#### **ANNUAL REPORTING**

#### **FISCAL YEAR 2014**

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

(1)	(2)	(3)
	DECODIDEION	AFFILIATE INFORMATION
LINE	DESCRIPTION	AFFILIATE INFORMATION
A.	AFFILIATE NAME	SAINT MARY'S HEALTH SYSTEM, INC.
		PARENT CORPORATION TO ASSIST SMH & OTHER CATHOLIC ORG IN CARRYING OUT THEIR
1	Affiliate Description	WORK IN DELIVERY OF HEALTH CARE
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	56 FRANKLIN STREET
5	Town	Waterbury
6	State	Connecticut
7	Zip Code	06706 -
	CEO Name	Chad W. Wable, FACHE
	CEO Title	President and CEO
	CT Agent Company	Chad W. Wable, FACHE
	CT Agent Company CT Agent Company Street Address	Saint Mary's Hospital 56 FRANKLIN STREET
	CT Agent Company Street Address CT Agent Town	Waterbury
14	CT Agent Town CT Agent State	Connecticut
	CT Agent State CT Agent Zip Code	06706 -
10	or Agent Zip Gode	
В.	AFFILIATE NAME DIAGNOSTIC IMAGING OF SOUTHBURY, LLC	
	Affiliate Description	DIAGNOSTIC IMAGING SERVICES
2	Affiliate type of service	Imaging Services
3	Tax Status	For Profit
4	Street Address	385 Main Street, Union Sq Plaz Bldg #1
5	Town	Southbury
6	State	Connecticut 06488 -
7 8	Zip Code CEO Name	Robert Gumbardo, MD
	CEO Title	President
	CT Agent Name	JOSEPH A. MENGACCI, ESQ.
	CT Agent Name CT Agent Company	Joseph A. Mengacci Esq. (Self Employed)
	CT Agent Company Street Address	56 FRANKLIN STREET
	CT Agent Company Street Address  CT Agent Town	Waterbury
	CT Agent State	Connecticut
	CT Agent Zip Code	06706 -
C.	AFFILIATE NAME	FRANKLIN MEDICAL GROUP, PC.
1	Affiliate Description	MEDICAL PRACTICES
2	Affiliate type of service	Medical Practices  Medical Practices
3	Tax Status	For Profit
4	Street Address	133 SCOVILL STREET, WATERBURY, CT
5	Town	Waterbury
6	State	Connecticut
7	Zip Code	06706 -
8	CEO Name	Steven E. Schneider, M.D.
	CEO Title	PRESIDENT
	CT Agent Name	Robert J. Anthony, Esq.
	CT Agent Company	Brown & Rudnick
1	· · ·	·

