

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$30,127,000	\$28,527,000	(\$1,600,000)	-5%
2	Short Term Investments	\$33,642,000	\$37,860,000	\$4,218,000	13%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$51,432,000	\$49,732,000	(\$1,700,000)	-3%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$247,000	\$247,000	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$10,552,000	\$8,273,000	(\$2,279,000)	-22%
7	Inventories of Supplies	\$4,271,000	\$4,338,000	\$67,000	2%
8	Prepaid Expenses	\$8,554,000	\$8,608,000	\$54,000	1%
9	Other Current Assets	\$4,885,000	\$9,216,000	\$4,331,000	89%
	Total Current Assets	\$143,463,000	\$146,801,000	\$3,338,000	2%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$3,856,000	\$3,856,000	0%
	Total Noncurrent Assets Whose Use is Limited:	\$0	\$3,856,000	\$3,856,000	0%
5	Interest in Net Assets of Foundation	\$60,014,000	\$65,812,000	\$5,798,000	10%
6	Long Term Investments	\$24,082,000	\$25,131,000	\$1,049,000	4%
7	Other Noncurrent Assets	\$70,042,000	\$65,835,000	(\$4,207,000)	-6%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$408,633,000	\$431,816,000	\$23,183,000	6%
2	Less: Accumulated Depreciation	\$285,402,000	\$303,677,000	\$18,275,000	6%
	Property, Plant and Equipment, Net	\$123,231,000	\$128,139,000	\$4,908,000	4%
3	Construction in Progress	\$19,477,000	\$37,001,000	\$17,524,000	90%
	Total Net Fixed Assets	\$142,708,000	\$165,140,000	\$22,432,000	16%
	Total Assets	\$440,309,000	\$472,575,000	\$32,266,000	7%

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II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$16,363,000	\$10,476,000	(\$5,887,000)	-36%
2	Salaries, Wages and Payroll Taxes	\$49,185,000	\$58,396,000	\$9,211,000	19%
3	Due To Third Party Payers	\$10,552,000	\$8,273,000	(\$2,279,000)	-22%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$32,205,000	\$9,262,000	(\$22,943,000)	-71%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$5,306,000	\$4,590,000	(\$716,000)	-13%
	Total Current Liabilities	\$113,611,000	\$90,997,000	(\$22,614,000)	-20%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$49,202,000	\$79,882,000	\$30,680,000	62%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$49,202,000	\$79,882,000	\$30,680,000	62%
3	Accrued Pension Liability	\$36,720,000	\$58,281,000	\$21,561,000	59%
4	Other Long Term Liabilities	\$64,916,000	\$87,582,000	\$22,666,000	35%
	Total Long Term Liabilities	\$150,838,000	\$225,745,000	\$74,907,000	50%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$123,039,000	\$100,811,000	(\$22,228,000)	-18%
2	Temporarily Restricted Net Assets	\$32,033,000	\$33,279,000	\$1,246,000	4%
3	Permanently Restricted Net Assets	\$20,788,000	\$21,743,000	\$955,000	5%
	Total Net Assets	\$175,860,000	\$155,833,000	(\$20,027,000)	-11%
	Total Liabilities and Net Assets	\$440,309,000	\$472,575,000	\$32,266,000	7%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013 ACTUAL</u>	<u>FY 2014 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,512,520,000	\$1,693,080,000	\$180,560,000	12%
2	Less: Allowances	\$1,032,289,000	\$1,163,019,000	\$130,730,000	13%
3	Less: Charity Care	\$37,167,000	\$49,238,000	\$12,071,000	32%
4	Less: Other Deductions	\$9,253,000	\$21,143,000	\$11,890,000	128%
	Total Net Patient Revenue	\$433,811,000	\$459,680,000	\$25,869,000	6%
5	Provision for Bad Debts	\$14,984,000	\$20,305,000	\$5,321,000	36%
	Net Patient Service Revenue less provision for bad debts	\$418,827,000	\$439,375,000	\$20,548,000	5%
6	Other Operating Revenue	\$19,603,000	\$20,346,000	\$743,000	4%
7	Net Assets Released from Restrictions	\$3,282,000	\$3,819,000	\$537,000	16%
	Total Operating Revenue	\$441,712,000	\$463,540,000	\$21,828,000	5%
B. Operating Expenses:					
1	Salaries and Wages	\$147,977,000	\$153,451,000	\$5,474,000	4%
2	Fringe Benefits	\$48,016,000	\$48,105,000	\$89,000	0%
3	Physicians Fees	\$22,467,000	\$25,569,000	\$3,102,000	14%
4	Supplies and Drugs	\$47,722,000	\$50,108,000	\$2,386,000	5%
5	Depreciation and Amortization	\$22,794,000	\$30,957,000	\$8,163,000	36%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$1,665,000	\$2,566,000	\$901,000	54%
8	Malpractice Insurance Cost	\$292,000	(\$285,000)	(\$577,000)	-198%
9	Other Operating Expenses	\$118,301,000	\$116,025,000	(\$2,276,000)	-2%
	Total Operating Expenses	\$409,234,000	\$426,496,000	\$17,262,000	4%
	Income/(Loss) From Operations	\$32,478,000	\$37,044,000	\$4,566,000	14%
C. Non-Operating Revenue:					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$2,934,000	\$1,418,000	(\$1,516,000)	-52%
	Total Non-Operating Revenue	\$2,934,000	\$1,418,000	(\$1,516,000)	-52%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$35,412,000	\$38,462,000	\$3,050,000	9%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$1,035,000	\$4,434,000	\$3,399,000	328%

BRIDGEPORT HOSPITAL					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$1,035,000	\$4,434,000	\$3,399,000	328%
	Excess/(Deficiency) of Revenue Over Expenses	\$36,447,000	\$42,896,000	\$6,449,000	18%
	Principal Payments	\$3,747,000	\$3,948,000	\$201,000	5%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$251,223,047	\$270,341,260	\$19,118,213	8%
2	MEDICARE MANAGED CARE	\$126,966,953	\$125,021,587	(\$1,945,366)	-2%
3	MEDICAID	\$198,004,779	\$230,209,572	\$32,204,793	16%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$597,583	\$1,194,141	\$596,558	100%
6	COMMERCIAL INSURANCE	\$86,465,399	\$82,600,888	(\$3,864,511)	-4%
7	NON-GOVERNMENT MANAGED CARE	\$104,202,777	\$105,635,883	\$1,433,106	1%
8	WORKER'S COMPENSATION	\$10,878,457	\$7,487,090	(\$3,391,367)	-31%
9	SELF- PAY/UNINSURED	\$12,095,054	\$8,164,273	(\$3,930,781)	-32%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$790,434,049	\$830,654,694	\$40,220,645	5%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$126,941,448	\$151,711,022	\$24,769,574	20%
2	MEDICARE MANAGED CARE	\$68,489,005	\$82,095,149	\$13,606,144	20%
3	MEDICAID	\$222,585,424	\$286,369,150	\$63,783,726	29%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,168,685	\$1,284,733	\$116,048	10%
6	COMMERCIAL INSURANCE	\$120,442,758	\$129,472,200	\$9,029,442	7%
7	NON-GOVERNMENT MANAGED CARE	\$136,588,752	\$168,089,979	\$31,501,227	23%
8	WORKER'S COMPENSATION	\$5,759,735	\$5,611,077	(\$148,658)	-3%
9	SELF- PAY/UNINSURED	\$40,109,711	\$37,791,733	(\$2,317,978)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$722,085,518	\$862,425,043	\$140,339,525	19%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$378,164,495	\$422,052,282	\$43,887,787	12%
2	MEDICARE MANAGED CARE	\$195,455,958	\$207,116,736	\$11,660,778	6%
3	MEDICAID	\$420,590,203	\$516,578,722	\$95,988,519	23%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,766,268	\$2,478,874	\$712,606	40%
6	COMMERCIAL INSURANCE	\$206,908,157	\$212,073,088	\$5,164,931	2%
7	NON-GOVERNMENT MANAGED CARE	\$240,791,529	\$273,725,862	\$32,934,333	14%
8	WORKER'S COMPENSATION	\$16,638,192	\$13,098,167	(\$3,540,025)	-21%
9	SELF- PAY/UNINSURED	\$52,204,765	\$45,956,006	(\$6,248,759)	-12%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,512,519,567	\$1,693,079,737	\$180,560,170	12%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$89,352,752	\$87,286,898	(\$2,065,854)	-2%
2	MEDICARE MANAGED CARE	\$36,259,066	\$35,019,884	(\$1,239,182)	-3%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	\$44,541,610	\$49,876,097	\$5,334,487	12%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$81,673	\$184,899	\$103,226	126%
6	COMMERCIAL INSURANCE	\$37,456,162	\$36,792,289	(\$663,873)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$43,244,678	\$42,246,104	(\$998,574)	-2%
8	WORKER'S COMPENSATION	\$10,778,376	\$4,324,370	(\$6,454,006)	-60%
9	SELF- PAY/UNINSURED	\$2,401,935	\$1,903,873	(\$498,062)	-21%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$264,116,252	\$257,634,414	(\$6,481,838)	-2%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$21,005,674	\$24,332,945	\$3,327,271	16%
2	MEDICARE MANAGED CARE	\$13,461,695	\$12,847,287	(\$614,408)	-5%
3	MEDICAID	\$33,268,005	\$42,640,833	\$9,372,828	28%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$235,554	\$546,488	\$310,934	132%
6	COMMERCIAL INSURANCE	\$43,485,074	\$43,843,665	\$358,591	1%
7	NON-GOVERNMENT MANAGED CARE	\$45,319,181	\$54,428,158	\$9,108,977	20%
8	WORKER'S COMPENSATION	\$5,712,302	\$2,500,074	(\$3,212,228)	-56%
9	SELF- PAY/UNINSURED	\$3,308,858	\$11,963,371	\$8,654,513	262%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$165,796,343	\$193,102,821	\$27,306,478	16%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$110,358,426	\$111,619,843	\$1,261,417	1%
2	MEDICARE MANAGED CARE	\$49,720,761	\$47,867,171	(\$1,853,590)	-4%
3	MEDICAID	\$77,809,615	\$92,516,930	\$14,707,315	19%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$317,227	\$731,387	\$414,160	131%
6	COMMERCIAL INSURANCE	\$80,941,236	\$80,635,954	(\$305,282)	0%
7	NON-GOVERNMENT MANAGED CARE	\$88,563,859	\$96,674,262	\$8,110,403	9%
8	WORKER'S COMPENSATION	\$16,490,678	\$6,824,444	(\$9,666,234)	-59%
9	SELF- PAY/UNINSURED	\$5,710,793	\$13,867,244	\$8,156,451	143%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$429,912,595	\$450,737,235	\$20,824,640	5%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,867	4,893	26	1%
2	MEDICARE MANAGED CARE	2,250	2,065	(185)	-8%
3	MEDICAID	5,789	6,057	268	5%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	22	31	9	41%
6	COMMERCIAL INSURANCE	2,431	2,076	(355)	-15%
7	NON-GOVERNMENT MANAGED CARE	2,671	2,771	100	4%
8	WORKER'S COMPENSATION	122	99	(23)	-19%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
9	SELF- PAY/UNINSURED	301	215	(86)	-29%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	18,453	18,207	(246)	-1%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	33,740	35,973	2,233	7%
2	MEDICARE MANAGED CARE	15,475	14,249	(1,226)	-8%
3	MEDICAID	26,165	29,184	3,019	12%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	74	140	66	89%
6	COMMERCIAL INSURANCE	9,569	8,662	(907)	-9%
7	NON-GOVERNMENT MANAGED CARE	10,584	11,689	1,105	10%
8	WORKER'S COMPENSATION	642	457	(185)	-29%
9	SELF- PAY/UNINSURED	1,191	881	(310)	-26%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	97,440	101,235	3,795	4%
C.	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	34,024	42,244	8,220	24%
2	MEDICARE MANAGED CARE	16,037	20,607	4,570	28%
3	MEDICAID	87,798	104,092	16,294	19%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	418	399	(19)	-5%
6	COMMERCIAL INSURANCE	38,779	38,781	2	0%
7	NON-GOVERNMENT MANAGED CARE	42,909	54,533	11,624	27%
8	WORKER'S COMPENSATION	1,420	1,878	458	32%
9	SELF- PAY/UNINSURED	15,230	14,508	(722)	-5%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	236,615	277,042	40,427	17%
IV.	<u>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</u>				
A.	<u>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$22,656,573	\$23,471,567	\$814,994	4%
2	MEDICARE MANAGED CARE	\$9,974,412	\$11,333,395	\$1,358,983	14%
3	MEDICAID	\$86,816,563	\$108,272,737	\$21,456,174	25%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$372,320	\$302,488	(\$69,832)	-19%
6	COMMERCIAL INSURANCE	\$21,944,846	\$24,834,176	\$2,889,330	13%
7	NON-GOVERNMENT MANAGED CARE	\$23,401,243	\$31,058,209	\$7,656,966	33%
8	WORKER'S COMPENSATION	\$1,283,901	\$1,513,901	\$230,000	18%
9	SELF- PAY/UNINSURED	\$24,187,923	\$21,348,487	(\$2,839,436)	-12%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$190,637,781	\$222,134,960	\$31,497,179	17%
B.	<u>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$3,330,011	\$4,694,313	\$1,364,302	41%

