for Profit		
4	Street Address	90 QUARRY STREET, WILLIMANTIC,CT		
5	Town	Willimantic		
6	State	Connecticut		
7	Zip Code			

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REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
8	CEO Name	ROBERT BUNDY MD	
9	CEO Title	PRESIDENT	
10	CT Agent Name	Winshiop Service Corporation	
11	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
13	CT Agent Town	Hartford	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	
R.	AFFILIATE NAME	WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION,INC	
1	Affiliate Description	Or continue of a Professional Delibitary	
2	Affiliate type of service	Operation of a Professional Building Real Estate	
3	Tax Status	Not for Profit	
4	Street Address	112 Mansfield Avenue	
5	Town	Willimantic	
6	State	Connecticut	
7	Zip Code	06226 -	
8	CEO Name	Edward Bussiere	
9	CEO Title	President	
10	CT Agent Name	Winship Service Corporatin	
	CT Agent Company	Winship Service Corporation	
12	CT Agent Company Street Address	One Constitution Plaza	
13	CT Agent Town	Hartford	
14	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	

^{*} P.O. BOX IS UNACCEPTABLE WITHOUT A

STREET ADDRESS FOR EACH AGENT COMPANY

WINDHAM COMMUNITY MEMORIAL 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.	WINDHAM COMMUNITY MEMORIAL HOSPITAL		
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
	WINDHAM COMMUNITY MEMORIAL HOSPITAL	Haranda da d	(044.074.000)
1		Unrestricted	(\$14,071,036)
2		Temporarily Restricted by Donor	\$1,218,970
3		Temporarily Restricted by Board	\$0
5		Permanently Restricted by Donor Intercompany Eliminations	\$3,534,341 \$0
		Total:	(\$9,317,725)
		Total.	(\$3,317,723)
C.	CHS INSURANCE LIMITED		
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
D.	CLINICAL LABORATORY PARTNERS, 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
E.	EASTERN REHABILITATION NETWORK, LLC.		
-	EASTERN REHABILITATION NETWORK, LLC.	I le ve etviete d	CO
2		Unrestricted Temporarily Postricted by Donor	\$0 \$0
		Temporarily Restricted by Donor Temporarily Restricted by Board	
3 4		Permanently Restricted by Donor	\$0 \$0
5		Intercompany Eliminations	\$0
		Total:	\$0
		Total:	\$0
F.	HARTFORD HEALTH CARE CORPORATION		
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

G.	HARTFORD HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0

WINDHAM COMMUNITY MEMORIAL 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
5		Intercompany Eliminations	\$0
		Total:	\$0
Н.	HATCH HOSPITAL CORPORATION		
1		Unrestricted	\$391,628
2		Temporarily Restricted by Donor	\$37,487
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$659,600
5		Intercompany Eliminations	\$0
		Total:	\$1,088,715
	IMMEDIATE MEDICAL CADE CENTED INC		
1. 1	IMMEDIATE MEDICAL CARE CENTER, INC.	Liprostriatod	Φ0
2		Unrestricted Temperarily Restricted by Depar	\$0 \$0
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Donor	\$0 \$0
5		Intercompany Eliminations	\$0
		Total:	\$0
			, , , , , , , , , , , , , , , , , , ,
J.	MED-EAST ASSOCIATES,LLC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0 \$0 \$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
16	MIDOTATE MEDICAL OFNITED		
	MIDSTATE MEDICAL CENTER	I have a too at a st	Φ0
2		Unrestricted	\$0
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Donor	\$0 02
5		Intercompany Eliminations	\$0 \$0 \$0 \$0 \$0
		Total:	\$0
		101011	4.
L.	NATCHAUG HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0 \$0 \$0 \$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	DUQUEODD OFNITED INC		
	RUSHFORD CENTER INC	Llaus atri-tl	40
1		Unrestricted Temperarily Restricted by Depar	\$0
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0 \$0 \$0
4		Permanently Restricted by Board Permanently Restricted by Donor	Φ 0.2
5		Intercompany Eliminations	\$0
Ť		Total:	\$0
			Ψ
Ν.	THE HOSPITAL OF CENTRAL CONNECTICUT		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0