#### **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	
	CT Agent Company Street Address	56 FRANKLIN STREET	
	CT Agent Town	Waterbury	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06706 -	
		HAROLD LEEVER REGIONAL CANCER CENTER, INC.	
D.	AFFILIATE NAME	HAROLD LEEVER REGIONAL CANCER CENTER, INC.	
1	Affiliate Description	A COMPREHENSIVE CANCER CENTER THAT PROVIDES A MULTI-DISCIPLINARY APPROACH TO CANCER TREATMENT IN A SINGLE LOCATION.	
2	Affiliate type of service	Other HealthCare Svcs(Specify)	
3	Tax Status	Not for Profit	
4	Street Address	1075 Chase Parkway	
5	Town	Waterbury	
6	State	Connecticut	
7	Zip Code	06708 -	
8	CEO Name	Kevin Knierny	
9	CEO Title	Executive Director	
	CT Agent Name	Bennett J. Bernblum	
	CT Agent Name	Wiggin & Dana	
	CT Agent Company Street Address	265 Church Street,	
	CT Agent Company Street Address  CT Agent Town	New Haven	
	CT Agent Town CT Agent State	Connecticut	
	CT Agent State CT Agent Zip Code	06510 -	
13	CT Agent Zip Code	00010	
lε.	AFFILIATE NAME	HEART CENTER OF GREATER WATERBURY, INC.	
E.	AFFILIATE NAME	HEART CENTER OF GREATER WATERBURY, INC.  CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S	
E.	AFFILIATE NAME	HEART CENTER OF GREATER WATERBURY, INC.  CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND	
<b>E.</b>	Affiliate Description	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S	
	Affiliate Description	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND	
1		CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING	
1 2	Affiliate Description Affiliate type of service	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)	
1 2 3	Affiliate Description Affiliate type of service Tax Status	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit	
1 2 3 4	Affiliate Description Affiliate type of service Tax Status Street Address	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET	
1 2 3 4 5	Affiliate Description Affiliate type of service Tax Status Street Address Town	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury	
1 2 3 4 5 6	Affiliate Description Affiliate type of service Tax Status Street Address Town State	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut	
1 2 3 4 5 6 7	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -	
1 2 3 4 5 6 7 8	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING  Other HealthCare Svcs(Specify) Not for Profit 81 WEST MAIN STREET Waterbury Connecticut 06702 - CHAD W. WABLE, FACHE & DARLENE STROMSTAD	
1 2 3 4 5 6 7 8 9	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING  Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS	
1 2 3 4 5 6 7 8 9	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick	
1 2 3 4 5 6 7 8 9 10 11	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony	
1 2 3 4 5 6 7 8 9 10 11 12	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent Town CT Agent Town CT Agent State	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street	
1 2 3 4 5 6 7 8 9 10 11 12	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent Town CT Agent Town CT Agent State	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut  06103 -	
1 2 3 4 5 6 7 8 9 10 11 12 13	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Town CT Agent Town CT Agent Town CT Agent State	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent State CT Agent Zip Code	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut  06103 -	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 <b>F.</b>	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code  AFFILIATE NAME	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut  06103 -  NAUGATUCK VALLEY MRI, LP	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code  AFFILIATE NAME  Affiliate Description	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut  06103 -  NAUGATUCK VALLEY MRI, LP	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 <b>F.</b>	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code  AFFILIATE NAME  Affiliate Description Affiliate type of service	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut 06702 - CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut 06103 -  NAUGATUCK VALLEY MRI, LP	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 <b>F.</b>	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code  AFFILIATE NAME  Affiliate Description Affiliate type of service Tax Status	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut  06103 -  NAUGATUCK VALLEY MRI, LP  OUTPATIENT MRI OUTPATIENT DIAG MRI SERVICES  Imaging Services  For Profit	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 <b>F.</b>	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code  AFFILIATE NAME  Affiliate Description Affiliate type of service Tax Status Street Address	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify) Not for Profit 81 WEST MAIN STREET Waterbury Connecticut 06702 - CHAD W. WABLE, FACHE & DARLENE STROMSTAD CO-PRESIDENTS Robert J. Anthony Brown & Rudnick CityPlace I, 185 Asylum Street Hartford Connecticut 06103 -  NAUGATUCK VALLEY MRI, LP  OUTPATIENT MRI OUTPATIENT DIAG MRI SERVICES Imaging Services For Profit 56 FRANKLIN STREET, WATERBURY, CT	
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 <b>F.</b>	Affiliate Description Affiliate type of service Tax Status Street Address Town State Zip Code CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent State CT Agent Zip Code  AFFILIATE NAME  Affiliate Description Affiliate type of service Tax Status	CORPORATION TO PROVIDE MANAGEMENT AND OVERSIGHT SERVICES OT ST. MARY'S HOSPITAL CORPORATION AND THE WATERBURY HOSPITAL FOR DEVELOPMENT AND OPERATOIN OF A JOINT ANGIOPLASTY AND CARDIAC SURGERY PROGRAM, INCLUDING Other HealthCare Svcs(Specify)  Not for Profit  81 WEST MAIN STREET  Waterbury  Connecticut  06702 -  CHAD W. WABLE, FACHE & DARLENE STROMSTAD  CO-PRESIDENTS  Robert J. Anthony  Brown & Rudnick  CityPlace I, 185 Asylum Street  Hartford  Connecticut  06103 -  NAUGATUCK VALLEY MRI, LP  OUTPATIENT MRI OUTPATIENT DIAG MRI SERVICES  Imaging Services  For Profit	