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	MEDICARE MANAGED CARE	\$2,289,180	\$3,400,018	\$1,110,838	49%
3	MEDICAID	\$11,288,075	\$27,068,184	\$15,780,109	140%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$74,277	\$241,990	\$167,713	226%
6	COMMERCIAL INSURANCE	\$7,992,691	\$12,290,863	\$4,298,172	54%
7	NON-GOVERNMENT MANAGED CARE	\$7,931,566	\$18,802,820	\$10,871,254	137%
8	WORKER'S COMPENSATION	\$807,429	\$1,211,121	\$403,692	50%
9	SELF- PAY/UNINSURED	\$23,979,458	\$17,078,789	(\$6,900,669)	-29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$57,692,687	\$84,788,098	\$27,095,411	47%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	6,201	6,149	(52)	-1%
2	MEDICARE MANAGED CARE	2,610	2,715	105	4%
3	MEDICAID	33,893	39,450	5,557	16%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	143	123	(20)	-14%
6	COMMERCIAL INSURANCE	6,839	7,992	1,153	17%
7	NON-GOVERNMENT MANAGED CARE	7,255	10,161	2,906	40%
8	WORKER'S COMPENSATION	472	527	55	12%
9	SELF- PAY/UNINSURED	8,647	6,789	(1,858)	-21%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	66,060	73,906	7,846	12%

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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$53,194,778	\$53,745,825	\$551,047	1%
2	Physician Salaries	\$11,387,101	\$13,355,748	\$1,968,647	17%
3	Non-Nursing, Non-Physician Salaries	\$83,395,121	\$86,349,427	\$2,954,306	4%
	Total Salaries & Wages	\$147,977,000	\$153,451,000	\$5,474,000	4%
B.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$13,655,559	\$13,784,956	\$129,397	1%
2	Physician Fringe Benefits	\$2,563,288	\$2,616,814	\$53,526	2%
3	Non-Nursing, Non-Physician Fringe Benefits	\$31,797,153	\$31,703,230	(\$93,923)	0%
	Total Fringe Benefits	\$48,016,000	\$48,105,000	\$89,000	0%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$1,957,957	\$1,877,442	(\$80,515)	-4%
2	Physician Fees	\$22,467,000	\$25,569,000	\$3,102,000	14%
3	Non-Nursing, Non-Physician Fees	\$41,095,717	\$44,874,388	\$3,778,671	9%
	Total Contractual Labor Fees	\$65,520,674	\$72,320,830	\$6,800,156	10%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$37,720,000	\$37,229,000	(\$491,000)	-1%
2	Pharmaceutical Costs	\$10,002,000	\$12,879,000	\$2,877,000	29%
	Total Medical Supplies and Pharmaceutical Cost	\$47,722,000	\$50,108,000	\$2,386,000	5%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$11,859,000	\$16,106,000	\$4,247,000	36%
2	Depreciation-Equipment	\$10,935,000	\$14,851,000	\$3,916,000	36%
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$22,794,000	\$30,957,000	\$8,163,000	36%
F.	Bad Debts:				
1	Bad Debts	\$0	\$0	\$0	0%
G.	Interest Expense:				
1	Interest Expense	\$1,665,000	\$2,566,000	\$901,000	54%
H.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$292,000	(\$285,000)	(\$577,000)	-198%
I.	Utilities:				
1	Water	\$264,779	\$350,604	\$85,825	32%
2	Natural Gas	\$1,406,730	\$1,713,841	\$307,111	22%
3	Oil	\$0	\$0	\$0	0%
4	Electricity	\$3,351,892	\$3,572,578	\$220,686	7%
5	Telephone	\$92,223	\$52,135	(\$40,088)	-43%
6	Other Utilities	\$15,210	\$1,727	(\$13,483)	-89%
	Total Utilities	\$5,130,834	\$5,690,885	\$560,051	11%
J.	Business Expenses:				
1	Accounting Fees	\$419,577	\$412,432	(\$7,145)	-2%
2	Legal Fees	\$1,546,536	\$948,577	(\$597,959)	-39%
3	Consulting Fees	\$747,223	\$628,109	(\$119,114)	-16%
4	Dues and Membership	\$650,013	\$635,782	(\$14,231)	-2%
5	Equipment Leases	\$111,821	\$70,806	(\$41,015)	-37%
6	Building Leases	\$2,464,662	\$3,275,359	\$810,697	33%
7	Repairs and Maintenance	\$10,320,175	\$9,478,420	(\$841,755)	-8%
8	Insurance	\$735,754	\$765,438	\$29,684	4%
9	Travel	\$541,616	\$606,795	\$65,179	12%
10	Conferences	\$4,821	\$4,954	\$133	3%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	Property Tax	\$157,646	\$221,091	\$63,445	40%
12	General Supplies	\$7,891,254	\$5,104,234	(\$2,787,020)	-35%
13	Licenses and Subscriptions	\$405,026	\$527,232	\$122,206	30%
14	Postage and Shipping	\$550,862	\$465,300	(\$85,562)	-16%
15	Advertising	\$5,180	\$0	(\$5,180)	-100%
16	Corporate parent/system fees	\$5,032,091	\$5,161,234	\$129,143	3%
17	Computer Software	\$208,023	\$177,274	(\$30,749)	-15%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$609,125	\$601,994	(\$7,131)	-1%
20	Lab Fees / Red Cross charges	\$1,267,227	\$1,052,918	(\$214,309)	-17%
21	Billing & Collection / Bank Fees	\$2,218,955	\$3,611,620	\$1,392,665	63%
22	Recruiting / Employee Education & Recognition	\$618,780	\$283,566	(\$335,214)	-54%
23	Laundry / Linen	\$2,440,490	\$2,328,543	(\$111,947)	-5%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$162,679	\$162,951	\$272	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$4,000,610	\$4,361,611	\$361,001	9%
	Total Business Expenses	\$43,110,146	\$40,886,240	(\$2,223,906)	-5%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$27,006,346	\$22,696,045	(\$4,310,301)	-16%
	Total Operating Expenses - All Expense Categories*	\$409,234,000	\$426,496,000	\$17,262,000	4%
	*A.-K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$24,596,809	\$27,514,622	\$2,917,813	12%
2	General Accounting	\$3,864,300	\$3,836,655	(\$27,645)	-1%
3	Patient Billing & Collection	\$11,348,805	\$11,486,083	\$137,278	1%
4	Admitting / Registration Office	\$1,180,097	\$1,122,400	(\$57,697)	-5%
5	Data Processing	\$18,025,773	\$21,328,532	\$3,302,759	18%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$50,199,355	\$50,555,994	\$356,639	1%
8	Public Relations	\$0	\$0	\$0	0%
9	Purchasing	\$886,368	\$907,918	\$21,550	2%
10	Dietary and Cafeteria	\$4,662,252	\$4,627,497	(\$34,755)	-1%
11	Housekeeping	\$4,039,376	\$4,076,217	\$36,841	1%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$4,933,124	\$5,444,812	\$511,688	10%
14	Security	\$3,198,326	\$3,078,103	(\$120,223)	-4%
15	Repairs and Maintenance	\$7,286,187	\$6,704,194	(\$581,993)	-8%
16	Central Sterile Supply	\$2,377,165	\$2,787,140	\$409,975	17%
17	Pharmacy Department	\$13,398,250	\$16,634,188	\$3,235,938	24%
18	Other General Services	\$46,537,015	\$36,308,032	(\$10,228,983)	-22%
	Total General Services	\$196,533,202	\$196,412,387	(\$120,815)	0%
B.	Professional Services:				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$4,108,316	\$3,457,287	(\$651,029)	-16%
4	Medical Records	\$2,588,360	\$2,853,284	\$264,924	10%
5	Social Service	\$3,280,737	\$3,373,658	\$92,921	3%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$9,977,413	\$9,684,229	(\$293,184)	-3%
C.	Special Services:				

