ANNUAL REPORTING

FISCAL YEAR 2014

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

(1)	(2)	(3)		
		AFFILIATE INFORMATION		
LINE	DESCRIPTION	AFFILIATE INFORMATION		
A.	AFFILIATE NAME	BACKUS CORPORATION		
		PARENT CORPORATION - FOR THE WILLIAM W. BACKUS HOSPITAL. ITS PURPOSE IS TO		
1	Affiliate Description	PROMOTE AND FURTHER THE WELFARE, PROGRAMS AND ACTIVITIES OF THE HOSPITAL, OR OTHER AFFILIATES WHERE APPLICABLE.		
2	Affiliate type of service	Parent Corporation		
3	Tax Status	lot for Profit		
4	Street Address	26 Washington Street ,		
5	Town	lorwich		
6	State	Connecticut		
	Zip Code	06360 -		
8	CEO Name CEO Title	David A. Whitehead President & Chief Executive Officer		
	CT Agent Name	David A. Whitehead		
	CT Agent Company	Backus Hospital		
	CT Agent Company Street Address	326 Washington Street ,		
	CT Agent Town	Norwich		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06360 -		
В.	AFFILIATE NAME	BACKUS HEALTH CARE, INC		
ь.	AFFILIATE NAME	HEALTH & EDUCATION SERVICES - ITS PURPOSE IS TO ASSIST THE HOSPITAL IN PROVIDING		
		VARIOUS TYPES OF MEDICAL CARE AND HEALTH RELATED EDUCATION PROGRAMS TO THE		
	Affiliate Description	COMMUNITY ON AN OUTPATIENT BASIS.		
	Affiliate type of service	Health Education Services		
3	Tax Status	Not for Profit		
4	Street Address	326 Washington Street		
5 6	Town State	Norwich Connecticut		
7	Zip Code	06360 -		
8	CEO Name	David A. Whitehead		
9	CEO Title	President & Chief Executive Officer		
10	CT Agent Name	David A. Whitehead		
11	CT Agent Company	Backus Hospital		
	CT Agent Company Street Address	326 Washington Street		
	CT Agent Town	Norwich		
	CT Agent State	Connecticut 06360 -		
15	CT Agent Zip Code	100300 -		
C.	AFFILIATE NAME	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC		
		,		
l .		AN AIR RIGHTS CONDOMINIUM ASSOCIATION ORGANIZED TO MANAGE THE PHYSICIAN		
1	Affiliate Description	OCCUPIED PORTION OF THE HOSPITAL OWNED MEDICAL OFFICE BUILDING		
3	Affiliate type of service	Real Estate		
4	Tax Status Street Address	For Profit 330 Washington Street		
5	Town	Norwich		
6	State	Connecticut		
7	Zip Code	06360 -		
8	CEO Name	Daniel E. Lohr		
9	CEO Title	President		
	CT Agent Name	Daniel E. Lohr		
11	CT Agent Company	Backus Hospital		
	CT Agent Company Street Address	330 Washington Street		
	CT Agent Town CT Agent State	Norwich Connecticut		
	CT Agent State CT Agent Zip Code	06360 -		
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REPORT 20 1 OF 31 7/7/2015,2:04 PM

ANNUAL REPORTING

FISCAL YEAR 2014

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

(1)) (2)			
LINE	DESCRIPTION	AFFILIATE INFORMATION		
D.	AFFILIATE NAME	BACKUS PHYSICIAN SERVICES, LLC		
	, , , , , <u> </u>	,		
	Arrive Book of	PROVIDE MEDION A CURCION PUNCIONAL OFFICIOSO DO A CURCIDADY OF CONTROL FE INC.		
	Affiliate Description Affiliate type of service	PROVIDE MEDICAL & SURGICAL PHYSICIAN SERVICES. IS A SUBSIDARY OF CONNCARE, INC. Physicians Services		
3	Tax Status	For Profit		
4	Street Address	112 Lafayette Street		
5	Town	Norwich		
6	State	Connecticut		
7	Zip Code	06360 -		
8 9	CEO Name CEO Title	David A. Whitehead President		
	CT Agent Name	David A. Whitehead		
	CT Agent Company	CONNCare, Inc.		
	CT Agent Company Street Address	112 Lafayette Street		
	CT Agent Town	Norwich		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06360 -		
E.	AFFILIATE NAME	CLINICAL LABORATORY PARTNERS, LLC		
	70 TIEDOLE TO MIL			
1	Affiliate Description	LAB		
3	Affiliate type of service Tax Status	Lab Not for Profit		
4	Street Address	129 Patricia Genova Drive		
5	Town	Newington		
6	State	Connecticut		
7	Zip Code	06111 -		
	CEO Name	James Fantus		
9	CEO Title	President & CEO		
	CT Agent Name CT Agent Company	Winship Service Corporation Winship Service Corporation		
	CT Agent Company CT Agent Company Street Address	One Constitution Plaza		
	CT Agent Town	Hartford		
14	CT Agent State	Connecticut		
15	CT Agent Zip Code	06103 - 1919		
_	AFEILIATE NAME	COMMINITY MEDICAL DADTNEDS INC		
F.	AFFILIATE NAME	COMMUNITY MEDICAL PARTNERS, INC PHYSICIAN SERVICES - TO PROVIDE PROFESSIONAL MEDICAL SERVICES TO THE PATIENTS OF		
		AFFILIATES OF THE BACKUS CORPORATION AND TO OTHER INDIVIDUALS IN AREAS AND		
1	Affiliate Description	COMMUNITIES SERVED BY THE CORPORATION		
2	Affiliate type of service	Physicians Services		
3	Tax Status	Not for Profit		
<u>4</u> 5	Street Address Town	326 WASHINGTON STREET NORWICH		
6	State	Connecticut		
7	Zip Code	06360 -		
	CEO Name	JAMES G. WATKINS, JR		
9	CEO Title	CEO		
	CT Agent Name	JAMES G. WATKINS, JR		
	CT Agent Company	BACKUS HOSPITAL		
	CT Agent Company Street Address CT Agent Town	326 WASHINGTON STREET NORWICH		
	CT Agent Town CT Agent State	Connecticut		
	CT Agent State CT Agent Zip Code	06360 -		
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REPORT 20 2 OF 31 7/7/2015,2:04 PM