#### **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
	Zip Code	06706 -
	CEO Name	Robert GUmbardo, MD
_	CEO Title	President
	CT Agent Name	NAUGATUCK VALLEY RADIOLOGICAL ASSOCIATES
	CT Agent Name CT Agent Company	Naugatuck Valley Radiological Associates
	CT Agent Company CT Agent Company Street Address	133 Scovill St
	CT Agent Company Street Address CT Agent Town	Waterbury
		Connecticut
	CT Agent State	06706 -
15	CT Agent Zip Code	00706 -
G.	AFFILIATE NAME	SAINT MARY'S INDEMNITY COMPANY, LLC
		A VOLUNTARY UNINCORPORATED RECIPROCAL INSURER ORGANIZED & EXISTING UNDER THE
	Affiliate Described	LAWS OF THE STATE OF VERMONT FOR THE PURPOSE OF THE RECIPROCAL EXCHANGE OF
	Affiliate Description	PRIVATE CONTRACTS OF INSURANCE, REINSURANCE & INDEMNITY AMONG SUBSCRIBERS
	Affiliate type of service	Insurance For Profit
	Tax Status	
	Street Address	126 College Street
5	Town	Burlington
6	State	Vermont
	Zip Code	05401 -
	CEO Name	Joseph Carlson
	CEO Title	President
	CT Agent Name	Strategic Risk Solutions
	CT Agent Company	Patricia Henderson
	CT Agent Company Street Address	126 College Street
	CT Agent Town	Burlington
	CT Agent State	Vermont
15	CT Agent Zip Code	05401 -
н.	AFFILIATE NAME	SAINT MARY'S PHYSICIAN PARTNERS, LLC
	ATTICIATE NAME	CAINT MAKE OF THOO JAKE AKTIVENO, EEG
1	Affiliate Description	Accountable Care Organization
2	Affiliate type of service	Accountable Care Organization
3	Tax Status	Not for Profit
4	Street Address	56 Franklin Street
	Town	Waterbury
6	State	Connecticut
7	Zip Code	06706 - 0000
8	CEO Name	Steven Schneider
9	CEO Title	President
10	CT Agent Name	Brown and Rudnick
	CT Agent Company	Robert J. Anthony
	CT Agent Company Street Address	City Place 185 Asylum St
13	CT Agent Town	Hartford
	CT Agent State	Connecticut
	CT Agent Zip Code	06103 - 0000
I.	AFFILIATE NAME	SAINT MARY'S HOSPITAL FOUNDATION, INC.
		<u> </u>
1	Affiliate Description	FOUNDATION FUNDRAISING SERVICES FOR HOSPITAL PRIMARILY FOR SPECIAL PROJ OR EQUIP

#### **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	
2	Affiliate type of service	Foundation	
3	Tax Status	Not for Profit	
4	Street Address	56 FRANKLIN STREET	
5	Town	Waterbury	
6	State	Connecticut	
7	Zip Code	06706 -	
8	CEO Name	Margaret Lawlor	
9	CEO Title	PRESIDENT	
10	CT Agent Name	Chad W. Wable, FACHE	
11	CT Agent Company	Saint Mary's Hospital	
12	CT Agent Company Street Address	56 FRANKLIN STREET, WTBY, CT ,	
13	CT Agent Town	Waterbury	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06706 -	

<sup>\*</sup> 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)
		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2014
Α.	SAINT MARY`S HOSPITAL		
1	DAINT MART O HOOF TIAL	Unrestricted	\$27,668,000
2		Temporarily Restricted by Donor	\$2,415,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$16,681,000
5		Intercompany Eliminations	(\$13,699,000)
		Total:	\$33,065,000
B. 1	SAINT MARY`S HEALTH SYSTEM, INC.	Unrestricted	\$1,730,000
2		Temporarily Restricted by Donor	\$1,730,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$5,182,000)
		Total:	(\$3,452,000)
C.	DIAGNOSTIC IMAGING OF SOUTHBURY, LLC	I loro atriata d	M004.000
1		Unrestricted	\$924,000
3		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$924,000
			752.,555
D.	FRANKLIN MEDICAL GROUP, PC.		
1		Unrestricted	\$3,127,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0 \$0
5		Intercompany Eliminations	· ·
		Total:	\$3,127,000
Ε.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0 \$0
5		Intercompany Eliminations	\$0
		Total:	\$0
F.	HEART CENTER OF GREATER WATERBURY, INC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0 \$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
G.	NAUGATUCK VALLEY MRI, LP		
1	NAUGATUCK VALLET WIKI, LF	Unrestricted	¢Λ
2		Temporarily Restricted by Donor	\$0 \$0
3		Temporarily Restricted by Board	\$0