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Operating Room	\$25,138,907	\$24,024,837	(\$1,114,070)	-4%
2	Recovery Room	\$1,505,436	\$1,409,368	(\$96,068)	-6%
3	Anesthesiology	\$1,553,985	\$1,257,162	(\$296,823)	-19%
4	Delivery Room	\$4,232,156	\$4,328,261	\$96,105	2%
5	Diagnostic Radiology	\$7,281,098	\$11,415,739	\$4,134,641	57%
6	Diagnostic Ultrasound	\$1,901,633	\$1,925,293	\$23,660	1%
7	Radiation Therapy	\$4,113,816	\$4,863,403	\$749,587	18%
8	Radioisotopes	\$619,759	\$729,758	\$109,999	18%
9	CT Scan	\$1,550,492	\$1,564,798	\$14,306	1%
10	Laboratory	\$13,904,545	\$13,457,780	(\$446,765)	-3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$14,957,154	\$14,460,914	(\$496,240)	-3%
13	Electrocardiology	\$951,447	\$859,843	(\$91,604)	-10%
14	Electroencephalography	\$187,709	\$199,578	\$11,869	6%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$2,793,744	\$2,842,875	\$49,131	2%
19	Pulmonary Function	\$397,004	\$326,636	(\$70,368)	-18%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$2,197,019	\$1,998,482	(\$198,537)	-9%
23	Renal Dialysis	\$583,570	\$664,614	\$81,044	14%
24	Emergency Room	\$22,809,560	\$23,067,128	\$257,568	1%
25	MRI	\$0	\$0	\$0	0%
26	PET Scan	\$307,703	\$400,846	\$93,143	30%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$2,593,777	\$2,680,642	\$86,865	3%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$5,374,063	\$5,483,029	\$108,966	2%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$0	\$0	0%
	Total Special Services	\$114,954,577	\$117,960,986	\$3,006,409	3%
D.	Routine Services:				
1	Medical & Surgical Units	\$40,272,362	\$43,555,342	\$3,282,980	8%
2	Intensive Care Unit	\$3,268,563	\$3,699,447	\$430,884	13%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,350,861	\$2,537,779	\$186,918	8%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$2,107,080	\$2,213,725	\$106,645	5%
10	Ambulatory Surgery	\$8,960,405	\$9,880,813	\$920,408	10%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$1,889,468	\$1,883,409	(\$6,059)	0%
13	Other Routine Services	\$2,064,684	\$2,009,979	(\$54,705)	-3%
	Total Routine Services	\$60,913,423	\$65,780,494	\$4,867,071	8%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$26,855,385	\$36,657,904	\$9,802,519	37%
	Total Operating Expenses - All Departments*	\$409,234,000	\$426,496,000	\$17,262,000	4%
	*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$420,616,000	\$418,827,000	\$439,375,000
2	Other Operating Revenue	16,075,000	22,885,000	24,165,000
3	Total Operating Revenue	\$436,691,000	\$441,712,000	\$463,540,000
4	Total Operating Expenses	403,987,000	409,234,000	426,496,000
5	Income/(Loss) From Operations	\$32,704,000	\$32,478,000	\$37,044,000
6	Total Non-Operating Revenue	2,164,000	3,969,000	5,852,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$34,868,000	\$36,447,000	\$42,896,000
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	7.45%	7.29%	7.89%
2	Hospital Non Operating Margin	0.49%	0.89%	1.25%
3	Hospital Total Margin	7.95%	8.18%	9.14%
4	Income/(Loss) From Operations	\$32,704,000	\$32,478,000	\$37,044,000
5	Total Operating Revenue	\$436,691,000	\$441,712,000	\$463,540,000
6	Total Non-Operating Revenue	\$2,164,000	\$3,969,000	\$5,852,000
7	Total Revenue	\$438,855,000	\$445,681,000	\$469,392,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$34,868,000	\$36,447,000	\$42,896,000
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$74,554,000	\$123,039,000	\$100,811,000
2	Hospital Total Net Assets	\$123,258,000	\$175,860,000	\$155,833,000
3	Hospital Change in Total Net Assets	\$4,444,000	\$52,602,000	(\$20,027,000)
4	Hospital Change in Total Net Assets %	103.7%	42.7%	-11.4%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
D.	<u>Cost Data Summary</u>			
1	<u>Ratio of Cost to Charges</u>	0.29	0.27	0.25
2	Total Operating Expenses	\$403,987,000	\$409,234,000	\$426,496,000
3	Total Gross Revenue	\$1,390,797,863	\$1,512,519,567	\$1,693,079,737
4	Total Other Operating Revenue	\$3,724,703	\$4,728,741	\$5,236,454
5	<u>Private Payment to Cost Ratio</u>	1.41	1.49	1.47
6	Total Non-Government Payments	\$179,025,786	\$191,706,566	\$198,001,904
7	Total Uninsured Payments	\$4,362,981	\$5,710,793	\$13,867,244
8	Total Non-Government Charges	\$475,057,071	\$516,542,643	\$544,853,123
9	Total Uninsured Charges	\$47,516,224	\$52,204,765	\$45,956,006
10	<u>Medicare Payment to Cost Ratio</u>	0.98	1.03	1.01
11	Total Medicare Payments	\$152,153,815	\$160,079,187	\$159,487,014
12	Total Medicare Charges	\$537,969,072	\$573,620,453	\$629,169,018
13	<u>Medicaid Payment to Cost Ratio</u>	0.74	0.69	0.71
14	Total Medicaid Payments	\$80,545,712	\$77,809,615	\$92,516,930
15	Total Medicaid Charges	\$376,222,234	\$420,590,203	\$516,578,722
16	<u>Uncompensated Care Cost</u>	\$12,979,556	\$14,066,134	\$17,291,595
17	Charity Care	\$14,777,279	\$19,484,535	\$13,389,500
18	Bad Debts	\$30,026,844	\$32,666,112	\$55,466,000
19	Total Uncompensated Care	\$44,804,123	\$52,150,647	\$68,855,500
20	<u>Uncompensated Care % of Total Expenses</u>	3.2%	3.4%	4.1%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>
21	Total Operating Expenses	\$403,987,000	\$409,234,000	\$426,496,000
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	2	1	2
2	Total Current Assets	\$129,026,000	\$143,463,000	\$146,801,000
3	Total Current Liabilities	\$80,770,000	\$113,611,000	\$90,997,000
4	<u>Days Cash on Hand</u>	54	60	61
5	Cash and Cash Equivalents	\$15,511,000	\$30,127,000	\$28,527,000
6	Short Term Investments	41,452,000	33,642,000	37,860,000
7	Total Cash and Short Term Investments	\$56,963,000	\$63,769,000	\$66,387,000
8	Total Operating Expenses	\$403,987,000	\$409,234,000	\$426,496,000
9	Depreciation Expense	\$20,175,000	\$22,794,000	\$30,957,000
10	Operating Expenses less Depreciation Expense	\$383,812,000	\$386,440,000	\$395,539,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	37	45	41
12	Net Patient Accounts Receivable	\$42,983,000	\$51,432,000	\$49,732,000
13	Due From Third Party Payers	\$11,424,000	\$10,552,000	\$8,273,000
14	Due To Third Party Payers	\$11,424,000	\$10,552,000	\$8,273,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$42,983,000	\$51,432,000	\$49,732,000
16	Total Net Patient Revenue	\$420,616,000	\$418,827,000	\$439,375,000
17	<u>Average Payment Period</u>	77	107	84
18	Total Current Liabilities	\$80,770,000	\$113,611,000	\$90,997,000
19	Total Operating Expenses	\$403,987,000	\$409,234,000	\$426,496,000
20	Depreciation Expense	\$20,175,000	\$22,794,000	\$30,957,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
21	Total Operating Expenses less Depreciation Expense	\$383,812,000	\$386,440,000	\$395,539,000
F. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	31.6	39.9	33.0
2	Total Net Assets	\$123,258,000	\$175,860,000	\$155,833,000
3	Total Assets	\$389,784,000	\$440,309,000	\$472,575,000
4	<u>Cash Flow to Total Debt Ratio</u>	42.9	36.4	43.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$34,868,000	\$36,447,000	\$42,896,000
6	Depreciation Expense	\$20,175,000	\$22,794,000	\$30,957,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$55,043,000	\$59,241,000	\$73,853,000
8	Total Current Liabilities	\$80,770,000	\$113,611,000	\$90,997,000
9	Total Long Term Debt	\$47,436,000	\$49,202,000	\$79,882,000
10	Total Current Liabilities and Total Long Term Debt	\$128,206,000	\$162,813,000	\$170,879,000
11	<u>Long Term Debt to Capitalization Ratio</u>	27.8	21.9	33.9
12	Total Long Term Debt	\$47,436,000	\$49,202,000	\$79,882,000
13	Total Net Assets	\$123,258,000	\$175,860,000	\$155,833,000
14	Total Long Term Debt and Total Net Assets	\$170,694,000	\$225,062,000	\$235,715,000
15	<u>Debt Service Coverage Ratio</u>	6.5	11.3	11.7
16	Excess Revenues over Expenses	34,868,000	\$36,447,000	\$42,896,000
17	Interest Expense	2,724,000	\$1,665,000	\$2,566,000
18	Depreciation and Amortization Expense	20,175,000	\$22,794,000	\$30,957,000
19	Principal Payments	6,228,000	\$3,747,000	\$3,948,000
G. <u>Other Financial Ratios</u>				

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
20	Average Age of Plant	14.1	12.5	9.8
21	Accumulated Depreciation	283,721,000	285,402,000	303,677,000
22	Depreciation and Amortization Expense	20,175,000	22,794,000	30,957,000
H. Utilization Measures Summary				
1	Patient Days	100,830	97,440	101,235
2	Discharges	18,936	18,453	18,207
3	ALOS	5.3	5.3	5.6
4	Staffed Beds	281	271	280
5	Available Beds	-	333	368
6	Licensed Beds	371	383	383
7	Occupancy of Staffed Beds	98.3%	98.5%	99.1%
8	Occupancy of Available Beds	74.5%	80.2%	75.4%
9	Full Time Equivalent Employees	2,110.6	2,126.0	2,151.0
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	30.7%	30.7%	29.5%
2	Medicare Gross Revenue Payer Mix Percentage	38.7%	37.9%	37.2%
3	Medicaid Gross Revenue Payer Mix Percentage	27.1%	27.8%	30.5%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	3.4%	3.5%	2.7%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$427,540,847	\$464,337,878	\$498,897,117
9	Medicare Gross Revenue (Charges)	\$537,969,072	\$573,620,453	\$629,169,018
10	Medicaid Gross Revenue (Charges)	\$376,222,234	\$420,590,203	\$516,578,722
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$47,516,224	\$52,204,765	\$45,956,006
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,549,486	\$1,766,268	\$2,478,874
14	Total Gross Revenue (Charges)	\$1,390,797,863	\$1,512,519,567	\$1,693,079,737
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	42.4%	43.3%	40.9%
2	Medicare Net Revenue Payer Mix Percentage	36.9%	37.2%	35.4%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
3	Medicaid Net Revenue Payer Mix Percentage	19.6%	18.1%	20.5%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	1.1%	1.3%	3.1%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$174,662,805	\$185,995,773	\$184,134,660
9	Medicare Net Revenue (Payments)	\$152,153,815	\$160,079,187	\$159,487,014
10	Medicaid Net Revenue (Payments)	\$80,545,712	\$77,809,615	\$92,516,930
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$4,362,981	\$5,710,793	\$13,867,244
13	CHAMPUS / TRICARE Net Revenue Payments)	\$241,726	\$317,227	\$731,387
14	Total Net Revenue (Payments)	\$411,967,039	\$429,912,595	\$450,737,235
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	5,672	5,525	5,161
2	Medicare	7,260	7,117	6,958
3	Medical Assistance	5,984	5,789	6,057
4	Medicaid	5,984	5,789	6,057
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	20	22	31
7	Uninsured (Included In Non-Government)	296	301	215
8	Total	18,936	18,453	18,207
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.21748	1.24220	1.27940
2	Medicare	1.58099	1.59207	1.59206
3	Medical Assistance	0.97425	1.03493	1.07163
4	Medicaid	0.97425	1.03493	1.07163
5	Other Medical Assistance	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.05752	1.20585	1.13051
7	Uninsured (Included In Non-Government)	1.07618	1.15332	1.18129
8	Total Case Mix Index	1.27982	1.31207	1.32951
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	11,267	10,835	13,334
2	Emergency Room - Treated and Discharged	67,791	66,060	73,906
3	Total Emergency Room Visits	79,058	76,895	87,240