WINDHAM COMMUNITY MEMORIAL HOSPITAL ANNUAL REPORTING FISCAL YEAR 2013 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1) (2) LINE AFFILIATE NAME 3	FUND DESCRIPTION / FUND PURPOSE Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0
O. WINDHAM FAMILY MEDICAL SERVICES,PC 1 2 3 4 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 Q. WINDHAM HOSPITAL FOUNDATION 1	Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0 \$0 \$0
4 5	Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0 \$0
O. WINDHAM FAMILY MEDICAL SERVICES,PC 1 2 3 4 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 Q. WINDHAM HOSPITAL FOUNDATION 1	Permanently Restricted by Donor Intercompany Eliminations Total: Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0 \$0
O. WINDHAM FAMILY MEDICAL SERVICES,PC 1 2 3 4 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 Q. WINDHAM HOSPITAL FOUNDATION 1	Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0
1 2 3 4 5 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 5 COMPANY OF THE PROPERTY OF	Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0
1 2 3 4 5 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 5 COMPANY OF THE PROPERTY OF	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0
1 2 3 4 5 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 5 COMPANY OF THE PROPERTY OF	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0
1 2 3 4 5 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 5 COMPANY OF THE PROPERTY OF	Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0
3 4 5 5 P. WINDHAM HEALTH SERVICES 1 2 3 4 5 5 CONTRACTOR OF THE PROPERTY OF T	Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	¢Λ
P. WINDHAM HEALTH SERVICES 1 2 3 4 5	Permanently Restricted by Donor Intercompany Eliminations	⊅ ∪
P. WINDHAM HEALTH SERVICES 1 2 3 4 5 Q. WINDHAM HOSPITAL FOUNDATION 1	Intercompany Eliminations	\$0
P. WINDHAM HEALTH SERVICES 1 2 3 4 5 Q. WINDHAM HOSPITAL FOUNDATION 1		\$0
1 2 3 4 5 5 Q. WINDHAM HOSPITAL FOUNDATION 1		\$0
1 2 3 4 5 5 Q. WINDHAM HOSPITAL FOUNDATION 1	Total:	\$0
1 2 3 4 5 5 Q. WINDHAM HOSPITAL FOUNDATION 1		
Q. WINDHAM HOSPITAL FOUNDATION		
Q. WINDHAM HOSPITAL FOUNDATION	Unrestricted	\$0
Q. WINDHAM HOSPITAL FOUNDATION	Temporarily Restricted by Donor	\$0
Q. WINDHAM HOSPITAL FOUNDATION	Temporarily Restricted by Board	\$0
Q. WINDHAM HOSPITAL FOUNDATION	Permanently Restricted by Donor	\$0
1	Intercompany Eliminations	\$0
1	Total:	\$0
1		
2	Unrestricted	\$249,359
	Temporarily Restricted by Donor	\$530,194
3	Temporarily Restricted by Board	\$0
4	Permanently Restricted by Donor	\$0
5	Intercompany Eliminations	\$0
	Total:	\$779,553
WINDHAM HOSPITAL-PHYSICIAN HOSPITAL R. ORGANIZATION,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
S. WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION, 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 \$0
	Total:	\$0
		Ψ.
Total of all Affiliates (before Intercompany Eliminations)		
Intercompany Eliminations		
Total of all Affiliates	Fund Balance:	(\$7,449,457) \$0