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### 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
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
Н.	SAINT MARY'S INDEMNITY COMPANY, 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
Ι.	SAINT MARY'S PHYSICIAN PARTNERS, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
J.	SAINT MARY`S HOSPITAL FOUNDATION, INC.		
1		Unrestricted	\$1,923,000
2		Temporarily Restricted by Donor	\$2,291,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$968,000
5		Intercompany Eliminations	\$0
		Total:	\$5,182,000
	Total of all Affiliates (before Intercompany Eliminations)	Front Delegacy	AF7 707 000
	Intercompany Eliminations	Fund Balance:	\$57,727,000
	Total of all Affiliates		(\$18,881,000)
	Total of all Affiliates	Fund Balance:	\$38,846,000

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

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DESCRIPTION OF TRANSFER DATE	
Α.	SAINT MARY'S HEALTH SYSTEM, INC.			
	OART MART OTELETIOTOTEM, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	(\$485,468)
1		Purchase of Goods & services	09/30/2014	(\$33,922)
		Ending Unconsolidated Intercompany Balance:	9/30/2014	(\$519,390)
В.	DIAGNOSTIC IMAGING OF SOUTHBURY, LLC			
<u>Б.</u>	DIAGNOSTIC IMAGING OF SOUTHBORT, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
C.	FRANKLIN MEDICAL GROUP, PC.			
<u> </u>	FRANKLIN WEDICAL GROOF, FC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Nothing to Report	0,00,2010	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
D.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.			
	TARGED ELEVER REGIONAL GARGER GERVER, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	(\$10,377)
1		Purchase of Goods & services	09/30/2014	\$30,402
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$20,025
E.	HEART CENTER OF GREATER WATERBURY, INC.			
	THEATT GENTER OF GREATER WATERBORT, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$4,333
1		Purchase of Goods & services	09/30/2014	\$867
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$5,200
F.	NAUGATUCK VALLEY MRI, LP			
г.	NAUGATUCK VALLET MIKI, LP			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0
G.	SAINT MARY'S INDEMNITY COMPANY, LLC			
<u> </u>	orari marci di ademari i domi pari, elo			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	(\$5,141,324)

#### 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
1		Purchase of Goods & services	09/30/2014	(\$374,182)
		Ending Unconsolidated Intercompany Balance:	9/30/2014	(\$5,515,506)
Н.	SAINT MARY'S PHYSICIAN PARTNERS, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$0
		Nothing to Report  Ending Unconsolidated Intercompany Balance:	9/30/2014	\$0 <b>\$0</b>
I.	SAINT MARY'S HOSPITAL FOUNDATION, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2013	\$21,996
1		Purchase of Goods & services	09/30/2014	\$22,438
		Ending Unconsolidated Intercompany Balance:	9/30/2014	\$44,434
			Grand Total:	(\$5,965,237)

#### 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		
•	CAINT MADYCO HEALTH OVOTEM INO		Intercompany Balance	10/01/2013	\$16,352
Α.	SAINT MARY'S HEALTH SYSTEM, INC.		Nothing to Donort		<b></b>
-			Nothing to Report  Total:	9/30/2014	\$0 <b>\$0</b>
			Total.	3/30/2014	Ψ0
В.	DIAGNOSTIC IMAGING OF SOUTHBURY, LLC				
	, ,		Nothing to Report		\$0
			Total:	9/30/2014	\$0
C.	FRANKLIN MEDICAL GROUP, PC.				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
D.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.				
D.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.		Nothing to Report		\$0
-			Total:	9/30/2014	\$0 \$0
			Total	3/00/2014	Ψ
E.	HEART CENTER OF GREATER WATERBURY, INC.				
1	·	SAINT MARY`S HEALTH SYSTEM, INC.	Purchase of Goods & services	09/30/2014	\$4,263
			Total:	9/30/2014	\$4,263
F.	NAUGATUCK VALLEY MRI, LP				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
G.	SAINT MARY'S INDEMNITY COMPANY, LLC				
<u> </u>	SAINT MART S INDEMINITE COMPANT, LLC		Nothing to Report		\$0
<b>-</b>			Total:	9/30/2014	\$0
			. otali	2.23,20.1	70
H.	SAINT MARY'S PHYSICIAN PARTNERS, LLC				
			Nothing to Report		\$0
			Total:	9/30/2014	\$0
l.	SAINT MARY'S HOSPITAL FOUNDATION, INC.		Nothing 1 D		<b>*</b> -
			Nothing to Report  Total:	0/20/204.4	\$0 <b>\$0</b>
			I otal:	9/30/2014	\$0
			Ending Unconsolidated		
			Intercompany Balance	9/30/2014	\$20,615
			Suidiloo	3/33/2014	<del>\$20,010</del>