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$3,299,596	\$2,804,119	(\$495,477)	-15%
2	Inpatient Payments	\$950,844	\$684,068	(\$266,776)	-28%
3	Outpatient Charges	\$1,709,714	\$1,252,399	(\$457,315)	-27%
4	Outpatient Payments	\$323,208	\$105,021	(\$218,187)	-68%
5	Discharges	59	30	(29)	-49%
6	Patient Days	367	330	(37)	-10%
7	Outpatient Visits (Excludes ED Visits)	453	236	(217)	-48%
8	Emergency Department Outpatient Visits	61	49	(12)	-20%
9	Emergency Department Inpatient Admissions	33	48	15	45%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,009,310	\$4,056,518	(\$952,792)	-19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,274,052	\$789,089	(\$484,963)	-38%
B.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$20,596,539	\$28,648,977	\$8,052,438	39%
2	Inpatient Payments	\$5,910,577	\$7,973,341	\$2,062,764	35%
3	Outpatient Charges	\$13,648,218	\$21,416,204	\$7,767,986	57%
4	Outpatient Payments	\$2,580,122	\$3,245,595	\$665,473	26%
5	Discharges	363	503	140	39%
6	Patient Days	2,328	3,283	955	41%
7	Outpatient Visits (Excludes ED Visits)	2,855	4,559	1,704	60%
8	Emergency Department Outpatient Visits	360	452	92	26%
9	Emergency Department Inpatient Admissions	260	468	208	80%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$34,244,757	\$50,065,181	\$15,820,424	46%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,490,699	\$11,218,936	\$2,728,237	32%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$71,934,692	\$54,275,620	(\$17,659,072)	-25%
2	Inpatient Payments	\$20,752,218	\$15,829,254	(\$4,922,964)	-24%
3	Outpatient Charges	\$34,506,643	\$32,253,209	(\$2,253,434)	-7%
4	Outpatient Payments	\$6,848,569	\$4,664,615	(\$2,183,954)	-32%
5	Discharges	1,286	934	(352)	-27%
6	Patient Days	8,870	6,804	(2,066)	-23%
7	Outpatient Visits (Excludes ED Visits)	6,584	6,866	282	4%
8	Emergency Department Outpatient Visits	1,335	1,027	(308)	-23%
9	Emergency Department Inpatient Admissions	1,041	1,056	15	1%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$106,441,335	\$86,528,829	(\$19,912,506)	-19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$27,600,787	\$20,493,869	(\$7,106,918)	-26%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$11,804,246	\$13,522,667	\$1,718,421	15%
2	Inpatient Payments	\$3,238,225	\$3,719,123	\$480,898	15%
3	Outpatient Charges	\$7,413,697	\$13,271,572	\$5,857,875	79%
4	Outpatient Payments	\$1,401,387	\$1,954,430	\$553,043	39%
5	Discharges	194	281	87	45%
6	Patient Days	1,500	1,765	265	18%
7	Outpatient Visits (Excludes ED Visits)	1,386	3,049	1,663	120%
8	Emergency Department Outpatient Visits	510	825	315	62%
9	Emergency Department Inpatient Admissions	165	901	736	446%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$19,217,943	\$26,794,239	\$7,576,296	39%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,639,612	\$5,673,553	\$1,033,941	22%
I. AETNA					
1	Inpatient Charges	\$19,331,880	\$25,770,204	\$6,438,324	33%
2	Inpatient Payments	\$5,407,202	\$6,814,098	\$1,406,896	26%
3	Outpatient Charges	\$11,210,733	\$13,901,765	\$2,691,032	24%
4	Outpatient Payments	\$2,308,409	\$2,877,626	\$569,217	25%
5	Discharges	348	317	(31)	-9%
6	Patient Days	2,410	2,067	(343)	-14%
7	Outpatient Visits (Excludes ED Visits)	2,149	3,182	1,033	48%
8	Emergency Department Outpatient Visits	344	362	18	5%
9	Emergency Department Inpatient Admissions	256	372	116	45%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$30,542,613	\$39,671,969	\$9,129,356	30%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,715,611	\$9,691,724	\$1,976,113	26%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$126,966,953	\$125,021,587	(\$1,945,366)	-2%
	TOTAL INPATIENT PAYMENTS	\$36,259,066	\$35,019,884	(\$1,239,182)	-3%
	TOTAL OUTPATIENT CHARGES	\$68,489,005	\$82,095,149	\$13,606,144	20%
	TOTAL OUTPATIENT PAYMENTS	\$13,461,695	\$12,847,287	(\$614,408)	-5%
	TOTAL DISCHARGES	2,250	2,065	(185)	-8%
	TOTAL PATIENT DAYS	15,475	14,249	(1,226)	-8%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	13,427	17,892	4,465	33%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	2,610	2,715	105	4%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	1,755	2,845	1,090	62%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$195,455,958	\$207,116,736	\$11,660,778	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$49,720,761	\$47,867,171	(\$1,853,590)	-4%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H.	AETNA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$30,636,000	\$161,059,000	\$130,423,000	426%
2	Short Term Investments	\$64,307,000	\$1,040,882,000	\$976,575,000	1519%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$51,432,000	\$368,342,000	\$316,910,000	616%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$4,641,000	\$4,641,000	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$10,552,000	\$35,271,000	\$24,719,000	234%
7	Inventories of Supplies	\$4,271,000	\$40,473,000	\$36,202,000	848%
8	Prepaid Expenses	\$8,554,000	\$13,846,000	\$5,292,000	62%
9	Other Current Assets	\$4,930,000	\$18,493,000	\$13,563,000	275%
	Total Current Assets	\$174,682,000	\$1,683,007,000	\$1,508,325,000	863%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$233,550,000	\$233,550,000	0%
	Total Noncurrent Assets Whose Use is Limited:	\$0	\$233,550,000	\$233,550,000	0%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$53,099,000	\$394,904,000	\$341,805,000	644%
7	Other Noncurrent Assets	\$71,269,000	\$400,099,000	\$328,830,000	461%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$410,120,000	\$2,900,150,000	\$2,490,030,000	607%
2	Less: Accumulated Depreciation	\$285,773,000	\$1,444,576,000	\$1,158,803,000	\$4
	Property, Plant and Equipment, Net	\$124,347,000	\$1,455,574,000	\$1,331,227,000	1071%
3	Construction in Progress	\$19,477,000	\$66,043,000	\$46,566,000	239%
	Total Net Fixed Assets	\$143,824,000	\$1,521,617,000	\$1,377,793,000	958%
	Total Assets	\$442,874,000	\$4,233,177,000	\$3,790,303,000	856%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$16,363,000	\$354,226,000	\$337,863,000	2065%
2	Salaries, Wages and Payroll Taxes	\$47,877,000	\$115,172,000	\$67,295,000	141%
3	Due To Third Party Payers	\$10,552,000	\$35,271,000	\$24,719,000	234%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$32,205,000	\$22,456,000	(\$9,749,000)	-30%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$5,306,000	\$40,432,000	\$35,126,000	662%
	Total Current Liabilities	\$112,303,000	\$567,557,000	\$455,254,000	405%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$49,202,000	\$902,400,000	\$853,198,000	1734%
2	Notes Payable (Net of Current Portion)	\$0	\$85,709,000	\$85,709,000	0%
	Total Long Term Debt	\$49,202,000	\$988,109,000	\$938,907,000	1908%
3	Accrued Pension Liability	\$42,945,000	\$321,442,000	\$278,497,000	648%
4	Other Long Term Liabilities	\$65,313,000	\$489,445,000	\$424,132,000	649%
	Total Long Term Liabilities	\$157,460,000	\$1,798,996,000	\$1,641,536,000	1043%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$120,290,000	\$1,644,056,000	\$1,523,766,000	1267%
2	Temporarily Restricted Net Assets	\$32,033,000	\$141,712,000	\$109,679,000	342%
3	Permanently Restricted Net Assets	\$20,788,000	\$80,856,000	\$60,068,000	289%
	Total Net Assets	\$173,111,000	\$1,866,624,000	\$1,693,513,000	978%
	Total Liabilities and Net Assets	\$442,874,000	\$4,233,177,000	\$3,790,303,000	856%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,512,520,000	\$11,767,478,000	\$10,254,958,000	678%
2	Less: Allowances	\$1,032,289,000	\$8,106,128,000	\$7,073,839,000	685%
3	Less: Charity Care	\$37,167,000	\$200,412,000	\$163,245,000	439%
4	Less: Other Deductions	\$9,253,000	\$49,503,000	\$40,250,000	435%
	Total Net Patient Revenue	\$433,811,000	\$3,411,435,000	\$2,977,624,000	686%
5	Provision for Bad Debts	\$14,984,000	\$123,743,000	\$108,759,000	726%
	Net Patient Service Revenue less provision for bad debts	\$418,827,000	\$3,287,692,000	\$2,868,865,000	685%
6	Other Operating Revenue	\$22,926,000	\$103,175,000	\$80,249,000	350%
7	Net Assets Released from Restrictions	\$3,282,000	\$3,819,000	\$537,000	16%
	Total Operating Revenue	\$445,035,000	\$3,394,686,000	\$2,949,651,000	663%
B. Operating Expenses:					
1	Salaries and Wages	\$147,763,000	\$1,318,391,000	\$1,170,628,000	792%
2	Fringe Benefits	\$48,230,000	\$425,746,000	\$377,516,000	783%
3	Physicians Fees	\$22,467,000	\$121,415,000	\$98,948,000	440%
4	Supplies and Drugs	\$47,722,000	\$493,932,000	\$446,210,000	935%
5	Depreciation and Amortization	\$22,858,000	\$192,072,000	\$169,214,000	740%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$1,665,000	\$26,917,000	\$25,252,000	1517%
8	Malpractice Insurance Cost	\$292,000	\$58,999,000	\$58,707,000	20105%
9	Other Operating Expenses	\$134,778,000	\$587,102,000	\$452,324,000	336%
	Total Operating Expenses	\$425,775,000	\$3,224,574,000	\$2,798,799,000	657%
	Income/(Loss) From Operations	\$19,260,000	\$170,112,000	\$150,852,000	783%
C. Non-Operating Revenue:					
1	Income from Investments	\$0	\$3,103,000	\$3,103,000	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$2,934,000	(\$23,196,000)	(\$26,130,000)	-891%
	Total Non-Operating Revenue	\$2,934,000	(\$20,093,000)	(\$23,027,000)	-785%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$22,194,000	\$150,019,000	\$127,825,000	576%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$1,035,000	\$86,913,000	\$85,878,000	8297%
	All Other Adjustments	\$0	(\$32,631,000)	(\$32,631,000)	0%
	Total Other Adjustments	\$1,035,000	\$54,282,000	\$53,247,000	5145%
	Excess/(Deficiency) of Revenue Over Expenses	\$23,229,000	\$204,301,000	\$181,072,000	780%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$420,616,000	\$418,827,000	\$3,287,692,000
2	Other Operating Revenue	19,050,000	26,208,000	106,994,000
3	Total Operating Revenue	\$439,666,000	\$445,035,000	\$3,394,686,000
4	Total Operating Expenses	420,298,000	425,775,000	3,224,574,000
5	Income/(Loss) From Operations	\$19,368,000	\$19,260,000	\$170,112,000
6	Total Non-Operating Revenue	2,164,000	3,969,000	34,189,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$21,532,000	\$23,229,000	\$204,301,000
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	4.38%	4.29%	4.96%
2	Parent Corporation Non-Operating Margin	0.49%	0.88%	1.00%
3	Parent Corporation Total Margin	4.87%	5.17%	5.96%
4	Income/(Loss) From Operations	\$19,368,000	\$19,260,000	\$170,112,000
5	Total Operating Revenue	\$439,666,000	\$445,035,000	\$3,394,686,000
6	Total Non-Operating Revenue	\$2,164,000	\$3,969,000	\$34,189,000
7	Total Revenue	\$441,830,000	\$449,004,000	\$3,428,875,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$21,532,000	\$23,229,000	\$204,301,000
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$72,028,000	\$120,290,000	\$1,644,056,000
2	Parent Corporation Total Net Assets	\$120,732,000	\$173,111,000	\$1,866,624,000
3	Parent Corporation Change in Total Net Assets	\$4,590,000	\$52,379,000	\$1,693,513,000
4	Parent Corporation Change in Total Net Assets %	104.0%	43.4%	978.3%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.99	1.56	2.97
2	Total Current Assets	\$158,647,000	\$174,682,000	\$1,683,007,000
3	Total Current Liabilities	\$79,540,000	\$112,303,000	\$567,557,000
4	<u>Days Cash on Hand</u>	78	86	145
5	Cash and Cash Equivalents	\$16,072,000	\$30,636,000	\$161,059,000
6	Short Term Investments	\$69,590,000	\$64,307,000	\$1,040,882,000
7	Total Cash and Short Term Investments	\$85,662,000	\$94,943,000	\$1,201,941,000
8	Total Operating Expenses	\$420,298,000	\$425,775,000	\$3,224,574,000
9	Depreciation Expense	\$20,233,000	\$22,858,000	\$192,072,000
10	Operating Expenses less Depreciation Expense	\$400,065,000	\$402,917,000	\$3,032,502,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	37	45	41
12	Net Patient Accounts Receivable	\$ 42,983,000	\$ 51,432,000	\$ 368,342,000
13	Due From Third Party Payers	\$11,424,000	\$10,552,000	\$35,271,000
14	Due To Third Party Payers	\$11,424,000	\$10,552,000	\$35,271,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 42,983,000	\$ 51,432,000	\$ 368,342,000
16	Total Net Patient Revenue	\$420,616,000	\$418,827,000	\$3,287,692,000
17	<u>Average Payment Period</u>	73	102	68
18	Total Current Liabilities	\$79,540,000	\$112,303,000	\$567,557,000
19	Total Operating Expenses	\$420,298,000	\$425,775,000	\$3,224,574,000
20	Depreciation Expense	\$20,233,000	\$22,858,000	\$192,072,000
20	Total Operating Expenses less Depreciation Expense	\$400,065,000	\$402,917,000	\$3,032,502,000

