

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$28,527,000	\$25,968,000	(\$2,559,000)	-9%
2	Short Term Investments	\$37,860,000	\$61,779,000	\$23,919,000	63%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$49,732,000	\$54,662,000	\$4,930,000	10%
4	Current Assets Whose Use is Limited for Current Liabilities	\$247,000	\$679,000	\$432,000	175%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$4,338,000	\$4,349,000	\$11,000	0%
8	Prepaid Expenses	\$8,608,000	\$8,021,000	(\$587,000)	-7%
9	Other Current Assets	\$17,489,000	\$13,630,000	(\$3,859,000)	-22%
	<b>Total Current Assets</b>	<b>\$146,801,000</b>	<b>\$169,088,000</b>	<b>\$22,287,000</b>	<b>15%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$3,856,000	\$0	(\$3,856,000)	-100%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$3,856,000</b>	<b>\$0</b>	<b>(\$3,856,000)</b>	<b>-100%</b>
5	Interest in Net Assets of Foundation	\$65,812,000	\$69,267,000	\$3,455,000	5%
6	Long Term Investments	\$25,131,000	\$22,585,000	(\$2,546,000)	-10%
7	Other Noncurrent Assets	\$65,835,000	\$60,406,000	(\$5,429,000)	-8%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$431,816,000	\$430,427,000	(\$1,389,000)	0%
2	Less: Accumulated Depreciation	\$303,677,000	\$289,391,000	(\$14,286,000)	-5%
	<b>Property, Plant and Equipment, Net</b>	<b>\$128,139,000</b>	<b>\$141,036,000</b>	<b>\$12,897,000</b>	<b>10%</b>
3	Construction in Progress	\$37,001,000	\$69,785,000	\$32,784,000	89%
	<b>Total Net Fixed Assets</b>	<b>\$165,140,000</b>	<b>\$210,821,000</b>	<b>\$45,681,000</b>	<b>28%</b>
	<b>Total Assets</b>	<b>\$472,575,000</b>	<b>\$532,167,000</b>	<b>\$59,592,000</b>	<b>13%</b>

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LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II.	<b>LIABILITIES AND NET ASSETS</b>				
A.	<b>Current Liabilities:</b>				
1	Accounts Payable and Accrued Expenses	\$53,516,000	\$50,085,000	(\$3,431,000)	-6%
2	Salaries, Wages and Payroll Taxes	\$15,356,000	\$18,777,000	\$3,421,000	22%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$17,535,000	\$12,179,000	(\$5,356,000)	-31%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$4,590,000	\$15,856,000	\$11,266,000	245%
	<b>Total Current Liabilities</b>	<b>\$90,997,000</b>	<b>\$96,897,000</b>	<b>\$5,900,000</b>	<b>6%</b>
B.	<b>Long Term Debt:</b>				
1	Bonds Payable (Net of Current Portion)	\$79,882,000	\$73,372,000	(\$6,510,000)	-8%
2	Notes Payable (Net of Current Portion)	\$20,160,000	\$60,309,000	\$40,149,000	199%
	<b>Total Long Term Debt</b>	<b>\$100,042,000</b>	<b>\$133,681,000</b>	<b>\$33,639,000</b>	<b>34%</b>
3	Accrued Pension Liability	\$58,281,000	\$68,304,000	\$10,023,000	17%
4	Other Long Term Liabilities	\$67,422,000	\$64,721,000	(\$2,701,000)	-4%
	<b>Total Long Term Liabilities</b>	<b>\$225,745,000</b>	<b>\$266,706,000</b>	<b>\$40,961,000</b>	<b>18%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	<b>Net Assets:</b>				
1	Unrestricted Net Assets or Equity	\$100,811,000	\$110,843,000	\$10,032,000	10%
2	Temporarily Restricted Net Assets	\$33,279,000	\$34,845,000	\$1,566,000	5%
3	Permanently Restricted Net Assets	\$21,743,000	\$22,876,000	\$1,133,000	5%
	<b>Total Net Assets</b>	<b>\$155,833,000</b>	<b>\$168,564,000</b>	<b>\$12,731,000</b>	<b>8%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$472,575,000</b>	<b>\$532,167,000</b>	<b>\$59,592,000</b>	<b>13%</b>