(1)	(2)	(3)	(4)	(5)
	AFEN LATE MARK	DESCRIPTION OF TRANSFER	D.4.T.F	TRANSFER TO / FROM
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	HOSPITAL
•	WATER THE COMMUNITY MEMORIAL LICERITAL			
Α.	WINDHAM COMMUNITY MEMORIAL HOSPITAL			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report	3/30/2012	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
				·
В.	CHS INSURANCE LIMITED			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
1		Hospital Puchases Malpractice Insurance Premiums	09/30/2013	(\$680,452)
2		Malpractice Payments	09/30/2013	\$680,452
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
C.	CLINICAL LABORATORY PARTNERS, LLC			
		Deviania a Harana a lidata dilatana anno ana Dalaman	0/00/0040	(\$70,700)
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	(\$79,799)
2		Hospital bills CLP lab charges CLP payments	09/30/2013 09/30/2013	\$1,110,482 (\$770,908)
3		Hospital purchases lab services from CLP	09/30/2013	(\$265,302)
4		Lab Services Payments	09/30/2013	\$30,026
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$24,499
D.	EASTERN REHABILITATION NETWORK, LLC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	(\$136,259)
		Hospital Purchases Rehabilition & Managerial Svs from		
1		ERN	09/30/2013	(\$219,641)
2		Rehab and Managerial Payments Ending Unconsolidated Intercompany Balance:	09/30/2013 9/30/2013	\$202,230
		Ending Unconsolidated Intercompany Balance:	9/30/2013	(\$153,670)
E.	HARTFORD HEALTH CARE CORPORATION			
<u> </u>	HARTFORD HEALTH CARE CORPORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	(\$21,910,601)
1		Hospital Pays Corporate Fees to Parent	09/30/2013	(\$1,360,155)
2		Corp Fee Payments	09/30/2013	\$226,693
3		Parent pays vendors utilizing corp credit card	09/30/2013	(\$3,707)
4		Corp credit card payments	09/30/2013	\$3,733
5		Debt Forgiven	09/30/2013	\$4,704
6		Hospital pays health insurance premiums to parent	09/30/2013	(\$6,454,378)
7		Health Ins Payments	09/30/2013	\$6,243,981

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
8		Hospital borrows cash from parent	09/30/2013	(\$4,370,464)
9		Loan Payment	09/30/2013	\$171,378
10		Hospital pays various invoice allocation to parent	09/30/2013	(\$62,932)
11		Payments on bonds	09/30/2013	\$33,979
		Ending Unconsolidated Intercompany Balance:	9/30/2013	(\$27,477,769)
F.	HARTFORD HOSPITAL			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	(\$1,266,278)
1		IS Service allocations	09/30/2013	(\$2,048,787)
2		Debt Forgiven	09/30/2013	\$2,048,787
3		Revenue cycle services allocation	09/30/2013	(\$1,445,702)
4		Debt Forgiven	09/30/2013	\$2,919,619
5		Hospital pays salary allocation to parent	09/30/2013	(\$974,883)
6		Debt Forgiven	09/30/2013	\$974,883
7		Hospital pays IT consulting allocations to parent	09/30/2013	(\$10,000)
8		Debt Forgiven	09/30/2013	\$10,000
9		Misc services (tumor registry)	09/30/2013	(\$33,000)
10		Misc AP (Subscriptions, Sponsorships)	09/30/2013	(\$19,834)
11		Debt Forgiven	09/30/2013	\$19,834
12		Hospital buys Laundry service from HH	09/30/2013	(\$89,223)
13		Debt Forgiven	09/30/2013	\$89,223
14		Parent pays various inventory items for Hospital	09/30/2013	(\$7,882)
15		Debt Forgiven	09/30/2013	\$7,882
16		Hospital purchases service on biomedical equipment	09/30/2012	(\$987,321)
17		Payments for Biomed services	09/30/2013	\$1,458,766
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$646,084
G.	HATCH HOSPITAL CORPORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
-		Nothing to Report Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0 \$0
		Lituing Officonsolidated intercompany balance.	9/30/2013	40
Н.	IMMEDIATE MEDICAL CARE CENTER, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	(\$5)
1		Hospital collects rent	09/30/2013	\$42,696
2		Rent Payments	09/30/2013	(\$42,696)
3		Hospital collects fees for phone services	09/30/2013	\$1,920
4		Payments for phone services	09/30/2013	(\$1,920)
		Ending Unconsolidated Intercompany Balance:	9/30/2013	(\$5)