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>
E. Solvency Measures Summary				
1	<u>Equity Financing Ratio</u>	30.7	39.1	44.1
2	Total Net Assets	\$120,732,000	\$173,111,000	\$1,866,624,000
3	Total Assets	\$392,636,000	\$442,874,000	\$4,233,177,000
4	<u>Cash Flow to Total Debt Ratio</u>	32.9	28.5	25.5
5	Excess/(Deficiency) of Revenues Over Expenses	\$21,532,000	\$23,229,000	\$204,301,000
6	Depreciation Expense	\$20,233,000	\$22,858,000	\$192,072,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$41,765,000	\$46,087,000	\$396,373,000
8	Total Current Liabilities	\$79,540,000	\$112,303,000	\$567,557,000
9	Total Long Term Debt	\$47,436,000	\$49,202,000	\$988,109,000
10	Total Current Liabilities and Total Long Term Debt	\$126,976,000	\$161,505,000	\$1,555,666,000
11	<u>Long Term Debt to Capitalization Ratio</u>	28.2	22.1	34.6
12	Total Long Term Debt	\$47,436,000	\$49,202,000	\$988,109,000
13	Total Net Assets	\$120,732,000	\$173,111,000	\$1,866,624,000
14	Total Long Term Debt and Total Net Assets	\$168,168,000	\$222,313,000	\$2,854,733,000

BRIDGEPORT HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2014								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
LINE	DESCRIPTION	PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
1	Adult Medical/Surgical	68,584	12,891	13,032	188	233	99.9%	80.6%
2	ICU/CCU (Excludes Neonatal ICU)	8,478	386	0	24	32	96.8%	72.6%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,801	294	215	16	19	99.3%	83.6%
	TOTAL PSYCHIATRIC	5,801	294	215	16	19	99.3%	83.6%
5	Rehabilitation	5,221	353	375	15	18	95.4%	79.5%
6	Maternity	8,108	2,776	2,517	23	42	96.6%	52.9%
7	Newborn	5,043	1,893	1,951	14	24	98.7%	57.6%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	96,192	16,314	16,139	266	344	99.1%	76.6%
	TOTAL INPATIENT BED UTILIZATION	101,235	18,207	18,090	280	368	99.1%	75.4%
	TOTAL INPATIENT REPORTED YEAR	101,235	18,207	18,090	280	368	99.1%	75.4%
	TOTAL INPATIENT PRIOR YEAR	97,440	18,453	18,111	271	333	98.5%	80.2%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	3,795	-246	-21	9	35	0.5%	-4.8%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	4%	-1%	0%	3%	11%	1%	-6%
	Total Licensed Beds and Bassinets	383						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	4,307	10,054	5,747	133%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,654	7,900	6,246	378%
3	Emergency Department Scans	13,076	8,849	-4,227	-32%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	19,037	26,803	7,766	41%
B. MRI Scans (A)					
1	Inpatient Scans	1,282	1,412	130	10%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,884	3,299	1,415	75%
3	Emergency Department Scans	513	292	-221	-43%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	3,679	5,003	1,324	36%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	264	313	49	19%
3	Emergency Department Scans	0	1	1	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	264	314	50	19%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	174	189	15	9%
2	Outpatient Procedures	9,150	11,004	1,854	20%
	Total Linear Accelerator Procedures	9,324	11,193	1,869	20%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	398	390	-8	-2%
2	Outpatient Procedures	397	292	-105	-26%
	Total Cardiac Catheterization Procedures	795	682	-113	-14%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	174	169	-5	-3%
2	Elective Procedures	215	228	13	6%
	Total Cardiac Angioplasty Procedures	389	397	8	2%
H. Electrophysiology Studies					
1	Inpatient Studies	130	128	-2	-2%
2	Outpatient Studies	383	262	-121	-32%
	Total Electrophysiology Studies	513	390	-123	-24%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	3,947	4,079	132	3%
2	Outpatient Surgical Procedures	8,087	9,494	1,407	17%
	Total Surgical Procedures	12,034	13,573	1,539	13%
J. Endoscopy Procedures					

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Endoscopy Procedures	1,159	300	-859	-74%
2	Outpatient Endoscopy Procedures	5,400	4,278	-1,122	-21%
	Total Endoscopy Procedures	6,559	4,578	-1,981	-30%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	10,835	13,334	2,499	23%
2	Emergency Room Visits: Treated and Discharged	66,060	73,906	7,846	12%
	Total Emergency Room Visits	76,895	87,240	10,345	13%
L. Hospital Clinic Visits					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	17,349	18,911	1,562	9%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	7,943	7,845	-98	-1%
13	Specialty Clinic Visits - Other Speciality Clinics	4,213	2,424	-1,789	-42%
	Total Hospital Clinic Visits	29,505	29,180	-325	-1%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	11,557	102,417	90,860	786%
2	Cardiac Rehabilitation	3,676	3,172	-504	-14%
3	Chemotherapy	1,002	2,610	1,608	160%
4	Gastroenterology	5,400	6,862	1,462	27%
5	Other Outpatient Visits	120,800	49,597	-71,203	-59%
	Total Other Hospital Outpatient Visits	142,435	164,658	22,223	16%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	606.5	616.4	9.9	2%
2	Total Physician FTEs	107.2	117.0	9.8	9%
3	Total Non-Nursing and Non-Physician FTEs	1,412.3	1,417.6	5.3	0%
	Total Hospital Full Time Equivalent Employees	2,126.0	2,151.0	25.0	1%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Bridgeport Hospital	8,087	9,494	1,407	17%
	Total Outpatient Surgical Procedures(A)	8,087	9,494	1,407	17%
B. Outpatient Endoscopy Procedures					
1	Bridgeport Hospital	5,400	4,278	-1,122	-21%
	Total Outpatient Endoscopy Procedures(B)	5,400	4,278	-1,122	-21%
C. Outpatient Hospital Emergency Room Visits					
1	Bridgeport Hospital	66,060	73,906	7,846	12%
	Total Outpatient Hospital Emergency Room Visits(C)	66,060	73,906	7,846	12%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$378,190,000	\$395,362,847	\$17,172,847	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$125,611,818	\$122,306,782	(\$3,305,036)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.21%	30.94%	-2.28%	-7%
4	DISCHARGES	7,117	6,958	(159)	-2%
5	CASE MIX INDEX (CMI)	1.59207	1.59206	(0.00001)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	11,330.76219	11,077.55348	(253.20871)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,085.91	\$11,040.96	(\$44.95)	0%
8	PATIENT DAYS	49,215	50,222	1,007	2%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,552.31	\$2,435.32	(\$116.98)	-5%
10	AVERAGE LENGTH OF STAY	6.9	7.2	0.3	4%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$195,430,453	\$233,806,171	\$38,375,718	20%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$34,467,369	\$37,180,232	\$2,712,863	8%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.64%	15.90%	-1.73%	-10%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	51.68%	59.14%	7.46%	14%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,677.72425	4,114.76028	437.03603	12%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,371.93	\$9,035.82	(\$336.11)	-4%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$573,620,453	\$629,169,018	\$55,548,565	10%
18	TOTAL ACCRUED PAYMENTS	\$160,079,187	\$159,487,014	(\$592,173)	0%
19	TOTAL ALLOWANCES	\$413,541,266	\$469,682,004	\$56,140,738	14%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
B.	<u>NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</u>				
	<u>NON-GOVERNMENT INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$213,641,687	\$203,888,134	(\$9,753,553)	-5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$93,881,151	\$85,266,636	(\$8,614,515)	-9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.94%	41.82%	-2.12%	-5%
4	DISCHARGES	5,525	5,161	(364)	-7%
5	CASE MIX INDEX (CMI)	1.24220	1.27940	0.03720	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,863.15500	6,602.98340	(260.17160)	-4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$13,679.01	\$12,913.35	(\$765.66)	-6%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$2,593.10)	(\$1,872.39)	\$720.70	-28%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$17,796,827)	(\$12,363,386)	\$5,433,441	-31%
10	PATIENT DAYS	21,986	21,689	(297)	-1%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,270.04	\$3,931.33	(\$338.71)	-8%
12	AVERAGE LENGTH OF STAY	4.0	4.2	0.2	6%
	<u>NON-GOVERNMENT OUTPATIENT</u>				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$302,900,956	\$340,964,989	\$38,064,033	13%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$97,825,415	\$112,735,268	\$14,909,853	15%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.30%	33.06%	0.77%	2%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	141.78%	167.23%	25.45%	18%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	7,833.33911	8,630.81276	797.47365	10%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,488.34	\$13,061.95	\$573.61	5%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$3,116.41)	(\$4,026.13)	(\$909.72)	29%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$24,411,920)	(\$34,748,800)	(\$10,336,880)	42%
	<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>				
21	TOTAL ACCRUED CHARGES	\$516,542,643	\$544,853,123	\$28,310,480	5%
22	TOTAL ACCRUED PAYMENTS	\$191,706,566	\$198,001,904	\$6,295,338	3%
23	TOTAL ALLOWANCES	\$324,836,077	\$346,851,219	\$22,015,142	7%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$42,208,748)	(\$47,112,186)	(\$4,903,438)	12%
	<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$445,668,953	\$485,798,950	\$40,129,997	9%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$174,346,795	\$308,406,459	\$134,059,664	77%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$271,322,158	\$177,392,491	(\$93,929,667)	-35%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	60.88%	36.52%	-24.36%	