ANNUAL REPORTING

FISCAL YEAR 2014

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

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
G.	AFFILIATE NAME	CONNCARE, INC	
		OCCUPATIONAL HEALTH & OUTPATIENT CARE - IS A SUBSIDIARY OF BACKUS HEALTH CARE,	
,	Affiliate Description	INC. ITS PURPOSE IS TO PROVIDE OCCUPATIONAL HEALTH SERVICES TO EMPLOYERS AND	
	Affiliate Description Affiliate type of service	THEIR EMPLOYEES AND TO ASSIST CLIENT COMPANIES WITH THE CONSERVATION OF HUMAN Occupational Heath	
	Tax Status	For Profit	
	Street Address	326 Washington Street	
5	Town	Norwich	
	State	Connecticut	
	Zip Code	06360 -	
	CEO Name CEO Title	David A. Whitehead President & Chief Executive Officer	
	CT Agent Name	Melinda A. Agsten, Esq	
	CT Agent Company	Wiggin & Dana	
	CT Agent Company Street Address	One Century Tower	
13	CT Agent Town	New Haven	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06510 -	
Н.	AFFILIATE NAME	HARTFORD HEALTH CARE CORPORATION	
п.	AFFILIATE NAME	ITAKTI OND HEALITI CAKE CONTONATION	
	Affiliate Description	PARENT CORPORATION	
	Affiliate type of service	Parent Corporation	
	Tax Status	Not for Profit	
	Street Address Town	One State Street, Suite 19 Hartford	
	State	Connecticut	
	Zip Code	06103 -	
	CEO Name	Elliot Joseph	
	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town CT Agent State	Hartford Connecticut	
	CT Agent State CT Agent Zip Code	06103 - 1919	
	CT Algorit Elip Codo		
I.	AFFILIATE NAME	HARTFORD HEALTHCARE AT HOME, INC.	
		DDOV/DE DLAN AND DEVELOD A CONTINUIUM OF LOME CARE AND COMMUNITY LEAST TO	
1	Affiliate Description	PROVIDE, PLAN AND DEVELOP A CONTINUUM OF HOME CARE AND COMMUNITY HEALTH SERVICES.	
	Affiliate type of service	Home Health/VNAs	
	Tax Status	Not for Profit	
4	Street Address	103 Woodland Street	
	Town	Hartford	
	State	Connecticut	
	Zip Code	06105 -	
	CEO Name	Michael Soccio CEO	
	CEO Title CT Agent Name	Winship Service Corporation	
	CT Agent Name CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	

REPORT 20 3 OF 31 7/7/2015,2:04 PM

ANNUAL REPORTING

FISCAL YEAR 2014

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

(1)	(1) (2) (3)		
LINE	DESCRIPTION	AFFILIATE INFORMATION	
J.	AFFILIATE NAME	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC	
-	,		
4	A (7)	DELIADUITATION OF DIVIORO	
	Affiliate Description Affiliate type of service	REHABILITATION SERVICES Rehabilitation Services	
	Tax Status	For Profit	
	Street Address	181 Patricia Genova Drive	
	Town	Newington	
	State	Connecticut	
	Zip Code	06111 -	
	CEO Name	Rita Parisi	
	CEO Title CT Agent Name	President & CEO	
	CT Agent Name CT Agent Company	Winship Service Corporation Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	
.,		HARTEORR HOORITAL	
K.	AFFILIATE NAME	HARTFORD HOSPITAL	
1	Affiliate Description	Hospital	
	Affiliate type of service	Hospital	
	Tax Status	Not for Profit	
	Street Address	80 Seymour Street	
	Town	Hartford Connecticut	
	State Zip Code	06103 -	
	CEO Name	Jeff Flaks	
	CEO Title	President & CEO	
10	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State CT Agent Zip Code	Connecticut 06103 -	
13	C1 Agent Zip Code	00103	
L.	AFFILIATE NAME	HHC PHYSICIANCARE INC	
1	Affiliate Description	Practice medicine and provide healthcare convises to the public as a medical foundation	
2	Affiliate Description Affiliate type of service	Practice medicine and provide healthcare services to the public as a medical foundation Foundation	
	Tax Status	Not for Profit	
4	Street Address	1290 Silas Deane Highway	
5	Town	Wethersfield	
6	State	Connecticut	
	Zip Code	06109 -	
	CEO Name	James Watkins Jr	
	CEO Title	President	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company CT Agent Company Street Address	Winship Service Corporation One Constitution Plaza	
	CT Agent Company Street Address CT Agent Town	Une Constitution Plaza Hartford	
	CT Agent Town CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	