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

(1)	(2)		(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
LINE	DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
Α.	SAINT MARY'S HEALTH SYSTEM, INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
В.	DIAGNOSTIC IMAGING OF SOUTHBURY, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
<b>C</b> .	FRANKLIN MEDICAL GROUP, PC.  Nothing to Report		Φ0	
- 0	Nothing to Report	Total:	\$0 <b>\$0</b>	9/30/2014
		Total.	40	3/30/2014
D.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.			
1	GRANT		\$1,000,000	09/30/2014
		Total:	\$1,000,000	9/30/2014
E.	HEART CENTER OF GREATER WATERBURY, INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
F.	NAUGATUCK VALLEY MRI, LP			
0	Nothing to Report	Total:	\$0	0/00/0044
		i otai:	\$0	9/30/2014
G.	SAINT MARY'S INDEMNITY COMPANY, LLC			
0.	Nothing to Report		\$0	
_	Trouming to Report	Total:	\$0 <b>.</b>	9/30/2014
			***	3,60,=01.
Н.	SAINT MARY'S PHYSICIAN PARTNERS, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
I.	SAINT MARY'S HOSPITAL FOUNDATION, INC.			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2014
		Grand Total:	\$1,000,000	0/20/204.4
		Grand Total:	\$1,000,000	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
_			
<b>A</b> .	SAINT MARY'S HEALTH SYSTEM, INC.	<b>₽</b> O	0
0	Nothing to Report	\$0	0
	Total:	\$0	
B.	DIAGNOSTIC IMAGING OF SOUTHBURY, LLC	40	
0	Nothing to Report	\$0	0
	Total:	\$0	
C.	FRANKLIN MEDICAL GROUP, PC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
D.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
E.	HEART CENTER OF GREATER WATERBURY, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
F.	NAUGATUCK VALLEY MRI, LP		
0	Nothing to Report	\$0	0
	Total:	\$0	
G.	SAINT MARY'S INDEMNITY COMPANY, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
		<del></del>	
Н.	SAINT MARY'S PHYSICIAN PARTNERS, LLC		
0	Nothing to Report	\$0	0
Ě	Total:	\$ <b>0</b>	
	Totali	<del>+</del> 0	
	SAINT MARY'S HOSPITAL FOUNDATION, INC.		
<b>I.</b>	Nothing to Report	<u> </u>	0
-	Total:	\$ <b>0</b>	0
	Total.	Ψ0	
	Grand Total:	¢Λ	
	Grand Total:	\$0	

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# SAINT MARY`S HOSPITAL ANNUAL REPORTING FISCAL YEAR 2014 REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR

# REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR INDIGENT CARE AND FREE BEDS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
Α.	Indigent Care				
	Beginning Balance	\$0.00	\$0.00		0%
1	Donations	\$0.00	\$0.00		0%
2	Income	\$0.00	\$0.00		0%
3	Expenditures	\$0.00	\$0.00		0%
4	Unrealized Gains and Losses	\$0.00	\$0.00		0%
	Ending Balance	\$0.00	\$0.00		0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
В.	Free Beds				
	Beginning Balance	\$0.00	\$0.00		0%
1	Donations	\$0.00	\$0.00	-	0%
2	Income	\$0.00	\$0.00	-	0%
	Expenditures	\$0.00	\$0.00		0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	-	0%
	Ending Balance	\$0.00	\$0.00		0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
С.	Other				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00		0%
4	Unrealized Gains and Losses	\$0.00	\$0.00		0%
	Ending Balance	\$0.00	\$0.00	-	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