BRIDGEPORT HOSPITAL					
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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
C.	<u>UNINSURED</u>				
	<u>UNINSURED INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$12,095,054	\$8,164,273	(\$3,930,781)	-32%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$2,401,935	\$1,903,873	(\$498,062)	-21%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	19.86%	23.32%	3.46%	17%
4	DISCHARGES	301	215	(86)	-29%
5	CASE MIX INDEX (CMI)	1.15332	1.18129	0.02797	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	347.14932	253.97735	(93.17197)	-27%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,919.03	\$7,496.23	\$577.21	8%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,759.98	\$5,417.12	(\$1,342.86)	-20%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$4,166.89	\$3,544.72	(\$622.16)	-15%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,446,531	\$900,280	(\$546,252)	-38%
11	PATIENT DAYS	1,191	881	(310)	-26%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,016.74	\$2,161.04	\$144.30	7%
13	AVERAGE LENGTH OF STAY	4.0	4.1	0.1	4%
	<u>UNINSURED OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$40,109,711	\$37,791,733	(\$2,317,978)	-6%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,308,858	\$11,963,371	\$8,654,513	262%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	8.25%	31.66%	23.41%	284%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	331.62%	462.89%	131.27%	40%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	998.17851	995.21692	(2.96160)	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,314.90	\$12,020.87	\$8,705.97	263%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$9,173.45	\$1,041.08	(\$8,132.36)	-89%
21	MEDICARE - UNINSURED OP PMT / OPED	\$6,057.03	(\$2,985.05)	(\$9,042.08)	-149%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,046,000	(\$2,970,770)	(\$9,016,770)	-149%
	<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$52,204,765	\$45,956,006	(\$6,248,759)	-12%
24	TOTAL ACCRUED PAYMENTS	\$5,710,793	\$13,867,244	\$8,156,451	143%
25	TOTAL ALLOWANCES	\$46,493,972	\$32,088,762	(\$14,405,210)	-31%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,492,531	(\$2,070,491)	(\$9,563,022)	-128%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
<u>MEDICAID INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$198,004,779	\$230,209,572	\$32,204,793	16%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$44,541,610	\$49,876,097	\$5,334,487	12%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.50%	21.67%	-0.83%	-4%
4	DISCHARGES	5,789	6,057	268	5%
5	CASE MIX INDEX (CMI)	1.03493	1.07163	0.03670	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,991.20977	6,490.86291	499.65314	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,434.49	\$7,684.05	\$249.55	3%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,244.51	\$5,229.30	(\$1,015.21)	-16%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,651.42	\$3,356.91	(\$294.51)	-8%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$21,876,407	\$21,789,236	(\$87,171)	0%
11	PATIENT DAYS	26,165	29,184	3,019	12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,702.34	\$1,709.02	\$6.69	0%
13	AVERAGE LENGTH OF STAY	4.5	4.8	0.3	7%
<u>MEDICAID OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$222,585,424	\$286,369,150	\$63,783,726	29%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$33,268,005	\$42,640,833	\$9,372,828	28%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.95%	14.89%	-0.06%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	112.41%	124.39%	11.98%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,507.65616	7,534.60391	1,026.94775	16%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,112.13	\$5,659.33	\$547.20	11%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,376.21	\$7,402.62	\$26.41	0%
21	MEDICARE - MEDICAID OP PMT / OPED	\$4,259.80	\$3,376.49	(\$883.31)	-21%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$27,721,284	\$25,440,490	(\$2,280,794)	-8%
<u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$420,590,203	\$516,578,722	\$95,988,519	23%
24	TOTAL ACCRUED PAYMENTS	\$77,809,615	\$92,516,930	\$14,707,315	19%
25	TOTAL ALLOWANCES	\$342,780,588	\$424,061,792	\$81,281,204	24%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$49,597,690	\$47,229,725	(\$2,367,965)	-5%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
E.	<u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u>				
	<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$13,679.01	\$12,913.35	(\$765.66)	-6%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$11,085.91	\$11,040.96	(\$44.95)	0%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$12,488.34	\$13,061.95	\$573.61	5%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$9,371.93	\$9,035.82	(\$336.11)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
F.	<u>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</u>				
	<u>TOTAL MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$198,004,779	\$230,209,572	\$32,204,793	16%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$44,541,610	\$49,876,097	\$5,334,487	12%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.50%	21.67%	-0.83%	-4%
4	DISCHARGES	5,789	6,057	268	5%
5	CASE MIX INDEX (CMI)	1.03493	1.07163	0.03670	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,991.20977	6,490.86291	499.65314	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,434.49	\$7,684.05	\$249.55	3%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,244.51	\$5,229.30	(\$1,015.21)	-16%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,651.42	\$3,356.91	(\$294.51)	-8%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$21,876,407	\$21,789,236	(\$87,171)	0%
11	PATIENT DAYS	26,165	29,184	3,019	12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,702.34	\$1,709.02	\$6.69	0%
13	AVERAGE LENGTH OF STAY	4.5	4.8	0.3	7%
	<u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$222,585,424	\$286,369,150	\$63,783,726	29%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$33,268,005	\$42,640,833	\$9,372,828	28%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.95%	14.89%	-0.06%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	112.41%	124.39%	11.98%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,507.65616	7,534.60391	1,026.94775	16%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,112.13	\$5,659.33	\$547.20	11%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,376.21	\$7,402.62	\$26.41	0%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,259.80	\$3,376.49	(\$883.31)	-21%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$27,721,284	\$25,440,490	(\$2,280,794)	-8%
	<u>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$420,590,203	\$516,578,722	\$95,988,519	23%
24	TOTAL ACCRUED PAYMENTS	\$77,809,615	\$92,516,930	\$14,707,315	19%
25	TOTAL ALLOWANCES	\$342,780,588	\$424,061,792	\$81,281,204	24%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$597,583	\$1,194,141	\$596,558	100%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$81,673	\$184,899	\$103,226	126%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	13.67%	15.48%	1.82%	13%
4	DISCHARGES	22	31	9	41%
5	CASE MIX INDEX (CMI)	1.20585	1.13051	(0.07534)	-6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	26.52870	35.04581	8.51711	32%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,078.67	\$5,275.92	\$2,197.26	71%
8	PATIENT DAYS	74	140	66	89%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,103.69	\$1,320.71	\$217.02	20%
10	AVERAGE LENGTH OF STAY	3.4	4.5	1.2	34%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,168,685	\$1,284,733	\$116,048	10%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$235,554	\$546,488	\$310,934	132%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$1,766,268	\$2,478,874	\$712,606	40%
14	TOTAL ACCRUED PAYMENTS	\$317,227	\$731,387	\$414,160	131%
15	TOTAL ALLOWANCES	\$1,449,041	\$1,747,487	\$298,446	21%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$4,728,741	\$5,236,454	\$507,713	11%
2	TOTAL OPERATING EXPENSES	\$409,234,000	\$426,496,000	\$17,262,000	4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$19,484,535	\$13,389,500	(\$6,095,035)	-31%
5	BAD DEBTS (CHARGES)	\$32,666,112	\$55,466,000	\$22,799,888	70%
6	UNCOMPENSATED CARE (CHARGES)	\$52,150,647	\$68,855,500	\$16,704,853	32%
7	COST OF UNCOMPENSATED CARE	\$14,820,163	\$22,422,348	\$7,602,185	51%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$420,590,203	\$516,578,722	\$95,988,519	23%
9	TOTAL ACCRUED PAYMENTS	\$77,809,615	\$92,516,930	\$14,707,315	19%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$119,523,259	\$168,220,519	\$48,697,260	41%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$41,713,644	\$75,703,589	\$33,989,945	81%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$790,434,049	\$830,654,694	\$40,220,645	5%
2	TOTAL INPATIENT PAYMENTS	\$264,116,252	\$257,634,414	(\$6,481,838)	-2%
3	TOTAL INPATIENT PAYMENTS / CHARGES	33.41%	31.02%	-2.40%	-7%
4	TOTAL DISCHARGES	18,453	18,207	(246)	-1%
5	TOTAL CASE MIX INDEX	1.31207	1.32951	0.01744	1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	24,211.65566	24,206.44560	(5.21006)	0%
7	TOTAL OUTPATIENT CHARGES	\$722,085,518	\$862,425,043	\$140,339,525	19%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	91.35%	103.82%	12.47%	14%
9	TOTAL OUTPATIENT PAYMENTS	\$165,796,343	\$193,102,821	\$27,306,478	16%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.96%	22.39%	-0.57%	-2%
11	TOTAL CHARGES	\$1,512,519,567	\$1,693,079,737	\$180,560,170	12%
12	TOTAL PAYMENTS	\$429,912,595	\$450,737,235	\$20,824,640	5%
13	TOTAL PAYMENTS / TOTAL CHARGES	28.42%	26.62%	-1.80%	-6%
14	PATIENT DAYS	97,440	101,235	3,795	4%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$576,792,362	\$626,766,560	\$49,974,198	9%
2	INPATIENT PAYMENTS	\$170,235,101	\$172,367,778	\$2,132,677	1%
3	GOVT. INPATIENT PAYMENTS / CHARGES	29.51%	27.50%	-2.01%	-7%
4	DISCHARGES	12,928	13,046	118	1%
5	CASE MIX INDEX	1.34193	1.34934	0.00741	1%
6	CASE MIX ADJUSTED DISCHARGES	17,348.50066	17,603.46220	254.96154	1%
7	OUTPATIENT CHARGES	\$419,184,562	\$521,460,054	\$102,275,492	24%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	72.68%	83.20%	10.52%	14%
9	OUTPATIENT PAYMENTS	\$67,970,928	\$80,367,553	\$12,396,625	18%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.22%	15.41%	-0.80%	-5%
11	TOTAL CHARGES	\$995,976,924	\$1,148,226,614	\$152,249,690	15%
12	TOTAL PAYMENTS	\$238,206,029	\$252,735,331	\$14,529,302	6%
13	TOTAL PAYMENTS / CHARGES	23.92%	22.01%	-1.91%	-8%
14	PATIENT DAYS	75,454	79,546	4,092	5%
15	TOTAL GOVERNMENT DEDUCTIONS	\$757,770,895	\$895,491,283	\$137,720,388	18%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	6.9	7.2	0.3	4%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	4.2	0.2	6%
3	UNINSURED	4.0	4.1	0.1	4%
4	MEDICAID	4.5	4.8	0.3	7%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	3.4	4.5	1.2	34%
7	TOTAL AVERAGE LENGTH OF STAY	5.3	5.6	0.3	5%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,512,519,567	\$1,693,079,737	\$180,560,170	12%
2	TOTAL GOVERNMENT DEDUCTIONS	\$757,770,895	\$895,491,283	\$137,720,388	18%
3	UNCOMPENSATED CARE	\$52,150,647	\$68,855,500	\$16,704,853	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$271,322,158	\$177,392,491	(\$93,929,667)	-35%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,448,291	\$0	(\$1,448,291)	-100%
6	TOTAL ADJUSTMENTS	\$1,082,691,991	\$1,141,739,274	\$59,047,283	5%
7	TOTAL ACCRUED PAYMENTS	\$429,827,576	\$551,340,463	\$121,512,887	28%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$429,827,576	\$551,340,463	\$121,512,887	28%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2841798449	0.3256435305	0.0414636856	15%
11	COST OF UNCOMPENSATED CARE	\$14,820,163	\$22,422,348	\$7,602,185	51%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$41,713,644	\$75,703,589	\$33,989,945	81%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$56,533,806	\$98,125,937	\$41,592,130	74%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$27,721,284	\$25,440,490	(\$2,280,794)	-8%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,492,531	(\$2,070,491)	(\$9,563,022)	-128%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$35,213,815	\$23,369,999	(\$11,843,816)	-34%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,030,733	\$0	(\$2,030,733)	-100.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$11,085,595)	(\$11,362,275)	(\$276,680)	2.50%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$418,827,000	\$439,374,962	\$20,547,962	4.91%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$1,512,519,566	\$1,693,079,737	\$180,560,171	11.94%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$687,500	\$687,500	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$52,150,647	\$69,543,000	\$17,392,353	33.35%