REPORT 20 4 OF 31 7/7/2015,2:04 PM

ANNUAL REPORTING

FISCAL YEAR 2014

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

LINE DESCRIPTION	
M. AFFILIATE NAME INTEGRATED CARE PARTNERS, LLC 1 Affiliate Description Clinical integration entity for HHC facilities, employed physicians and community physician merity fax Status For Profit States International Methods States International Methods States Connecticut	
Affiliate type of service Managed Care Manag	
Affiliate type of service Managed Care Manag	
Affiliate type of service Managed Care Manag	
2 Affiliate type of service Managed Care 3 Tax Status For Profit 4 Street Address 1290 Silas Deane Highway, 2nd 5 Town Wethersfield 6 State Connecticut 7 Zip Code 06109 - 8 CEO Name James P. Cardon, MD 9 CEO Title 10 CT Agent Name Winship Service Corporation 11 CT Agent Company Street Address One Constitution Plaza 12 CT Agent Town Hartford 12 CT Agent Town Hartford 14 CT Agent Zip Code 06103 - 1919 N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency in which the Hospital has a 25% partnership 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Town Rocky Hill 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Company Street Address 326 Washington Street 11 CT Agent Company Street Address 326 Washington Street 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich Norwich 14 CT Agent State Connecticut 15 CT Agent Town Norwich 16 CT Agent Tiporn Street Address 326 Washington Street 17 CT Agent Town Norwich 18 CT Agent Tiporn Scote Onescieut 19 CT Agent Town Norwich 19 CT Agent Tiporn Scote Connecticut 10 CT Agent Town Norwich 11 CT Agent Town Norwich 12 CT Agent Town Norwich 13 CT Agent Town Norwich 14 CT Agent Town Norwich	
2 Affiliate type of service Managed Care 3 Tax Status For Profit 4 Street Address 1290 Silas Deane Highway, 2nd 5 Town Wethersfield 6 State Connecticut 7 Zip Code 06109 - 8 CEO Name James P. Cardon, MD 9 CEO Title 10 CT Agent Name Winship Service Corporation 11 CT Agent Company Street Address One Constitution Plaza 12 CT Agent Town Hartford 12 CT Agent Town Hartford 14 CT Agent Zip Code 06103 - 1919 N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency in which the Hospital has a 25% partnership 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Town Rocky Hill 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Company Street Address 326 Washington Street 11 CT Agent Company Street Address 326 Washington Street 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich Norwich 14 CT Agent State Connecticut 15 CT Agent Town Norwich 16 CT Agent Tiporn Street Address 326 Washington Street 17 CT Agent Town Norwich 18 CT Agent Tiporn Scote Onescieut 19 CT Agent Town Norwich 19 CT Agent Tiporn Scote Connecticut 10 CT Agent Town Norwich 11 CT Agent Town Norwich 12 CT Agent Town Norwich 13 CT Agent Town Norwich 14 CT Agent Town Norwich	
3 Tax Status	nbers.
4 Street Address 1290 Silas Deane Highway, 2nd	
6 State Connecticut 7 Zip Code 06109 - 8 CEO Name James P. Cardon, MD 9 CEO Title 10 CT Agent Name Winship Service Corporation 11 CT Agent Company Winship Service Corporation 12 CT Agent Company Street Address One Constitution Plaza 13 CT Agent Town Hartford 14 CT Agent Zip Code 06103 - 1919 N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency in which the Hospital has a 25% partnership 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Company WWB Corporation 11 CT Agent Company WWB Corporation 12 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent Town Norwich 15 CT Agent Town Norwich 16 CT Agent State Connecticut 17 CAgent State Connecticut 18 CT Agent Town Norwich 19 CT Agent Town Norwich 10 CT Agent State Connecticut 10 CT Agent State Connecticut 11 CT Agent Town Norwich 11 CT Agent Town Norwich 12 CT Agent State Connecticut 15 CT Agent State Connecticut 16 CT Agent State Connecticut 17 CT Agent State Connecticut 18 CT Agent Town Norwich 19 CT Agent Town Norwich 19 CT Agent State Connecticut 19 CT Agent State Connecticut 10 CT Agent State Connecticut 10 CT Agent State Connecticut 10 CT Agent State Connecticut 11 CT Agent State Connecticut 12 CT Agent State Connecticut 15 CT Agent State Connecticut 16 CT Agent State Connecticut 17 CT Agent State Connecticut 18 CT Agent State Connecticut 19 CT Agent State Connecticut 19 CT Agent State Connecticut 19 CT Agent State Connecticut	
7 Zip Code 06109 - 8 CEO Name James P. Cardon, MD 9 CEO Title 10 CT Agent Name Winship Service Corporation 11 CT Agent Company Winship Service Corporation 12 CT Agent Company Winship Service Corporation 13 CT Agent Town Hartford 14 CT Agent State Connecticut 15 CT Agent Zip Code 06103 - 1919 N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06667 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Company Street Address 326 Washington Street 15 CT Agent Zip Code 06360 -	
Second	
9 CEO Title Winship Service Corporation 11 CT Agent Company Winship Service Corporation 12 CT Agent Company Street Address One Constitution Plaza 13 CT Agent Town Hartford 14 CT Agent State Connecticut 15 CT Agent Zip Code 06103 - 1919 N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company Street Address 326 Washington Street 13 CT Agent Company Street Address 326 Washington Street 14 CT Agent Zip Code 06360 -	
10 CT Agent Name Winship Service Corporation 11 CT Agent Company Winship Service Corporation 12 CT Agent Company Street Address One Constitution Plaza 13 CT Agent Town Hartford 14 CT Agent State Connecticut 15 CT Agent Zip Code O6103 - 1919	
11 CT Agent Company Winship Service Corporation	
12 CT Agent Company Street Address	
13 CT Agent Town Hartford 14 CT Agent State Connecticut 15 CT Agent Zip Code 06103 - 1919 N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC	
N. AFFILIATE NAME MEDCONN COLLECTION AGENCY, LLC 1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 22049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
1 Affiliate Description Taxable Collection Agency in which the Hospital has a 25% partnership 2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	ļ
2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
2 Affiliate type of service Collection Agency 3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
3 Tax Status For Profit 4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
4 Street Address 2049 Silas Deane Highway, Ste 305 5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
5 Town Rocky Hill 6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
6 State Connecticut 7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
7 Zip Code 06067 - 8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
8 CEO Name Frank Souto 9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
9 CEO Title Executive Director 10 CT Agent Name Daniel E. Lohr, Managing member 11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
11 CT Agent Company WWB Corporation 12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
12 CT Agent Company Street Address 326 Washington Street 13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
13 CT Agent Town Norwich 14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
14 CT Agent State Connecticut 15 CT Agent Zip Code 06360 -	
15 CT Agent Zip Code 06360 -	
O. AFFILIATE NAME NATCHAUG HOSPITAL	
O. AFFILIATE NAME NATCHAUG HOSPITAL	
1 Affiliate Description MENTAL HEALTH FACILITY	ļ
2 Affiliate type of service Mental Health Facility	
3 Tax Status Not for Profit	
4 Street Address 189 Storrs Road	
5 Town Mansfield Center	
6 State Connecticut	
7 Zip Code 06250 -	
8 CEO Name Stephen Larcen, Ph.D.	
9 CEO Title President & CEO 10 CT Agent Name Wijschip Service Corporation	
10 CT Agent Name Winship Service Corporation 11 CT Agent Company Winship Service Corporation	
12 CT Agent Company Winship Service Corporation 12 CT Agent Company Street Address One Constitution Plaza	
13 CT Agent Town Hartford	
14 CT Agent State Connecticut	
15 CT Agent Zip Code 06103 - 1919	

REPORT 20 5 OF 31 7/7/2015,2:04 PM

ANNUAL REPORTING

FISCAL YEAR 2014

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(1)	(2)	(3)	
		AFFILIATE INFORMATION	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
		OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME	
P.	AFFILIATE NAME	HEALTH CARE	
1	Affiliate Description	OMNI Home Health Services of Eastern Connecticut, LLC d/b/a Backus Home Health Care providing home health care services in eastern CT.	
	Affiliate type of service	Home Health/VNAs	
	Tax Status	For Profit	
4	Street Address	12 Case Street	
5	Town	Norwich	
6 7	State Zip Code	Connecticut 06360 -	
8	CEO Name	David A. Whitehead	
9	CEO Title	President	
	CT Agent Name	David A. Whitehead	
	CT Agent Company	WWB	
	CT Agent Company Street Address	326 Washington Street	
13 14	CT Agent Town CT Agent State	Norwich Connecticut	
15	CT Agent State CT Agent Zip Code	06360 -	
	er rigen Eip code		
Q.	AFFILIATE NAME	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED	
1	Affiliate Description	Hospital	
2	Affiliate type of service	Hospital	
3	Tax Status	Not for Profit	
4	Street Address	112 Mansfield Avenue	
5 6	Town	Willimantic	
7	State Zip Code	Connecticut 06226 -	
8	CEO Name	David Whitehead	
9	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
13 14	CT Agent Town CT Agent State	Hartford Connecticut	
	CT Agent State CT Agent Zip Code	06103 - 1919	
	3,		
R.	AFFILIATE NAME	WWB CORPORATION	
		OTHER HEALTH CARE SERVICES - ITS PURPOSE IS TO RENDER HEALTH CARE RELATED SERVICES THAT WOULD OTHERWISE BE TAXABLE AS UNRELATED TRADE OR BUSINESS	
1	Affiliate Description	ACTIVITIES IF CONDUCTED BY THE HOSPITAL, OTHER AFFILIATES OR THE PARENT	
2	Affiliate type of service	Other HealthCare Svcs(Specify)	
3	Tax Status	For Profit	
4	Street Address	326 Washington Street	
5 6	Town State	Norwich Connecticut	
7	State Zip Code	Connecticut 06360 -	
8	CEO Name	Daniel E. Lohr	
9	CEO Title	President	
	CT Agent Name	Daniel E. Lohr	
11	CT Agent Company	Backus Hospital	
	CT Agent Company Street Address	326 Washington Street	
13 14	CT Agent Town CT Agent State	Norwich Connecticut	
15	CT Agent State CT Agent Zip Code	06360 -	
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REPORT 20 6 OF 31 7/7/2015,2:04 PM