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$1,693,080,000	\$1,759,987,000	\$66,907,000	4%
2	Less: Allowances	\$1,163,019,000	\$1,221,261,000	\$58,242,000	5%
3	Less: Charity Care	\$49,238,000	\$35,462,000	(\$13,776,000)	-28%
4	Less: Other Deductions	\$21,143,000	\$21,773,000	\$630,000	3%
	<b>Total Net Patient Revenue</b>	<b>\$459,680,000</b>	<b>\$481,491,000</b>	<b>\$21,811,000</b>	<b>5%</b>
5	Provision for Bad Debts	\$20,305,000	\$15,417,000	(\$4,888,000)	-24%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$439,375,000</b>	<b>\$466,074,000</b>	<b>\$26,699,000</b>	<b>6%</b>
6	Other Operating Revenue	\$20,346,000	\$31,305,000	\$10,959,000	54%
7	Net Assets Released from Restrictions	\$3,819,000	\$750,000	(\$3,069,000)	-80%
	<b>Total Operating Revenue</b>	<b>\$463,540,000</b>	<b>\$498,129,000</b>	<b>\$34,589,000</b>	<b>7%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$153,451,000	\$156,621,000	\$3,170,000	2%
2	Fringe Benefits	\$48,105,000	\$50,585,000	\$2,480,000	5%
3	Physicians Fees	\$25,569,000	\$27,676,000	\$2,107,000	8%
4	Supplies and Drugs	\$50,108,000	\$52,564,000	\$2,456,000	5%
5	Depreciation and Amortization	\$30,957,000	\$31,148,000	\$191,000	1%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$2,566,000	\$3,048,000	\$482,000	19%
8	Malpractice Insurance Cost	(\$285,000)	\$6,225,000	\$6,510,000	-2284%
9	Other Operating Expenses	\$116,025,000	\$115,589,000	(\$436,000)	0%
	<b>Total Operating Expenses</b>	<b>\$426,496,000</b>	<b>\$443,456,000</b>	<b>\$16,960,000</b>	<b>4%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$37,044,000</b>	<b>\$54,673,000</b>	<b>\$17,629,000</b>	<b>48%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,418,000	(\$542,000)	(\$1,960,000)	-138%
	<b>Total Non-Operating Revenue</b>	<b>\$1,418,000</b>	<b>(\$542,000)</b>	<b>(\$1,960,000)</b>	<b>-138%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$38,462,000</b>	<b>\$54,131,000</b>	<b>\$15,669,000</b>	<b>41%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$4,434,000	\$1,486,000	(\$2,948,000)	-66%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$4,434,000</b>	<b>\$1,486,000</b>	<b>(\$2,948,000)</b>	<b>-66%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$42,896,000</b>	<b>\$55,617,000</b>	<b>\$12,721,000</b>	<b>30%</b>
	Principal Payments	\$3,948,000	\$4,696,000	\$748,000	19%