BRIDGEPORT HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2014						
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND						
BASELINE UNDERPAYMENT DATA						
(1)	(2)	(3)		(4)		(5)
LINE	DESCRIPTION	ACTUAL 2013	FY	ACTUAL 2014	FY	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS						
A. INPATIENT ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$213,641,687		\$203,888,134		(\$9,753,553)
2	MEDICARE	\$378,190,000		395,362,847		\$17,172,847
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$198,004,779		230,209,572		\$32,204,793
4	MEDICAID	\$198,004,779		230,209,572		\$32,204,793
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$597,583		1,194,141		\$596,558
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,095,054		8,164,273		(\$3,930,781)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$576,792,362		\$626,766,560		\$49,974,198
	TOTAL INPATIENT CHARGES	\$790,434,049		\$830,654,694		\$40,220,645
B. OUTPATIENT ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$302,900,956		\$340,964,989		\$38,064,033
2	MEDICARE	\$195,430,453		233,806,171		\$38,375,718
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$222,585,424		286,369,150		\$63,783,726
4	MEDICAID	\$222,585,424		286,369,150		\$63,783,726
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$1,168,685		1,284,733		\$116,048
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$40,109,711		37,791,733		(\$2,317,978)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$419,184,562		\$521,460,054		\$102,275,492
	TOTAL OUTPATIENT CHARGES	\$722,085,518		\$862,425,043		\$140,339,525
C. TOTAL ACCRUED CHARGES						
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$516,542,643		\$544,853,123		\$28,310,480
2	TOTAL MEDICARE	\$573,620,453		\$629,169,018		\$55,548,565
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$420,590,203		\$516,578,722		\$95,988,519
4	TOTAL MEDICAID	\$420,590,203		\$516,578,722		\$95,988,519
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0		\$0		\$0
6	TOTAL CHAMPUS / TRICARE	\$1,766,268		\$2,478,874		\$712,606
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$52,204,765		\$45,956,006		(\$6,248,759)
	TOTAL GOVERNMENT CHARGES	\$995,976,924		\$1,148,226,614		\$152,249,690
	TOTAL CHARGES	\$1,512,519,567		\$1,693,079,737		\$180,560,170
D. INPATIENT ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$93,881,151		\$85,266,636		(\$8,614,515)
2	MEDICARE	\$125,611,818		122,306,782		(\$3,305,036)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$44,541,610		49,876,097		\$5,334,487
4	MEDICAID	\$44,541,610		49,876,097		\$5,334,487
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$81,673		184,899		\$103,226
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,401,935		1,903,873		(\$498,062)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$170,235,101		\$172,367,778		\$2,132,677
	TOTAL INPATIENT PAYMENTS	\$264,116,252		\$257,634,414		(\$6,481,838)
E. OUTPATIENT ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$97,825,415		\$112,735,268		\$14,909,853
2	MEDICARE	\$34,467,369		37,180,232		\$2,712,863
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$33,268,005		42,640,833		\$9,372,828
4	MEDICAID	\$33,268,005		42,640,833		\$9,372,828
5	OTHER MEDICAL ASSISTANCE	\$0		0		\$0
6	CHAMPUS / TRICARE	\$235,554		546,488		\$310,934
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,308,858		11,963,371		\$8,654,513
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$67,970,928		\$80,367,553		\$12,396,625
	TOTAL OUTPATIENT PAYMENTS	\$165,796,343		\$193,102,821		\$27,306,478
F. TOTAL ACCRUED PAYMENTS						
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$191,706,566		\$198,001,904		\$6,295,338
2	TOTAL MEDICARE	\$160,079,187		\$159,487,014		(\$592,173)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$77,809,615		\$92,516,930		\$14,707,315
4	TOTAL MEDICAID	\$77,809,615		\$92,516,930		\$14,707,315
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0		\$0		\$0
6	TOTAL CHAMPUS / TRICARE	\$317,227		\$731,387		\$414,160
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,710,793		\$13,867,244		\$8,156,451
	TOTAL GOVERNMENT PAYMENTS	\$238,206,029		\$252,735,331		\$14,529,302
	TOTAL PAYMENTS	\$429,912,595		\$450,737,235		\$20,824,640

BRIDGEPORT HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2014						
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND						
BASELINE UNDERPAYMENT DATA						
(1)	(2)	(3)		(4)	(5)	
LINE	DESCRIPTION	ACTUAL 2013	FY	ACTUAL 2014	FY	AMOUNT DIFFERENCE
II. PAYER MIX						
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.12%		12.04%		-2.08%
2	MEDICARE	25.00%		23.35%		-1.65%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13.09%		13.60%		0.51%
4	MEDICAID	13.09%		13.60%		0.51%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.04%		0.07%		0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.80%		0.48%		-0.32%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	38.13%		37.02%		-1.12%
	TOTAL INPATIENT PAYER MIX	52.26%		49.06%		-3.20%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	20.03%		20.14%		0.11%
2	MEDICARE	12.92%		13.81%		0.89%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.72%		16.91%		2.20%
4	MEDICAID	14.72%		16.91%		2.20%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.08%		0.08%		0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.65%		2.23%		-0.42%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	27.71%		30.80%		3.09%
	TOTAL OUTPATIENT PAYER MIX	47.74%		50.94%		3.20%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%		100.00%		0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21.84%		18.92%		-2.92%
2	MEDICARE	29.22%		27.13%		-2.08%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.36%		11.07%		0.70%
4	MEDICAID	10.36%		11.07%		0.70%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.02%		0.04%		0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.56%		0.42%		-0.14%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	39.60%		38.24%		-1.36%
	TOTAL INPATIENT PAYER MIX	61.43%		57.16%		-4.28%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	22.75%		25.01%		2.26%
2	MEDICARE	8.02%		8.25%		0.23%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.74%		9.46%		1.72%
4	MEDICAID	7.74%		9.46%		1.72%
5	OTHER MEDICAL ASSISTANCE	0.00%		0.00%		0.00%
6	CHAMPUS / TRICARE	0.05%		0.12%		0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.77%		2.65%		1.88%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	15.81%		17.83%		2.02%
	TOTAL OUTPATIENT PAYER MIX	38.57%		42.84%		4.28%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%		100.00%		0.00%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,525	5,161	(364)
2	MEDICARE	7,117	6,958	(159)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,789	6,057	268
4	MEDICAID	5,789	6,057	268
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	22	31	9
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	301	215	(86)
	TOTAL GOVERNMENT DISCHARGES	12,928	13,046	118
	TOTAL DISCHARGES	18,453	18,207	(246)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21,986	21,689	(297)
2	MEDICARE	49,215	50,222	1,007
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26,165	29,184	3,019
4	MEDICAID	26,165	29,184	3,019
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	74	140	66
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,191	881	(310)
	TOTAL GOVERNMENT PATIENT DAYS	75,454	79,546	4,092
	TOTAL PATIENT DAYS	97,440	101,235	3,795
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	4.2	0.2
2	MEDICARE	6.9	7.2	0.3
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.5	4.8	0.3
4	MEDICAID	4.5	4.8	0.3
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	3.4	4.5	1.2
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.0	4.1	0.1
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.8	6.1	0.3
	TOTAL AVERAGE LENGTH OF STAY	5.3	5.6	0.3
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.24220	1.27940	0.03720
2	MEDICARE	1.59207	1.59206	(0.00001)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.03493	1.07163	0.03670
4	MEDICAID	1.03493	1.07163	0.03670
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.20585	1.13051	(0.07534)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.15332	1.18129	0.02797
	TOTAL GOVERNMENT CASE MIX INDEX	1.34193	1.34934	0.00741
	TOTAL CASE MIX INDEX	1.31207	1.32951	0.01744
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$445,668,953	\$485,798,950	\$40,129,997
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$174,346,795	\$308,406,459	\$134,059,664
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$271,322,158	\$177,392,491	(\$93,929,667)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	60.88%	36.52%	-24.36%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,030,733	\$0	(\$2,030,733)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,448,291	\$0	(\$1,448,291)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$19,484,535	\$13,389,500	(\$6,095,035)
9	BAD DEBTS	\$32,666,112	\$55,466,000	\$22,799,888
10	TOTAL UNCOMPENSATED CARE	\$52,150,647	\$68,855,500	\$16,704,853
11	TOTAL OTHER OPERATING REVENUE	\$4,728,741	\$5,236,454	\$507,713
12	TOTAL OPERATING EXPENSES	\$409,234,000	\$426,496,000	\$17,262,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,863.15500	6,602.98340	(260.17160)
2	MEDICARE	11,330.76219	11,077.55348	(253.20871)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,991.20977	6,490.86291	499.65314
4	MEDICAID	5,991.20977	6,490.86291	499.65314
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	26.52870	35.04581	8.51711
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	347.14932	253.97735	(93.17197)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	17,348.50066	17,603.46220	254.96154
	TOTAL CASE MIX ADJUSTED DISCHARGES	24,211.65566	24,206.44560	(5.21006)
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,833.33911	8,630.81276	797.47365
2	MEDICARE	3,677.72425	4,114.76028	437.03603
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,507.65616	7,534.60391	1,026.94775
4	MEDICAID	6,507.65616	7,534.60391	1,026.94775
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	43.02510	33.35178	-9.67333
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	998.17851	995.21692	-2.96160
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	10,228.40551	11,682.71596	1,454.31045
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	18,061.74462	20,313.52872	2,251.78410
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,679.01	\$12,913.35	(\$765.66)
2	MEDICARE	\$11,085.91	\$11,040.96	(\$44.95)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,434.49	\$7,684.05	\$249.55
4	MEDICAID	\$7,434.49	\$7,684.05	\$249.55
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$3,078.67	\$5,275.92	\$2,197.26
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,919.03	\$7,496.23	\$577.21
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$9,812.67	\$9,791.70	(\$20.97)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$10,908.64	\$10,643.22	(\$265.43)
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,488.34	\$13,061.95	\$573.61
2	MEDICARE	\$9,371.93	\$9,035.82	(\$336.11)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,112.13	\$5,659.33	\$547.20
4	MEDICAID	\$5,112.13	\$5,659.33	\$547.20
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,474.80	\$16,385.57	\$10,910.77
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,314.90	\$12,020.87	\$8,705.97
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,645.31	\$6,879.18	\$233.87
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,179.42	\$9,506.12	\$326.70