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	HOSPITAL
	WED TARE ARROWS AND A STATE OF THE STATE OF			
l.	MED-EAST ASSOCIATES,LLC.			
		Designing Unconcelled to dilutera ampany Delevace	9/30/2012	(\$4.240)
		Beginning Unconsolidated Intercompany Balance:		(\$1,340)
2		Hospital collects fees for phone services Payments for phone services	09/30/2013 09/30/2013	\$3,600 (\$3,600)
3		Hospital pays for employee physicals & utilities	09/30/2013	(\$15,708)
4		Payments for Emp Physicals & Utilities	09/30/2013	\$14,243
-		Ending Unconsolidated Intercompany Balance:	9/30/2013	(\$2,805)
		Littung Officorisonated Intercompany Balance.	9/30/2013	(\$2,803)
	MIDSTATE MEDICAL CENTER			
J.	MIDSTATE MEDICAL CENTER			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	0.0
		Hospital pays Blueway Printing Inv	09/30/2013	\$0 \$156
2		Payments for Blueway Printing	09/30/2013	(\$156)
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Ending onconsolidated intercompany balance.	3/30/2013	40
K.	NATCHAUG HOSPITAL			
N.	NATCHAUG HOSFITAL			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$123,462
1		Hospital pays mgmt fees/med director & consultations	09/30/2013	(\$122,972)
2		Payments for mgmt fees/med director/consults	09/30/2013	\$82,517
3		Hospital rents property from Natchaug Hospital	09/30/2013	(\$23,321)
4		Payments rent	09/30/2013	\$15,547
5		Accounts Payable	09/30/2013	(\$735)
Ť		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$74,498
L.	RUSHFORD CENTER INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
М.	THE HOSPITAL OF CENTRAL CONNECTICUT			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
N.	WINDHAM FAMILY MEDICAL SERVICES,PC			

(1)	(2)	(3)	(4)	(5)
				TRANSFER TO / FROM
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	HOSPITAL
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	¢o.
		Nothing to Report	3/30/2012	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$ 0
0.	WINDHAM HEALTH SERVICES			
<u> </u>	WINDHAM REALTH SERVICES			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0 \$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
P.	WINDHAM HOSPITAL FOUNDATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
1		Hospital purchases items on behalf of Foundation	09/30/2013	\$460,163
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$460,163
Q.	WINDHAM HOSPITAL-PHYSICIAN HOSPITAL ORGANIZATION,INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report	0/00/2012	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
R.	WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION,INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2012	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2013	\$0
			0 17 ((000 400 207)
			Grand Total:	(\$26,429,005)

(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	\$0
Α.	WINDHAM COMMUNITY MEMORIAL HOSPITAL		N. di D		Φ.2
			Nothing to Report Total:	9/30/2013	\$0 \$0
			i otai:	9/30/2013	\$0
В.	CHS INSURANCE LIMITED				
 	CHO INCOMMACE EMMINED		Nothing to Report		\$0
			Total:	9/30/2013	\$0
C.	CLINICAL LABORATORY PARTNERS, LLC				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
D.	EASTERN REHABILITATION NETWORK, LLC.				
<u></u> Р.	EASTERN REHABILITATION NETWORK, LLC.		Nothing to Report		\$0
—			Total:	9/30/2013	\$0
			10000	0/00/2010	4 0
E.	HARTFORD HEALTH CARE CORPORATION				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
F.	HARTFORD HOSPITAL				•
			Nothing to Report	0/00/0040	\$0
			Total:	9/30/2013	\$0
G.	HATCH HOSPITAL CORPORATION				
	HATCH HOOF THAE CONT CHATION		Nothing to Report		\$0
			Total:	9/30/2013	\$0
					,
H.	IMMEDIATE MEDICAL CARE CENTER, INC.				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
	MED FAOT ACCOUNTED IN C				
l.	MED-EAST ASSOCIATES,LLC.		Nothing to Report		\$0
1			Total:	9/30/2013	\$0 \$0
			i otal.	3/30/2013	Ψ0
J.	MIDSTATE MEDICAL CENTER				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
K.	NATCHAUG HOSPITAL				
<u></u>			Nothing to Report		\$0