ANNUAL REPORTING

FISCAL YEAR 2014

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

LINE DESCRIPTION AFFILIATE	INFORMATION

* P.O. BOX IS UNACCEPTABLE WITHOUT A

STREET ADDRESS FOR EACH AGENT COMPANY

REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2014
Α.	WILLIAM W. BACKUS HOSPITAL		
1	WILLIAM W. BACKUS HOSPITAL	Unrestricted	\$342,594,117
2		Temporarily Restricted by Donor	\$3,534,497
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$8,352,949
5		Intercompany Eliminations	\$0
		Total:	\$354,481,563
В.	BACKUS CORPORATION		
1	BACKUS CORFORATION	Unrestricted	\$25,446
2		Temporarily Restricted by Donor	\$25,446
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$15,845)
		Total:	\$9,601
C.	BACKUS HEALTH CARE, INC		(47.000)
1		Unrestricted	(\$7,209)
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0 \$0
		Total:	(\$7,209)
1 2 3 4 5	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC	Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0 \$0 \$0 \$0
		Total:	\$0
Ε.	BACKUS PHYSICIAN SERVICES, LLC		
1	BACKUS PHI SICIAN SERVICES, LLC	Unrestricted	\$244,199
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$244,199
_	OLINIOAL LABORATORY PARTNERS LLO		
F.	CLINICAL LABORATORY PARTNERS, LLC	Hanastriata d	(**)
1		Unrestricted Temporarily Restricted by Donor	\$0 \$0
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
		Permanently Restricted by Donor	\$0
4	1	- Carioraly recogniced by Donor	
<u>4</u> 5		Intercompany Eliminations	\$0
		Total:	\$0 \$0
5		' '	\$0
5 G .	COMMUNITY MEDICAL PARTNERS, INC	Total:	\$0 \$0
G .	COMMUNITY MEDICAL PARTNERS, INC	Total: Unrestricted	\$0 \$0
G . 1 2	COMMUNITY MEDICAL PARTNERS, INC	Unrestricted Temporarily Restricted by Donor	\$0 \$0 \$0 \$0 \$0
5 G . 1 2	COMMUNITY MEDICAL PARTNERS, INC	Unrestricted Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0 \$0 \$0 \$0 \$0 \$0
G . 1 2	COMMUNITY MEDICAL PARTNERS, INC	Unrestricted Temporarily Restricted by Donor	\$0 \$0 \$0 \$0 \$0
G . 1 2	COMMUNITY MEDICAL PARTNERS, INC	Unrestricted Temporarily Restricted by Donor	

REPORT 5 8 OF 31 7/7/2015, 2:04 PM

REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
(-/	(-)	FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2014
Н.	CONNCARE, INC		
1	CONTOANE, INC	Unrestricted	\$1,223,052
2		Temporarily Restricted by Donor	\$1,223,032
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$1,223,052
		Total:	Ψ1,220,002
Ι.	HARTFORD HEALTH CARE CORPORATION		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
Ť		Total:	\$0
		i otal.	\$ 0
J.	HARTFORD HEALTHCARE AT HOME, INC.		
	HANTI OND HEALTHGANE AT HOME, INC.	Unrestricted	60
1		Unrestricted Temporarily Postricted by Donor	\$0 \$0
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		' '	\$0
		Total:	\$ U
١.,			
Κ.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
L.	HARTFORD HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
Μ.	HHC PHYSICIANCARE INC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
N.	INTEGRATED CARE PARTNERS, LLC		
1	, -	Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
Ť		Total:	\$0
L		i Vial.	\$ 0

REPORT 5 9 OF 31 7/7/2015, 2:04 PM

REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2014
Ο.	MEDCONN COLLECTION AGENCY, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
П	NATCHAUG HOSPITAL		
	NATCHAUG HOSPITAL	I leve etviete d	CO
1		Unrestricted	\$0 \$0
2		Temporarily Restricted by Donor	\$0 \$0
3		Temporarily Restricted by Board	\$0 \$0
<u>4</u> 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0
3			\$0
		Total:	\$0
Q.	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE		
1		Unrestricted	\$96,743
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$96,743
R.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
-	WWB CORPORATION		
S.	WWWD CURPURATION	Harasteleta d	A755 -05
1		Unrestricted	\$755,765
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
<u>4</u> 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 (\$1,000)
3			(\$1,000)
		Total:	\$754,765
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$356,819,559
	Intercompany Eliminations	i una Dalance.	
	Total of all Affiliates	Fund Balanca	(\$16,845)
	Total of all Allillates	Fund Balance:	\$356,802,714

REPORT 5 10 OF 31 7/7/2015, 2:04 PM

REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Α.	BACKUS CORPORATION			
Α.	BACKUS CORPORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$8,982
1		Salary	09/30/2014	\$119,512
2		Accounts Payable	09/30/2014	\$5,881
3		Payments	09/30/2014	(\$38,069)
4		Equity transfer	09/30/2014	(\$96,322)
		Ending Unconsolidated Intercompany Balance:	9/30/2014	(\$16)
B.	BACKUS HEALTH CARE, INC			
		Designing Unconcelled to design and the second seco	0/20/2042	¢47.072
1		Beginning Unconsolidated Intercompany Balance: Accounts Payable	9/30/2013 09/30/2014	\$17,073 \$1,622
_ '		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$18,695
		Ending officonsolidated intercompany balance.	3/30/2014	\$10,093
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC			
<u> </u>	BACKUS MEDICAL CENTER CONDOMINION ASSOCIATION, INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Nothing to Report	0,00,2010	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
D.	BACKUS PHYSICIAN SERVICES, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	¢n
		Nothing to Report	9/30/2013	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
			5/55/2511	40
E.	CLINICAL LABORATORY PARTNERS, LLC			
	-, -			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
1		Accounts Payable	09/30/2014	\$20,190
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$20,190
F.	COMMUNITY MEDICAL PARTNERS, INC			
		Paginning Ungencelidated Intercompany Palance	0/20/2042	¢Ω
		Beginning Unconsolidated Intercompany Balance: Nothing to Report	9/30/2013	\$0 \$0
<u> </u>		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0 \$0
		Linding onconsolidated intercompany balance.	3/30/2014	\$0