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$27,721,284	\$25,440,490	(\$2,280,794)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,492,531	(\$2,070,491)	(\$9,563,022)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$35,213,815	\$23,369,999	(\$11,843,816)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,512,519,567	\$1,693,079,737	\$180,560,170
2	TOTAL GOVERNMENT DEDUCTIONS	\$757,770,895	\$895,491,283	\$137,720,388
3	UNCOMPENSATED CARE	\$52,150,647	\$68,855,500	\$16,704,853
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$271,322,158	\$177,392,491	(\$93,929,667)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,448,291	\$0	(\$1,448,291)
6	TOTAL ADJUSTMENTS	\$1,082,691,991	\$1,141,739,274	\$59,047,283
7	TOTAL ACCRUED PAYMENTS	\$429,827,576	\$551,340,463	\$121,512,887
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$429,827,576	\$551,340,463	\$121,512,887
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2841798449	0.3256435305	0.0414636856
11	COST OF UNCOMPENSATED CARE	\$14,820,163	\$22,422,348	\$7,602,185
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$41,713,644	\$75,703,589	\$33,989,945
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$56,533,806	\$98,125,937	\$41,592,130
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	43.94%	41.82%	-2.12%
2	MEDICARE	33.21%	30.94%	-2.28%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	22.50%	21.67%	-0.83%
4	MEDICAID	22.50%	21.67%	-0.83%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	13.67%	15.48%	1.82%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	19.86%	23.32%	3.46%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	29.51%	27.50%	-2.01%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	33.41%	31.02%	-2.40%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32.30%	33.06%	0.77%
2	MEDICARE	17.64%	15.90%	-1.73%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.95%	14.89%	-0.06%
4	MEDICAID	14.95%	14.89%	-0.06%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	20.16%	42.54%	22.38%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	8.25%	31.66%	23.41%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	16.22%	15.41%	-0.80%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	22.96%	22.39%	-0.57%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$429,912,595	\$450,737,235	\$20,824,640
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$429,912,595	\$450,737,235	\$20,824,640
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$11,085,595)	(\$11,362,275)	(\$276,680)
4	CALCULATED NET REVENUE	\$452,075,554	\$439,374,960	(\$12,700,594)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$418,827,000	\$439,374,962	\$20,547,962
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$33,248,554	(\$2)	(\$33,248,556)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,512,519,567	\$1,693,079,737	\$180,560,170
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,512,519,567	\$1,693,079,737	\$180,560,170
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,512,519,566	\$1,693,079,737	\$180,560,171
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1	\$0	(\$1)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$52,150,647	\$68,855,500	\$16,704,853
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$687,500	\$687,500
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$52,150,647	\$69,543,000	\$17,392,353
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$52,150,647	\$69,543,000	\$17,392,353
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

BRIDGEPORT HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$203,888,134
2	MEDICARE	395,362,847
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	230,209,572
4	MEDICAID	230,209,572
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,194,141
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	8,164,273
	TOTAL INPATIENT GOVERNMENT CHARGES	\$626,766,560
	TOTAL INPATIENT CHARGES	\$830,654,694
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$340,964,989
2	MEDICARE	233,806,171
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	286,369,150
4	MEDICAID	286,369,150
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,284,733
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	37,791,733
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$521,460,054
	TOTAL OUTPATIENT CHARGES	\$862,425,043
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$544,853,123
2	TOTAL GOVERNMENT ACCRUED CHARGES	1,148,226,614
	TOTAL ACCRUED CHARGES	\$1,693,079,737
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$85,266,636
2	MEDICARE	122,306,782
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	49,876,097
4	MEDICAID	49,876,097
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	184,899
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,903,873
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$172,367,778
	TOTAL INPATIENT PAYMENTS	\$257,634,414
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$112,735,268
2	MEDICARE	37,180,232
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	42,640,833
4	MEDICAID	42,640,833
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	546,488
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	11,963,371
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$80,367,553
	TOTAL OUTPATIENT PAYMENTS	\$193,102,821
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$198,001,904
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	252,735,331
	TOTAL ACCRUED PAYMENTS	\$450,737,235

BRIDGEPORT HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,161
2	MEDICARE	6,958
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,057
4	MEDICAID	6,057
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	31
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	215
	TOTAL GOVERNMENT DISCHARGES	13,046
	TOTAL DISCHARGES	18,207
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,27940
2	MEDICARE	1,59206
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,07163
4	MEDICAID	1,07163
5	OTHER MEDICAL ASSISTANCE	0,00000
6	CHAMPUS / TRICARE	1,13051
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,18129
	TOTAL GOVERNMENT CASE MIX INDEX	1,34934
	TOTAL CASE MIX INDEX	1,32951
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$485,798,950
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$308,406,459
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$177,392,491
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	36.52%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$13,389,500
9	BAD DEBTS	\$55,466,000
10	TOTAL UNCOMPENSATED CARE	\$68,855,500
11	TOTAL OTHER OPERATING REVENUE	\$5,236,454
12	TOTAL OPERATING EXPENSES	\$426,496,000

BRIDGEPORT HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$450,737,235
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$450,737,235
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$11,362,275)
	CALCULATED NET REVENUE	\$439,374,960
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$439,374,962
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$2)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$1,693,079,737
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,693,079,737
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,693,079,737
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$68,855,500
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$687,500
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$69,543,000
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$69,543,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	3,167	1,972	(1,195)	-38%
2	Number of Approved Applicants	2,237	1,763	(474)	-21%
3	Total Charges (A)	\$19,484,535	\$13,389,500	(\$6,095,035)	-31%
4	Average Charges	\$8,710	\$7,595	(\$1,115)	-13%
5	Ratio of Cost to Charges (RCC)	0.289696	0.269721	(0.019975)	-7%
6	Total Cost	\$5,644,592	\$3,611,429	(\$2,033,163)	-36%
7	Average Cost	\$2,523	\$2,048	(\$475)	-19%
8	Charity Care - Inpatient Charges	\$10,575,273	\$2,743,485	(\$7,831,788)	-74%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	5,790,544	4,256,896	(1,533,648)	-26%
10	Charity Care - Emergency Department Charges	3,118,718	6,389,119	3,270,401	105%
11	Total Charges (A)	\$19,484,535	\$13,389,500	(\$6,095,035)	-31%
12	Charity Care - Number of Patient Days	2,664	3,334	670	25%
13	Charity Care - Number of Discharges	437	511	74	17%
14	Charity Care - Number of Outpatient ED Visits	1,620	3,044	1,424	88%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	5,327	5,222	(105)	-2%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$17,729,603	\$30,104,291	\$12,374,688	70%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	9,707,933	16,483,756	6,775,823	70%
3	Bad Debts - Emergency Department	5,228,576	8,877,953	3,649,377	70%
4	Total Bad Debts (A)	\$32,666,112	\$55,466,000	\$22,799,888	70%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$19,484,535	\$13,389,500	(\$6,095,035)	-31%
2	Bad Debts (A)	32,666,112	55,466,000	22,799,888	70%
3	Total Uncompensated Care (A)	\$52,150,647	\$68,855,500	\$16,704,853	32%
4	Uncompensated Care - Inpatient Services	\$28,304,876	\$32,847,776	\$4,542,900	16%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	15,498,477	20,740,652	5,242,175	34%
6	Uncompensated Care - Emergency Department	8,347,294	15,267,072	6,919,778	83%
7	Total Uncompensated Care (A)	\$52,150,647	\$68,855,500	\$16,704,853	32%

(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
A. Gross and Net Revenue				
1	Inpatient Gross Revenue	\$766,945,754	\$790,434,049	\$830,654,694
2	Outpatient Gross Revenue	\$623,852,109	\$722,085,518	\$862,425,043
3	Total Gross Patient Revenue	\$1,390,797,863	\$1,512,519,567	\$1,693,079,737
4	Net Patient Revenue	\$420,616,000	\$418,827,000	\$439,375,000
B. Total Operating Expenses				
1	Total Operating Expense	\$403,987,000	\$409,234,000	\$426,496,000
C. Utilization Statistics				
1	Patient Days	100,830	97,440	101,235
2	Discharges	18,936	18,453	18,207
3	Average Length of Stay	5.3	5.3	5.6
4	Equivalent (Adjusted) Patient Days (EPD)	182,848	186,454	206,342
0	Equivalent (Adjusted) Discharges (ED)	34,339	35,310	37,110
D. Case Mix Statistics				
1	Case Mix Index	1.27982	1.31207	1.32951
2	Case Mix Adjusted Patient Days (CMAPD)	129,044	127,848	134,593
3	Case Mix Adjusted Discharges (CMAD)	24,235	24,212	24,206
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	234,011	244,642	274,334
5	Case Mix Adjusted Equivalent Discharges (CMAED)	43,948	46,330	49,339
E. Gross Revenue Per Statistic				
1	Total Gross Revenue per Patient Day	\$13,793	\$15,523	\$16,724
2	Total Gross Revenue per Discharge	\$73,447	\$81,966	\$92,991
3	Total Gross Revenue per EPD	\$7,606	\$8,112	\$8,205
4	Total Gross Revenue per ED	\$40,502	\$42,835	\$45,623
5	Total Gross Revenue per CMAEPD	\$5,943	\$6,183	\$6,172
6	Total Gross Revenue per CMAED	\$31,647	\$32,647	\$34,315
7	Inpatient Gross Revenue per EPD	\$4,194	\$4,239	\$4,026
8	Inpatient Gross Revenue per ED	\$22,335	\$22,385	\$22,383

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$4,172	\$4,298	\$4,340
2	Net Patient Revenue per Discharge	\$22,213	\$22,697	\$24,132
3	Net Patient Revenue per EPD	\$2,300	\$2,246	\$2,129
4	Net Patient Revenue per ED	\$12,249	\$11,861	\$11,840
5	Net Patient Revenue per CMAEPD	\$1,797	\$1,712	\$1,602
6	Net Patient Revenue per CMAED	\$9,571	\$9,040	\$8,905
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$4,007	\$4,200	\$4,213
2	Total Operating Expense per Discharge	\$21,334	\$22,177	\$23,425
3	Total Operating Expense per EPD	\$2,209	\$2,195	\$2,067
4	Total Operating Expense per ED	\$11,765	\$11,590	\$11,493
5	Total Operating Expense per CMAEPD	\$1,726	\$1,673	\$1,555
6	Total Operating Expense per CMAED	\$9,192	\$8,833	\$8,644
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$51,727,848	\$53,194,778	\$53,745,825
2	Nursing Fringe Benefits Expense	\$13,134,644	\$13,655,559	\$13,784,956
3	Total Nursing Salary and Fringe Benefits Expense	\$64,862,492	\$66,850,337	\$67,530,781
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$10,838,798	\$11,387,101	\$13,355,748
2	Physician Fringe Benefits Expense	\$2,452,958	\$2,563,288	\$2,616,814
3	Total Physician Salary and Fringe Benefits Expense	\$13,291,756	\$13,950,389	\$15,972,562
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$81,647,354	\$83,395,121	\$86,349,427
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$31,766,398	\$31,797,153	\$31,703,230
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$113,413,752	\$115,192,274	\$118,052,657
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$144,214,000	\$147,977,000	\$153,451,000
2	Total Fringe Benefits Expense	\$47,354,000	\$48,016,000	\$48,105,000
3	Total Salary and Fringe Benefits Expense	\$191,568,000	\$195,993,000	\$201,556,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	585.4	606.5	616.4
2	Total Physician FTEs	109.3	107.2	117.0
3	Total Non-Nursing, Non-Physician FTEs	1415.9	1412.3	1417.6
4	Total Full Time Equivalent Employees (FTEs)	2,110.6	2,126.0	2,151.0
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$88,363	\$87,708	\$87,193
2	Nursing Fringe Benefits Expense per FTE	\$22,437	\$22,515	\$22,364
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$110,800	\$110,223	\$109,557
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$99,166	\$106,223	\$114,152
2	Physician Fringe Benefits Expense per FTE	\$22,442	\$23,911	\$22,366
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$121,608	\$130,134	\$136,518
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$57,665	\$59,049	\$60,912
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$22,435	\$22,514	\$22,364
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$80,100	\$81,564	\$83,276
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$68,328	\$69,603	\$71,339
2	Total Fringe Benefits Expense per FTE	\$22,436	\$22,585	\$22,364
3	Total Salary and Fringe Benefits Expense per FTE	\$90,765	\$92,189	\$93,703
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,900	\$2,011	\$1,991
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,117	\$10,621	\$11,070
3	Total Salary and Fringe Benefits Expense per EPD	\$1,048	\$1,051	\$977
4	Total Salary and Fringe Benefits Expense per ED	\$5,579	\$5,551	\$5,431
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$819	\$801	\$735
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,359	\$4,230	\$4,085