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Total:	9/30/2013	\$0
	RUSHFORD CENTER INC				
<u> </u>	ROSHI OND CENTER INC		Nothing to Report		\$0
			Total:	9/30/2013	\$0
					·
M.	THE HOSPITAL OF CENTRAL CONNECTICUT				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
N.	WINDHAM FAMILY MEDICAL SERVICES,PC				
IN.	WINDHAM FAMILI MEDICAL SERVICES,FC		Nothing to Report		\$0
			Total:	9/30/2013	\$0
					·
Ο.	WINDHAM HEALTH SERVICES				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
Р.	WINDHAM HOSPITAL FOUNDATION				
F.	WINDHAM HOSPITAL FOUNDATION		Nothing to Report		\$0
1			Total:	9/30/2013	\$0
					**
Q.	WINDHAM HOSPITAL-PHYSICIAN HOSPITAL ORGANIZATION,INC.				
			Nothing to Report		\$0
			Total:	9/30/2013	\$0
В	WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION,INC				
R.	WINDHAM PROFESSIONAL CONDUMINIUM ASSOCIATION,INC		Nothing to Report		\$0
1			Total:	9/30/2013	\$0 \$0
				5.55.25	4.0
			Ending Unconsolidated		
			Intercompany Balance	9/30/2013	\$0

REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(1)	(2)		(3)	(4)
IINF	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
	DESCRIPTION OF EXPENDITURE		AMOUNT	DAIL
Α.	WINDHAM COMMUNITY MEMORIAL HOSPITAL			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
	OUG INGUIDANGE LIMITED			
B.	CHS INSURANCE LIMITED Nothing to Report		\$0	
	Nothing to Nepolt	Total:	\$0 \$0	9/30/2013
			,	
C.	CLINICAL LABORATORY PARTNERS, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
	FACTERN DELIABILITATION, NETWORK, LLC			
D.	EASTERN REHABILITATION NETWORK, LLC. Nothing to Report		\$0	
Ť	Trouming to Troport	Total:	\$ 0	9/30/2013
E.	HARTFORD HEALTH CARE CORPORATION			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
F.	HARTFORD HOSPITAL			
0	Nothing to Report		\$0	
Ť	Trouming to Troport	Total:	\$ 0	9/30/2013
G.	HATCH HOSPITAL CORPORATION			
0	Nothing to Report	-	\$0	- / - / / -
		Total:	\$0	9/30/2013
Н.	IMMEDIATE MEDICAL CARE CENTER, INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
l.	MED-EAST ASSOCIATES,LLC.			
0	Nothing to Report	Total:	\$0 \$0	0/20/2042
		Total.	\$0	9/30/2013
J.	MIDSTATE MEDICAL CENTER			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
K.	NATCHAUG HOSPITAL			
0	Nothing to Report	Total:	\$0 \$0	9/30/2013
		Total.	\$0	9/30/2013
L.	RUSHFORD CENTER INC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
M.	THE HOSPITAL OF CENTRAL CONNECTICUT		^ -	
0	Nothing to Report	Total:	\$0 \$0	9/30/2013
		i Viul.	\$0	3/30/2013
N.	WINDHAM FAMILY MEDICAL SERVICES,PC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2013
0.	WINDHAM HEALTH SERVICES			

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
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2013
P.	WINDHAM HOSPITAL FOUNDATION		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2013
Q.	WINDHAM HOSPITAL-PHYSICIAN HOSPITAL ORGANIZATION,INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2013
R.	WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION,INC		
0	Nothing to Report	\$0	
	Total:	—————————————————————————————————————	9/30/2013
	Total.	40	3/30/2013
	Grand Total:	\$0	9/30/2013