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	SAINT MARY'S HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2014	
REF	PORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED	D BY THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
<u>Patient</u>	Name of Hospital Bed Fund (FULL NAME)	Amount
<ol> <li>Number of Application</li> </ol>	s for Hospital Bed Funds	0
	Grand Total	\$0.00

		SAINT MARY`S H					
		ANNUAL REPO					
		FISCAL YEAR	R 2014				
	REPORT 17B - HOSPITA	L BED FUNDS HELD (	OR ADMINISTERED B	Y THE HOSPITAL			
B. BE	D FUND ACTIVITY						
(1)	(2)	(3)	(4)	(5)	(6)		
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested			
LIIIE	Hame of Hoopital Boa'l and						
(3)	(3) Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each Hospital Bed						
(4)	(4) Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund.						
		·		•			
(5)	Actual Dollar Amount of Earnings reinves	ted as Princinal if any	,				
(0)	Actual Bollar Amount of Larmings femilies	ted as i illicipal, il ally	•				
(0)	I						
(6)	Actual Dollar Amount of Earnings availab	le for Patient Care.					
	Total Bed Funds : \$0.00 \$0.00 \$0.00 \$0.						

#### 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	Accounts with self-pay balance due AFTER an Insurance pmt has been received MUST have received a minimum of four (4) patient statements over a period of greater than 120 days, and have NOT had a payment posted to the account within the last 120 days before it can be transferred to bad debt.
В.	Hospital's processes and policies for compensating a Collection Agent for services rendered	Century Financial – Direct collections 23%, Legal collections 28%; The Outsource Group – Direct collections 20%-15% (rate change mid-year), Legal collections 25%-20% (rate change mid-year); PMS 18%.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	8.00%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
A	Collection Agent	
1	Collection Agent Name	Century Finanial
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Same as General Processes and Policies
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.	Same as General Processes and Policies
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	7.70%
В	Collection Agent	
1	Collection Agent Name	The Outsource Group

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#### REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
2	Collection Agent Type	Collection Agency
	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described	
	in Section I, for assigning debt with this Collection Agent?	
	indicate "Same as General Processes and Policies" Otherwise	
	Provide Details.	
		Same as General Processes and Policies
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.	
		Same as General Processes and Policies
6	Recovery Rate on Accounts Assigned (excluding Medicare	
	accounts) to Collection Agent.	10.23%

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

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO	\$711,903	\$201,106	\$913,009
2.	Vice President & Chief Medical Officer	\$372,483	\$62,815	\$435,298
3.	Vice President Surgical Services former	\$335,433	\$36,694	\$372,127
	<u> </u>		-	
4.	Vice Pres. Operations & Chief Information Officer	\$303,442	\$45,712	\$349,154
	Vice Breeident and Objet Financial Office	#000 040	044.000	<b>*204.047</b>
5.	Vice President and Chief Financial Officer	\$292,248	\$41,999	\$334,247
6.	Chief Operating Officer	\$278,711	\$29,045	\$307,756
7.	Vice President Human Resources	\$260,612	\$42,734	\$303,346
8.	Chief Marketing Officer	\$217,778	\$39,900	\$257,678
<u> </u>		<b>42</b> · · · , · · · · ·	400,000	<del></del>
9.	Vice President and Chief Nursing Officer	\$221,238	\$34,926	\$256,164
10.	Executive Director Revenue Cycle	\$183,655	\$35,631	\$219,286
	Grand Total:	\$3,177,503	\$570,562	\$3,748,065