REPORT 6 11 OF 31 7/7/2015, 2:04 PM

REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

Salary	(1)	(2)	(3)	(4)	(5)
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$4.1,562	LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	
Salary	G.	CONNCARE, INC			
Salary				0/00/00/0	***
Accounts Payable					
Payments					
Equity transfer 69/30/2014 \$1,207,679 Friding Unconsolidated Intercompany Balance: 9/30/2014 \$788,821					
H. HARTFORD HEALTH CARE CORPORATION Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$30					
H. HARTFORD HEALTH CARE CORPORATION Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$80	-				
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$3			Enamy onconsolitated intercompany balance.	3/30/2014	\$700,021
Salary	Н.	HARTFORD HEALTH CARE CORPORATION			
Salary					
Accounts Payable 09/30/2014 (\$4.218.736)					\$0
Payments 09/30/2014 \$8,777.247					
Ending Unconsolidated Intercompany Balance: 9/30/2014 (\$1,723,928) I. HARTFORD HEALTHCARE AT HOME, INC.					
HARTFORD HEALTHCARE AT HOME, INC. Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0	3				
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0			Ending Unconsolidated Intercompany Balance:	9/30/2014	(\$1,723,928)
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0	I.	HARTFORD HEALTHCARE AT HOME, INC.			
Nothing to Report \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$,			
Nothing to Report \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$			Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
Ending Unconsolidated Intercompany Balance: 9/30/2014 \$0					\$0
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0			Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0		HARTEON HEALTHCARE REHARM STATION NETWORK 11.0			
Salary	J.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC			
Salary			Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
Payments 9/30/2014 \$28,471	1				
K. HARTFORD HOSPITAL Beginning Unconsolidated Intercompany Balance: 9/30/2013	2				\$28,471
Beginning Unconsolidated Intercompany Balance: 9/30/2013			Ending Unconsolidated Intercompany Balance:	9/30/2014	(\$7,868)
Beginning Unconsolidated Intercompany Balance: 9/30/2013	- V	HARTFORD HOSPITAL			
1 Accounts Payable 09/30/2014 (\$619,345) 2 Payments 09/30/2014 \$23,173 Ending Unconsolidated Intercompany Balance: 9/30/2014 (\$596,172) L. HHC PHYSICIANCARE INC Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0	_ <u> </u>	HARTFORD HOSPITAL			
1 Accounts Payable 09/30/2014 (\$619,345) 2 Payments 09/30/2014 \$23,173 Ending Unconsolidated Intercompany Balance: 9/30/2014 (\$596,172) L. HHC PHYSICIANCARE INC Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0			Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
Payments 09/30/2014 \$23,173 Ending Unconsolidated Intercompany Balance: 9/30/2014 (\$596,172) L. HHC PHYSICIANCARE INC Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0	1			09/30/2014	
L. HHC PHYSICIANCARE INC Beginning Unconsolidated Intercompany Balance: 9/30/2014 (\$596,172) Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0				09/30/2014	\$23,173
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0			Ending Unconsolidated Intercompany Balance:		
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0		LUIO DUVOIGIANO ADE INO			
Beginning Unconsolidated Intercompany Balance: 9/30/2013 \$0	L.	INC PRISICIANCARE INC			
1 Salary 09/30/2014 \$23.213			Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
	1		Salary	09/30/2014	\$23,213

REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$23,213
М.	INTEGRATED CARE PARTNERS, LLC			
IVI.	INTEGRATED CARE PARTNERS, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
1		Salary & Benefits	09/30/2014	\$69,683
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$69,683
	MEDICONN COLLECTION ACENCY LLC			
N.	MEDCONN COLLECTION AGENCY, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Nothing to Report	0,00,00	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
0.	NATCHAUG HOSPITAL			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
1		Accounts Payable	09/30/2014	\$43,848
2		Payments	09/30/2014	(\$42,561)
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$1,287
P.	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	¢o
		Nothing to Report	9/30/2013	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
Q.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	¢n
1		Salary	09/30/2014	\$0 (\$5,029)
2		Accounts Payable	09/30/2014	\$10,493
3		Payments	09/30/2014	(\$602)
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$4,862
R.	WWB CORPORATION			
K.	WWWD CORFORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$117,079
1		Salary	09/30/2014	\$6,157,358
2		Accounts Payable	09/30/2014	\$3,215,937

REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
3		Payments	09/30/2014	(\$7,623,267)
4		Equity transfer	09/30/2014	
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$612,417
			Grand Total:	(\$788,816)

REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
		·		• •	• ,
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Beginning Unconsolidated		
			Intercompany Balance	10/01/2013	\$2,446,723
Α.	BACKUS CORPORATION				
			Nothing to Report	0/00/00/1	\$0
			Total:	9/30/2014	\$0
В.	BACKUS HEALTH CARE, INC				
<u>в.</u> 1	BACKUS HEALTH CARE, INC	BACKUS CORPORATION	Accounting Fees	09/30/2014	\$36,936
2		BACKUS CORPORATION	Payment for Accounting Fees	09/30/2014	(\$36,936)
		Ditence certil critiment	Total:	9/30/2014	\$0
				0,00,2011	Ţ
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC				
	·		Nothing to Report		\$0
			Total:	9/30/2014	\$0
D.	BACKUS PHYSICIAN SERVICES, LLC				
1		CONNCARE, INC	Accounts Payable	09/30/2014	(\$1,126)
		001110175 1110		00/00/00/4	0.400.000
2		CONNCARE, INC CONNCARE, INC	Payments for Accounts Payable	09/30/2014 09/30/2014	\$400,000
<u>3</u>		HHC PHYSICIANCARE INC	Equity transfer Salary	09/30/2014	(\$2,067,896) (\$24,176)
		THIS I THI GIOIANCARE ING	Total:	9/30/2014	(\$1,693,198)
			Total	3/30/2014	(ψ1,030,130)
E.	CLINICAL LABORATORY PARTNERS, LLC				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
					·
F.	COMMUNITY MEDICAL PARTNERS, INC				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
G.	CONNCARE, INC				****
1		BACKUS HEALTH CARE, INC	Accounting Fees	09/30/2014	\$36,936
2		BACKUS HEALTH CARE, INC	Payment for Accounting Fees Total:	09/30/2014 9/30/2014	(\$36,936) \$0
			i otal:	9/30/2014	\$0
Н.	HARTFORD HEALTH CARE CORPORATION				
— '''-	THAT OUR PEREIT OAKE OOK OKATION		Nothing to Report		\$0
			Total:	9/30/2014	\$0
					,
I.	HARTFORD HEALTHCARE AT HOME, INC.				
1		WWB CORPORATION	Accounts Payable	09/30/2014	\$250,000
		OMNI HOME HEALTH SERVICES OF EASTERN			
		CONNECTICUT, LLC, D/B/A BACKUS HOME			
2		HEALTH CARE	Accounting Fees	09/30/2014	(\$52,500)

REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
		OMNI HOME HEALTH SERVICES OF EASTERN			
		CONNECTICUT, LLC, D/B/A BACKUS HOME			
3		HEALTH CARE OMNI HOME HEALTH SERVICES OF EASTERN	Salary	09/30/2014	\$2,298,897
		CONNECTICUT, LLC, D/B/A BACKUS HOME			
4		HEALTH CARE	Payments for Payroll	09/30/2014	(\$770,465)
		TIE/LETTI G/IILE	Total:	9/30/2014	\$1,725,932
				0,00,2011	4. ,
J.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC				
	,		Nothing to Report		\$0
			Total:	9/30/2014	\$0
K.	HARTFORD HOSPITAL				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
	WAR DANGER AND THE				
L.	HHC PHYSICIANCARE INC		Nothing to Depart		
			Nothing to Report Total:	9/30/2014	\$0 \$0
			l otal:	9/30/2014	\$U
M.	INTEGRATED CARE PARTNERS, LLC				
171.	INTEGRATED CARE FARTNERS, LEC		Nothing to Report		\$0
			Total:	9/30/2014	\$0
				0,00,2011	**
N.	MEDCONN COLLECTION AGENCY, LLC				
	,		Nothing to Report		\$0
			Total:	9/30/2014	\$0
0.	NATCHAUG HOSPITAL				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
	OMNILLIOME LIEALTH CEDVICES OF FACTERY CONVECTIONS AS A SECOND				
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE				
1	DAONGO HOME HEALIH GANE	BACKUS CORPORATION	Payments for Payroll	09/30/2014	(\$5,115,097)
2		WWB CORPORATION	Salary	09/30/2014	\$6,046,899
3		WWB CORPORATION	Accounts Payable	09/30/2014	\$3,013,087
			,		
4		WWB CORPORATION	Payments for Accounts Payable	09/30/2014	(\$2,575,520)
5		WWB CORPORATION	Equity transfer	09/30/2014	(\$1,543,847)
			Total:	9/30/2014	(\$174,478)
	WINDLAND OOM WINDLY MENODIAL LICENTAL MICENSES ATTE				
Q.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		Nothing to Dozent		**
			Nothing to Report	0/20/004.4	\$0
			Total:	9/30/2014	\$0

REPORT 6A 16 OF 31 7/7/2015,2:04 PM

REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
R.	WWB CORPORATION				
1		BACKUS CORPORATION	Accounting Fees	09/30/2014	\$18,984
2		BACKUS CORPORATION	Payment for Accounting Fees	09/30/2014	(\$18,984)
			Total:	9/30/2014	\$0
			Ending Unconsolidated		
			Intercompany Balance	9/30/2014	\$2,304,979

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

(1)	(2)		(3)	(4)
IINF	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
LINE	DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
Α.	BACKUS CORPORATION			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
В.	DACKIIS HEALTH CADE INC			
0	BACKUS HEALTH CARE, INC Nothing to Report		\$0	
	3. 3. 4.	Total:	\$0	9/30/2014
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC		•	
0	Nothing to Report	Total:	\$0 \$0	9/30/2014
		Totali	ψ0	3/30/2014
D.	BACKUS PHYSICIAN SERVICES, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
E.	CLINICAL LABORATORY PARTNERS, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
F. 0	COMMUNITY MEDICAL PARTNERS, INC Nothing to Report		# 0	
	Nothing to Report	Total:	\$0 \$0	9/30/2014
			•	0/00/2011
G.	CONNCARE, INC			
0	Nothing to Report	-	\$0	
		Total:	\$0	9/30/2014
Н.	HARTFORD HEALTH CARE CORPORATION			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
	HARTEORD HEALTHCARE AT HOME INC			
1. 0	HARTFORD HEALTHCARE AT HOME, INC. Nothing to Report		\$0	
		Total:	\$ 0	9/30/2014
J.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		**	
0	Nothing to Report	Total:	\$0 \$0	9/30/2014
			\$	3/30/2014
K.	HARTFORD HOSPITAL			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
L.	HHC PHYSICIANCARE INC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
M.	INTEGRATED CARE PARTNERS, LLC Nothing to Report		Φ0	
0	Nothing to Report	Total:	\$0 \$0	9/30/2014
			Ψ0	3,33,2014
N.	MEDCONN COLLECTION AGENCY, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
0.	NATCHAUG HOSPITAL			
<u> </u>	INTOTAGO TIOUTTAL			

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

(1)	(2)	(3)	(4)
	AFFILIATE NAME &	V-7	,
LINE	DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2014
P.	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2014
Q.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2014
R.	WWB CORPORATION		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2014
	Grand Total:	\$0	9/30/2014

REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
A.	BACKUS CORPORATION Nothing to Report	\$0	0
- 0	Total:	\$ 0	9
	i Otai.	40	
B.	BACKUS HEALTH CARE, INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC	¢0	0
0	Nothing to Report Total:	\$0	Ü
	I OTAI:	\$0	
D.	BACKUS PHYSICIAN SERVICES, LLC		
0	Nothing to Report	\$0	0
	Total:	\$ 0	o de la companya de
	i our	4 5	
E.	CLINICAL LABORATORY PARTNERS, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
F.	COMMUNITY MEDICAL PARTNERS, INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
_			
G.	CONNCARE, INC Nothing to Report	\$0	0
0	Total:	\$0 \$0	0
	i Otai.	40	
Н.	HARTFORD HEALTH CARE CORPORATION		
0	Nothing to Report	\$0	0
	Total:	\$0	
I.	HARTFORD HEALTHCARE AT HOME, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
	HARTEON HEALTHOADE REHABILITATION NETWORK II O		
J .	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC Nothing to Report	\$0	0
	Nothing to Report Total:	\$0 \$0	0
	l Otal:	\$0	

REPORT 8 20 OF 31 7/7/2015,2:04 PM

REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
	AFFILIATE NAME &		
LINE	DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
K.	HARTFORD HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
L.	HHC PHYSICIANCARE INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
М.	INTEGRATED CARE PARTNERS, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
N.	MEDCONN COLLECTION AGENCY, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
0.	NATCHAUG HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH		
P.	CARE		
0	Nothing to Report	\$0	0
	Total:	\$0	
Q.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
0	Nothing to Report	\$0	0
	Total:	\$0	
R.	WWB CORPORATION		
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$0	
		· .	