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. 0	WINDHAM COMMUNITY MEMORIAL HOSPITAL Nothing to Report	\$0	0
U	Total:	\$0 \$0	0
	l Otal.	\$0	
В.	CHS INSURANCE LIMITED		
0	Nothing to Report	\$0	0
	Total:	\$0	Ç
C.	CLINICAL LABORATORY PARTNERS, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
D.	EASTERN REHABILITATION NETWORK, LLC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
E.	HARTFORD HEALTH CARE CORPORATION	Φ0	0
0	Nothing to Report	\$0	0
	Total:	\$0	
_	HARTFORD HOORITAL		
F .	HARTFORD HOSPITAL Nothing to Report	\$0	0
-	Total:	\$ 0	Ü
	Total	4 3	
G.	HATCH HOSPITAL CORPORATION		
0	Nothing to Report	\$0	0
	Total:	\$0	
Н.	IMMEDIATE MEDICAL CARE CENTER, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
	MED-EAST ASSOCIATES,LLC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
J .	MIDSTATE MEDICAL CENTER Nothing to Report	\$0	0
U	Nothing to Report Total:		
	Total:	\$0	
V	NATCHALIC HOSDITAL		
K .	NATCHAUG HOSPITAL Nothing to Report	\$0	0
, ,	1 Housing to Report	ΨΟ	U

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.	RUSHFORD CENTER INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
M.	THE HOSPITAL OF CENTRAL CONNECTICUT		
0	Nothing to Report	\$0	0
	Total:	\$0	-
N.	WINDHAM FAMILY MEDICAL SERVICES,PC		
0	Nothing to Report	\$0	0
	Total:	\$0	
0.	WINDHAM HEALTH SERVICES	*	0
0	Nothing to Report Total:	\$0	0
	i Otal:	\$0	
P.	WINDHAM HOSPITAL FOUNDATION		
<u>P.</u>	Nothing to Report	\$0	0
	Total:	\$0	-
		·	
Q.	WINDHAM HOSPITAL-PHYSICIAN HOSPITAL ORGANIZATION,INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
R.	WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION,INC	60	
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$0	
	Grand Total:	\$0	

WINDHAM COMMUNITY MEMORIAL 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%
	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	(\$1,127.85)	(\$1,119.85)	\$8.00	-1%
1	Donations	\$0.00	\$0.00		0%
2	Income	\$1,052.00	\$1,081.00		3%
	Expenditures	\$1,044.00	\$1,073.00		3%
4	Unrealized Gains and Losses	\$0.00	\$0.00		0%
	Ending Balance	(\$1,119.85)	(\$1,111.85)	\$8.00	-1%
5	Projected Interest Income	\$1,000.00	\$1,000.00	\$0.00	0%
C.	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	\$0.00	0%
	Ending Balance	\$0.00	\$0.00		0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

	WINDHAM COMMUNITY MEMORIAL HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2013	
REPORT	17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED	BY THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
<u>Patient</u>	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applications for	Hospital Bed Funds	1
2. A. Number of Patients receiving	Hospital Bed Fund Grants	1
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed Funds: \$1,072.73		
1	Chickering Fund	\$1,072.73
	Grand Total	\$1,072.73

WINDHAM COMMUNITY MEMORIAL HOSPITAL **ANNUAL REPORTING FISCAL YEAR 2013** REPORT 17B - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL B. BED FUND ACTIVITY (1) (2) (3) (4) (5) (6) **FMV of Principal Actual Earnings** Earnings Reinvested Earnings Available Name of Hospital Bed Fund Line (3) Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each Hospital Bed (4) Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund. (5) Actual Dollar Amount of Earnings reinvested as Principal, if any. Actual Dollar Amount of Earnings available for Patient Care. (6)Chickering Fund \$19,920.35 \$1,072.73 \$1,072.73 \$1,349.00 Total Bed Funds : \$19,920.35 \$1,072.73 \$1,072.73 \$1,349.00