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# SAINT MARY'S 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 <sup>A</sup> (DirectI	
LINE	DESCRIPTION	Indirectly) <sup>C</sup>	y or Indirectly) <sup>C</sup>	TOTAL
		,	, ,	_
Α.	SAINT MARY'S HEALTH SYSTEM, 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
		<u></u>		
В.	DIAGNOSTIC IMAGING OF SOUTHBURY, 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
C.	FRANKLIN MEDICAL GROUP, PC.			
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.	HAROLD LEEVER REGIONAL CANCER CENTER, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
_				
Ε.	HEART CENTER OF GREATER WATERBURY, 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
	NAME AT LOCK VALLEY MELLE			
F.	NAUGATUCK VALLEY MRI, LP	Ф0		<u> </u>
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
	SAINT MARY'S INDEMNITY COMPANY, LLC			
G.	Paid by the Entity Listed Above to Hospital Employees(B)	¢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
	r aid by the Hospital to Employees of the Entity Listed Above			φυ
Н.	SAINT MARY'S PHYSICIAN PARTNERS, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0	\$0 \$0
	That by the Hospital to Employees of the Entity Listed Above			ΨΟ
Ι.	SAINT MARY'S HOSPITAL FOUNDATION, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0 \$0
	and by the Heapital to Employees of the Entity Eleted 75040		ΨΟ Ι	ΨΟ

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.

# REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 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

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	ANNUAL F	S HOSPITAL REPORTING			
	FISCA REPORT 23 - CHARITY CARE AND REDUCED	AL YEAR 2014 COST SERVICES	PROVIDED BY	THE HOSPITAL	
(1)	(2)	(3) FY 2013	(4) FY 2014	(5) AMOUNT	(6) %
LINE	<u>DESCRIPTION</u>	AMOUNT	<u>AMOUNT</u>	DIFFERENCE	DIFFERENCE
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial S	tatement Notes)			
1. 2.	Number of Applicants Number of Approved Applicants	69 62	267 264	198 202	287% <b>326</b> %
۷.	Trainiber of Approved Applicants	02	204	202	3207
3.	Total Charges (A)	\$248,631	\$894,442	\$645,811	260%
	Average Charges	\$4,010	\$3,388	(\$622)	-16%
4.	Ratio of Cost to Charges (RCC)	0.377052	0.367096	(0.009956)	-3%
••	Total Cost	\$93,747	\$328,346	\$234,599	250%
	Average Cost	\$1,512	\$1,244	(\$268)	-18%
F	Charity Care Innations Charges	<b>040 575</b>	#200 000	<b>#045.007</b>	0000
5.	Charity Care - Inpatient Charges Charity Care - Outpatient Emergency Department	\$13,575	\$328,802	\$315,227	2322%
6.	Charges	66,488	294,437	227,949	343%
	Charity Care - Outpatient Charges (Excludes ED	,	,	,	
7.	Charges)	168,568	271,203	102,635	61%
	Total Charges (A)	\$248,631	\$894,442	\$645,811	260%
8.	Charity Care - Number of Patient Days	7	57	50	714%
9.	Charity Care - Number of Discharges	3	14	11	367%
10.	Charity Care - Number of Outpatient ED Visits	46	134	88	191%
	Charity Care - Number of Outpatient Visits (Excludes ED				
11.	Visits)	12	116	104	867%
(A) The	e total amount must agree with the total amount listed in	the Hospital Aud	lited Financial S	tatement Notes.	
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - R	eport 17)			
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%
4.	Ratio of Cost to Charges (RCC)	0.377052	0.367096	(0.009956)	-3%
•	Total Cost	\$0	\$0	\$ <b>0</b>	0%
	Average Cost	\$0	\$0	\$0	0%
	Ded Eurode Jamestiant Channel	<b>C</b> O	Φ0	ФО.	004
5.	Bed Funds - Inpatient Charges	\$0	\$0	\$0	0%
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	<u> </u>	\$0	0%
8.	Bed Funds - Number of Patient Days	0	0	0	0%
9.	Bed Funds - Number of Discharges	0	0	0	0%
10.	Bed Funds - Number of Outpatient ED Visits Bed Funds - Number of Outpatient Visits(Excludes ED	0	0	0	0%
11.	Visits)	0	0	0	0%
	1000	0	<u> </u>	0	370
(B) The	e total amount must agree with the total amount listed or	n Hospital Report	ing System - Re	port 17.	

	SAINT MARY`S HOSPITAL						
	ANNUAL REPORTING						
	FISCAL YEAR 2014						
	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	AMOUNT	<u>AMOUNT</u>	DIFFERENCE	<b>DIFFERENCE</b>		