REPORT 8 21 OF 31 7/7/2015,2:04 PM

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2014 REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR INDIGENT CARE AND FREE BEDS

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014		
LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
Α.	Indigent Care				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
В.	Free Beds				
	Beginning Balance	\$631,038.00	\$707,998.00	\$76,960.00	12%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$19,595.00	\$25,461.00	\$5,866.00	30%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$57,365.00	\$31,355.00		-45%
	Ending Balance	\$707,998.00	\$764,814.00	\$56,816.00	8%
5	Projected Interest Income	\$11,000.00	\$30,000.00	\$19,000.00	173%
С.	Other				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00		0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

REPORT 16 22 OF 31 7/7/2015, 2:04 PM

	WILLIAM W. BACKUS HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2014	ED DV THE HOODITAL
K	EPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTER	ED BY THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
<u>Patient</u>	Name of Hospital Bed Fund (FULL NAME)	Amount
 Number of Application 	ons for Hospital Bed Funds	0
	Grand Total	\$0.00

		WILLIAM W. BACKU			
		ANNUAL REPO			
		FISCAL YEAR			
	REPORT 17B - HOSPIT	AL BED FUNDS HELD (OR ADMINISTERED BY	THE HOSPITAL	
B. BE	ED FUND ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
(3)	Fair Market Value of the Principal of each	h individual Hospital Be	ed Fund, or the Principa	al attributable to ead	ch Hospital Bed
(4)	Total Actual Earnings for each Hospital	Bed Fund or the Farning	as attributable to each	Hospital Bed Fund	
(.,	rotal Actual Earlings for cach flospital	Dea I alia of the Latinii	go atti ibatabic to cacii	riospitai bea i aria.	
(5)					
(5)	Actual Dollar Amount of Earnings reinve				
	Actual Dollar Amount of Earnings reinve	ested as Principal, if any			
(5) (6)		ested as Principal, if any			
	Actual Dollar Amount of Earnings reinve	ested as Principal, if any		\$0.00	\$110,584.00
	Actual Dollar Amount of Earnings reinvo	ested as Principal, if any	у.	\$0.00 \$0.00	· · · · · · · · · · · · · · · · · · ·
	Actual Dollar Amount of Earnings reinvol Actual Dollar Amount of Earnings availa IRVING WOOD	ested as Principal, if any able for Patient Care. \$300,000.00	y. \$30,501.00	*	\$110,584.00 \$25,799.00 \$3,164.00
	Actual Dollar Amount of Earnings reinvolute Actual Dollar Amount of Earnings availa IRVING WOOD ANNIE ROGERS	able for Patient Care. \$300,000.00 \$66,833.00	\$30,501.00 \$5,338.00	\$0.00	\$25,799.00
	Actual Dollar Amount of Earnings reinventual Dollar Amount of Earnings available IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND	sted as Principal, if any able for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00	\$30,501.00 \$5,338.00 \$655.00	\$0.00 \$0.00	\$25,799.00 \$3,164.00 \$10,769.00
	Actual Dollar Amount of Earnings reinventual Dollar Amount of Earnings available IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND	\$300,000.00 \$66,833.00 \$7,500.00	\$30,501.00 \$5,338.00 \$655.00 \$2,228.00	\$0.00 \$0.00 \$0.00	\$25,799.00 \$3,164.00 \$10,769.00 \$10,445.00
	Actual Dollar Amount of Earnings reinvolved Actual Dollar Amount of Earnings available IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND G. SHEDD	\$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00	\$30,501.00 \$5,338.00 \$655.00 \$2,228.00 \$2,161.00	\$0.00 \$0.00 \$0.00 \$0.00	\$25,799.00 \$3,164.00
	Actual Dollar Amount of Earnings reinviolated Dollar Amount of Earnings availated IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND G. SHEDD HUNTINGTON MEMORIAL	\$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00 \$23,393.00	\$30,501.00 \$5,338.00 \$655.00 \$2,228.00 \$2,161.00 \$134.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$25,799.00 \$3,164.00 \$10,769.00 \$10,445.00 \$647.00
	Actual Dollar Amount of Earnings reinvolved Actual Dollar Amount of Earnings availated in the second	\$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00 \$23,393.00 \$15,000.00	\$30,501.00 \$5,338.00 \$655.00 \$2,228.00 \$2,161.00 \$134.00 \$8,423.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$25,799.00 \$3,164.00 \$10,769.00 \$10,445.00 \$647.00 \$40,707.00
	Actual Dollar Amount of Earnings reinvolved Actual Dollar Amount of Earnings availated in the second	\$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$23,393.00 \$15,000.00 \$10,000.00	\$30,501.00 \$5,338.00 \$655.00 \$2,228.00 \$2,161.00 \$134.00 \$8,423.00 \$2,476.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$25,799.00 \$3,164.00 \$10,769.00 \$10,445.00 \$647.00 \$40,707.00 \$11,964.00

REPORT 17B FUND ACTIVITY 24 OF 31 7/7/2015, 2:04 PM

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I.	GENERAL COLLECTION PROCESSES AND PROCEDURES	
Α.	Hospital's processes and policies for assigning a debt to a Collection Agent	Series of 4 statements and a final notice letter are sent to patients owing balances
		to the Hospital. After appropriate series of requests for paymentare made with no response, the account is considered for Bad Debt and sent to collection agency.
В.	Hospital's processes and policies for compensating a Collection Agent for services rendered	The Hospital pays the collection agency various fees calculated as a % of the amount collected. The percentages vary based on the type of account - self pay, workers compensation, or if the collection agency required legal assistance to generate the collection.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	30.90%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
Α	Collection Agent	
1	Collection Agent Name	MEDCONN COLLECTION AGENCY
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Series of 4 statements and a final notice letter are sent to patients owing balances to the Hospital. After appropriate series of requests for paymentare made with no response, the account is considered for Bad Debt and sent to collection agency.
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	The Hospital pays the collection agency various fees calculated as a % of the amount collected. The percentages vary based on the type of account - self pay, workers compensation, or if the collection agency required legal assistance to generate the collection.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	30.90%

REPORT 18 25 OF 31 7/7/2015,2:04 PM

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

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

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

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	Backus Physician Services, Physician	\$531,583	\$90,756	\$622,339
2.	Medical Director, Medical Care Administration	\$448,020	\$104,117	\$552,137
_	Liceniteliet Dhyginian	\$400.70¢	ФСС COO	¢490.274
3.	Hospitalist Physician	\$422,736	\$66,638	\$489,374
4.	E.R. Physician	\$352,550	\$71,653	\$424,203
L_	If D. Dhusisian	0044440	Φ74.400L	\$440.00 5
5.	E.R. Physician	\$344,143	\$74,122	\$418,265
6.	E.R. Physician	\$338,722	\$78,090	\$416,812
7.	Medical Affairs Regional VP	\$341,313	\$69,680	\$410,993
8.	E.R. Physician	\$337,105	\$72,150	\$409,255
9.	Rhuematology Physician	\$333,149	\$73,889	\$407,038
		· · · · · ·	· · · · · · · · · · · · · · · · · · ·	
10.	E.R. Physician	\$323,384	\$68,031	\$391,415
	Grand Total:	\$3,772,705	\$769,126	\$4,541,831