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 tot he hospital as they occur.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	4.73%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
A	Collection Agent	
1	Collection Agent Name	EOS CCA
2	Collection Agent Type	Collection Agency
3	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 tot he hospital as they occur.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	5.13%
В	Collection Agent	
	<u> </u>	

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
1	Collection Agent Name	Optimum Outcomes
2	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.	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 tot he hospital as they occur.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	4.29%

REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL POSITIONS

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	Hospitalist	\$335,213	\$101,751	\$436,964
2.	Vice-President Human Resources	\$268,123	\$81,386	\$349,509
_	Lipopitalist	\$245.040	ф74.COO	¢220.462
3.	Hospitalist	\$245,840	\$74,622	\$320,462
4.	Hospitalist	\$234,495	\$71,179	\$305,674
5.	Hospitalist	\$231,559	\$70,287	\$301,846
			¥. •3==	, ,
6.	Hospitalist	\$221,675	\$67,287	\$288,962
7.	Hospitalist	\$206,913	\$62,806	\$269,719
8.	Vice-President Operations	\$201,981	\$61,309	\$263,290
9.	VIce-President Patient Care	\$195,884	\$59,459	\$255,343
10.	IT Director	\$190,678	\$57,879	\$248,557
	Grand Total:	\$2,332,361	\$707,965	\$3,040,326

WINDHAM COMMUNITY MEMORIAL 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 ^A (DirectI	
LINE	DESCRIPTION	Indirectly) ^C	y or Indirectly) ^C	TOTAL
	DECOMM TION	man cony,	y or manoony,	TOTAL
Α.	WINDHAM COMMUNITY MEMORIAL HOSPITAL			
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
В.	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
С.	CLINICAL LABORATORY PARTNERS, 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 \$0
	and by the receptor to Employees of the Entity Eleted Alberte	ΨΟ	ΨΟ Ι	ΨΟ
D.	EASTERN REHABILITATION NETWORK, 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
Ε.	HARTFORD HEALTH CARE CORPORATION			
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 HOSPITAL	_		
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
_	I saw by the mosphan to Employees of the Emmy Esteet most	#*	40	4.5
G.	HATCH HOSPITAL CORPORATION			
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
	MANEDIATE MEDICAL CARE CENTED INC	_		
Н.	IMMEDIATE MEDICAL CARE CENTER, INC.	(**)	Φ0	ФО.
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	Faid by the Hospital to Employees of the Entity Listed Above	φυ	φυ	φυ
Ι.	MED-EAST ASSOCIATES,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
J.	MIDSTATE MEDICAL CENTER			
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.	NATCHAUG HOSPITAL	_		
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
		, , , , , , , , , , , , , , , , , , , 	, , ,	Ψ σ
L.	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
М.	THE HOSPITAL OF CENTRAL CONNECTICUT			
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
N .	WINDHAM FAMILY MEDICAL SERVICES,PC			
IN .	WINDHAM FAMILI MEDICAL SERVICES,FC			

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WINDHAM COMMUNITY MEMORIAL 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 ^A (DirectI	
LINE	DESCRIPTION	Indirectly) ^c	y or Indirectly) ^C	TOTAL
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
	MANDHAM HEALTH OFFINIOFO	1		
0.	WINDHAM HEALTH SERVICES	•		
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		
Ρ.	WINDHAM HOSPITAL FOUNDATION			
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		
Q.	WINDHAM HOSPITAL-PHYSICIAN HOSPITAL ORGANIZATION, 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
	WINDHAM PROFFOCIONAL CONDOMINIUM ACCOCIATION INC			
R.	WINDHAM PROFESSIONAL CONDOMINIUM ASSOCIATION,INC	* -	1 4-	
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.

WINDHAM COMMUNITY MEMORIAL 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	
	Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or	
1.	Functions.	N/A
	Description of each Transfer of Assets or Operations or Change of Control involving Hospital	
2.	Clinical or Nonclinical Services or Functions.	N/A
	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved	
3.	in a change of control.	N/A
	Date that each Transfer of Assets or Operations or Change of Control involving Hospital	
4.	Clinical or Nonclinical Services or Functions occurred.	N/A
	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital	
5.	Clinical or Nonclinical Services or Functions.	\$0

	WINDHAM COMMUNIT		SPITAL		
		REPORTING AL YEAR 2013			
	REPORT 23 - CHARITY CARE AND REDUCED		PROVIDED BY	THE HOSPITAL	
	N=1 5111 <u>2</u> 5				
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
<u>LINE</u>	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial S	Statement Notes)			
1.	Number of Applicants	1,459	1,068	(391)	-27%
2.	Number of Approved Applicants	1,421	1,039	(382)	-27%
3.	Total Charges (A)	\$3,573,643	\$2,699,812	(\$873,831)	-24%
	Average Charges	\$2,515	\$2,598	\$84	3%
	Datis of Coat to Charges (DCC)	0.457040	0.440744	(0.04.0000)	20/
4.	Ratio of Cost to Charges (RCC) Total Cost	0.457643 \$1,635,453	0.446711 \$1,206,036	(0.010932) (\$429,417)	-2% -26%
	Average Cost	\$1,033,433	\$1,200,030	\$10	1%
	Tribings con	V 1,101	ψ.,.σ.	Ψ.σ	170
5.	Charity Care - Inpatient Charges	\$882,258	\$585,726	(\$296,532)	-34%
	Charity Care - Outpatient Emergency Department			(0=0,000)	
6.	Charges Charity Care - Outpatient Charges (Excludes ED	1,285,863	1,035,783	(250,080)	-19%
7.	Charges)	1,405,522	1,078,303	(327,219)	-23%
	Total Charges (A)	\$3,573,643	\$2,699,812	(\$873,831)	-24%
	• ()	. , ,	. , ,	(, , ,	
8.	Charity Care - Number of Patient Days	213	146	(67)	-31%
9.	Charity Care - Number of Discharges	72	44	(28)	-39%
10.	Charity Care - Number of Outpatient ED Visits	1,097	885	(212)	-19%
11.	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	2,220	1,399	(821)	-37%
(A) The	e total amount must agree with the total amount listed in	the Hospital Auc	lited Financial S	tatement Notes.	
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System -	Report 17)			
1.	Number of Applicants	1	1	-	0%
2.	Number of Approved Applicants	1	1	-	0%
3.	Total Charges (B)	\$1,044	\$1,073	\$29	3%
	Average Charges	\$1,044	\$1,073	\$29	3%
	D. I. (0. 11. 0) (D00)	0.457040	0.110711	(0.040000)	901
4.	Ratio of Cost to Charges (RCC) Total Cost	0.457643 \$478	0.446711 \$479	(0.010932) \$2	-2% 0%
	Average Cost	\$478	\$479	\$2 \$2	0%
		7	****	*-	
5.	Bed Funds - Inpatient Charges	\$1,044	\$1,073	\$29	3%
6.	Bed Funds - Outpatient Emergency Department Charges	0	0	0	0%
			-		
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	0	0	0	0%
	Total Charges (B)	\$1,044	\$1,073	\$29	3%
8.	Bed Funds - Number of Patient Days	1	1	0	0%
9.	Bed Funds - Number of Discharges	1	1	0	0%
10.	Bed Funds - Number of Outpatient ED Visits	0	0	0	0%
	Bed Funds - Number of Outpatient Visits(Excludes ED	_			
11.	Visits)	0	0	0	0%
(R) The	e total amount must agree with the total amount listed o	n Hospital Report	ting System - Re	port 17	

	WINDHAM COMMUNITY MEMORIAL 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	<u>AMOUNT</u>	AMOUNT	DIFFERENCE	DIFFERENCE		