REPORT 19 27 OF 31 7/7/2015, 2:04 PM

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2014 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
		SALARIES	FRINGE	
		(Directly or	BENEFITS ^A (DirectI	
LINE	DESCRIPTION	Indirectly) ^C	y or Indirectly) ^C	TOTAL
		mun oony,	y or manestry)	
Α.	BACKUS CORPORATION			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$86,588	\$32,923	\$119,511
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
В.	BACKUS HEALTH CARE, INC	*:		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0 \$0	\$0	<u>\$0</u>
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
D.	BACKUS PHYSICIAN SERVICES, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$444,830	\$80,069	\$524,899
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
_	OLINIOAL LABORATORY PARTNERS 110			
Ε.	CLINICAL LABORATORY PARTNERS, LLC	фО	¢0	<u>Ф</u> О
1 2	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
	Faid by the Hospital to Employees of the Entity Listed Above	φυ	ΨΟ	ΨΟ
F.	COMMUNITY MEDICAL PARTNERS, INC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
G.	CONNCARE, INC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$5,790	\$1,042	\$6,832
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Н.	HARTFORD HEALTH CARE CORPORATION	1		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0 \$0
			T-	7.
Ι.	HARTFORD HEALTHCARE AT HOME, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
	HARTEORD HEALTHOARE BEHARM STATION METWORK 1: 0			
J .	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC	фО	ф <u>о</u>	<u>Ф</u> О
2	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
	and by the Hospital to Employees of the Entity Listed Above	ψυ	ΨΟ	ΨΟ
Κ.	HARTFORD HOSPITAL			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
L.	HHC PHYSICIANCARE INC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
N A	INTEGRATED CARE PARTNERS, LLC			
M .	Paid by the Entity Listed Above to Hospital Employees(B)	\$54,524	\$14,705	\$69,229
2	Paid by the Entity Listed Above to Hospital Employees(b) Paid by the Hospital to Employees of the Entity Listed Above	\$34,324 \$0	\$14,705	\$09,229 \$0
	I ala by the Hoopital to Employees of the Entity Listed Above	ΨΟ	ΨΟ	ΨΟ

REPORT 21 28 OF 31 7/7/2015,2:04 PM

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2014 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
		SALARIES	FRINGE BENEFITS ^A (DirectI	
		(Directly or		
LINE	DESCRIPTION	Indirectly) ^C	y or Indirectly) ^C	TOTAL
		1		
Ν.	MEDCONN COLLECTION AGENCY, LLC			.
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Ο.	NATCHAUG HOSPITAL			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT,			
Р.	LLC, D/B/A BACKUS HOME HEALTH CARE			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
			•	
Q.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
		T -	**	T -
R.	WWB CORPORATION			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
			· ·	

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

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

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

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

CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2014 REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
Α	Transfer of Assets or Operations	
	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of	
1.	Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

REPORT 22 30 OF 31 7/7/2015,2:04 PM

		ACKUS HOSPITAL	-		
		REPORTING			
		AL YEAR 2014	PROVIDED BY	THE HOSPITAL	
REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL					
(1)	(2)	(3)	(4)	(5)	(6)
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	<u>AMOUNT</u>	<u>AMOUNT</u>	DIFFERENCE	<u>DIFFERENCE</u>
	Hospital Charity Care (see Hospital Audited Financial S	Statement Notes			
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial S	statement Notes)			
1.	Number of Applicants	2,371	2,283	(88)	-4%
2.	Number of Approved Applicants	2,080	2,013	(67)	-3%
3.	Total Charges (A)	\$5,791,068	\$5,263,975	(\$527,093)	-9%
	Average Charges	\$2,784	\$2,615	(\$169)	-6%
4	Detic of Coat to Channe (DCC)	0.400040	0.200055	(0.040000)	4.00/
4.	Ratio of Cost to Charges (RCC) Total Cost	0.423948 \$2,455,112	0.380055 \$2,000,600	(0.043893) (\$454,512)	-10% -19%
	Average Cost	\$1,180	\$2,000,000	(\$187)	-16%
	Artifugo Coot	ψ1,100	Ψ00-1	(ψ101)	1070
5.	Charity Care - Inpatient Charges	\$1,160,267	\$1,092,936	(\$67,331)	-6%
	Charity Care - Outpatient Emergency Department	, , ,	· , , ,		
6.	Charges	1,957,278	1,729,890	(227,388)	-12%
	Charity Care - Outpatient Charges (Excludes ED				
7.	Charges)	2,673,523	2,441,149	(232,374)	-9%
	Total Charges (A)	\$5,791,068	\$5,263,975	(\$527,093)	-9%
8.	Charity Care - Number of Patient Days	1,883	1,610	(273)	-14%
9.	Charity Care - Number of Discharges	436	394	(42)	-14% -10%
10.	Charity Care - Number of Outpatient ED Visits	2,246	2,273	27	1%
10.	Charity Care - Number of Outpatient Visits (Excludes ED	2,240	2,210	21	170
11.	Visits)	5,168	5,797	629	12%
	,	,	•		
(A) The	e total amount must agree with the total amount listed in	the Hospital Auc	dited Financial S	Statement Notes.	
В.	Hospital Bed Funds (see Hospital Reporting System -	Papart 17)			
<u> </u>	nospital bed Fullus (see nospital Reporting System -	Report 17)			
1.	Number of Applicants	_	-	_	0%
2.	Number of Approved Applicants	-	-	-	0%
3.	Total Charges (B)	\$0	\$0	\$0	0%
	Average Charges	\$0	\$0	\$0	0%
				2 22222	•
4.	Ratio of Cost to Charges (RCC) Total Cost	0 \$0	<u>0</u> \$0	0.000000 \$0	0% 0%
	Average Cost	\$0 \$0	\$0 \$0	\$0	0%
	Average Cost	φ0	ΨΟ	φυ	0 /0
5.	Bed Funds - Inpatient Charges	\$0	\$0	\$0	0%
	and the same of th	Ψ.	***	40	370
6.	Bed Funds - Outpatient Emergency Department Charges	0	0	0	0%
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	0	0	0	0%
	Total Charges (B)	\$0	\$0	\$0	0%
	Ped Funds Number of Potient Days			2	001
8. 9.	Bed Funds - Number of Patient Days Bed Funds - Number of Discharges	0	0	0	0% 0%
10.	Bed Funds - Number of Outpatient ED Visits	0	0	0	0%
10.	Bed Funds - Number of Outpatient Eb Visits Bed Funds - Number of Outpatient Visits(Excludes ED		0		370
11.	Visits)	0	0	0	0%
(B) The	e total amount must agree with the total amount listed o	n Hospital Report	ting System - Re	eport 17.	