**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I.</b>	<b><u>GROSS REVENUE BY PAYER</u></b>				
<b>A.</b>	<b><u>INPATIENT GROSS REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$270,341,260	\$315,221,324	\$44,880,064	17%
2	MEDICARE MANAGED CARE	\$125,021,587	\$123,172,907	(\$1,848,680)	-1%
3	MEDICAID	\$230,209,572	\$222,828,904	(\$7,380,668)	-3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,194,141	\$410,349	(\$783,792)	-66%
6	COMMERCIAL INSURANCE	\$82,600,888	\$73,860,848	(\$8,740,040)	-11%
7	NON-GOVERNMENT MANAGED CARE	\$105,635,883	\$113,838,226	\$8,202,343	8%
8	WORKER'S COMPENSATION	\$7,487,090	\$6,930,273	(\$556,817)	-7%
9	SELF- PAY/UNINSURED	\$8,164,273	\$20,207,327	\$12,043,054	148%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$830,654,694</b>	<b>\$876,470,158</b>	<b>\$45,815,464</b>	<b>6%</b>
<b>B.</b>	<b><u>OUTPATIENT GROSS REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$151,711,022	\$160,015,874	\$8,304,852	5%
2	MEDICARE MANAGED CARE	\$82,095,149	\$81,834,038	(\$261,111)	0%
3	MEDICAID	\$286,369,150	\$307,573,351	\$21,204,201	7%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,284,733	\$836,199	(\$448,534)	-35%
6	COMMERCIAL INSURANCE	\$129,472,200	\$119,227,133	(\$10,245,067)	-8%
7	NON-GOVERNMENT MANAGED CARE	\$168,089,979	\$174,364,989	\$6,275,010	4%
8	WORKER'S COMPENSATION	\$5,611,077	\$6,494,074	\$882,997	16%
9	SELF- PAY/UNINSURED	\$37,791,733	\$33,171,524	(\$4,620,209)	-12%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$862,425,043</b>	<b>\$883,517,182</b>	<b>\$21,092,139</b>	<b>2%</b>
<b>C.</b>	<b><u>TOTAL GROSS REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$422,052,282	\$475,237,198	\$53,184,916	13%
2	MEDICARE MANAGED CARE	\$207,116,736	\$205,006,945	(\$2,109,791)	-1%
3	MEDICAID	\$516,578,722	\$530,402,255	\$13,823,533	3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$2,478,874	\$1,246,548	(\$1,232,326)	-50%
6	COMMERCIAL INSURANCE	\$212,073,088	\$193,087,981	(\$18,985,107)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$273,725,862	\$288,203,215	\$14,477,353	5%
8	WORKER'S COMPENSATION	\$13,098,167	\$13,424,347	\$326,180	2%
9	SELF- PAY/UNINSURED	\$45,956,006	\$53,378,851	\$7,422,845	16%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL GROSS REVENUE</b>	<b>\$1,693,079,737</b>	<b>\$1,759,987,340</b>	<b>\$66,907,603</b>	<b>4%</b>
<b>II.</b>	<b><u>NET REVENUE BY PAYER</u></b>				
<b>A.</b>	<b><u>INPATIENT NET REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$87,286,898	\$102,871,768	\$15,584,870	18%
2	MEDICARE MANAGED CARE	\$35,019,884	\$38,459,124	\$3,439,240	10%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	\$49,876,097	\$40,320,958	(\$9,555,139)	-19%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$184,899	\$91,862	(\$93,037)	-50%
6	COMMERCIAL INSURANCE	\$36,792,289	\$34,767,627	(\$2,024,662)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$42,246,104	\$54,595,644	\$12,349,540	29%
8	WORKER'S COMPENSATION	\$4,324,370	\$3,642,665	(\$681,705)	-16%
9	SELF- PAY/UNINSURED	\$1,903,873	\$10,449,109	\$8,545,236	449%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$257,634,414</b>	<b>\$285,198,757</b>	<b>\$27,564,343</b>	<b>11%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$24,332,945	\$27,226,592	\$2,893,647	12%
2	MEDICARE MANAGED CARE	\$12,847,287	\$12,392,980	(\$454,307)	-4%
3	MEDICAID	\$42,640,833	\$43,186,014	\$545,181	1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$546,488	\$181,050	(\$365,438)	-67%
6	COMMERCIAL INSURANCE	\$43,843,665	\$43,356,708	(\$486,957)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$54,428,158	\$61,553,145	\$7,124,987	13%
8	WORKER'S COMPENSATION	\$2,500,074	\$2,702,132	\$202,058	8%
9	SELF- PAY/UNINSURED	\$11,963,371	\$16,413,766	\$4,450,395	37%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$193,102,821</b>	<b>\$207,012,387</b>	<b>\$13,909,566</b>	<b>7%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$111,619,843	\$130,098,360	\$18,478,517	17%
2	MEDICARE MANAGED CARE	\$47,867,171	\$50,852,104	\$2,984,933	6%
3	MEDICAID	\$92,516,930	\$83,506,972	(\$9,009,958)	-10%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$731,387	\$272,912	(\$458,475)	-63%
6	COMMERCIAL INSURANCE	\$80,635,954	\$78,124,335	(\$2,511,619)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$96,674,262	\$116,148,789	\$19,474,527	20%
8	WORKER'S COMPENSATION	\$6,824,444	\$6,344,797	(\$479,647)	-7%
9	SELF- PAY/UNINSURED	\$13,867,244	\$26,862,875	\$12,995,631	94%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL NET REVENUE</b>	<b>\$450,737,235</b>	<b>\$492,211,144</b>	<b>\$41,473,909</b>	<b>9%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	4,893	5,686	793	16%
2	MEDICARE MANAGED CARE	2,065	2,234	169	8%
3	MEDICAID	6,057	6,240	183	3%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	31	16	(15)	-48%
6	COMMERCIAL INSURANCE	2,076	1,937	(139)	-7%
7	NON-GOVERNMENT MANAGED CARE	2,771	2,827	56	2%
8	WORKER'S COMPENSATION	99	90	(9)	-9%

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LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
9	SELF- PAY/UNINSURED	215	785	570	265%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL DISCHARGES</b>	<b>18,207</b>	<b>19,815</b>	<b>1,608</b>	<b>9%</b>
<b>B.</b>	<b><u>PATIENT DAYS</u></b>				
1	MEDICARE TRADITIONAL	35,973	41,277	5,304	15%
2	MEDICARE MANAGED CARE	14,249	15,618	1,369	10%
3	MEDICAID	29,184	28,455	(729)	-2%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	140	42	(98)	-70%
6	COMMERCIAL INSURANCE	8,662	8,322	(340)	-4%
7	NON-GOVERNMENT MANAGED CARE	11,689	12,217	528	5%
8	WORKER'S COMPENSATION	457	466	9	2%
9	SELF- PAY/UNINSURED	881	3,075	2,194	249%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL PATIENT DAYS</b>	<b>101,235</b>	<b>109,472</b>	<b>8,237</b>	<b>8%</b>
<b>C.</b>	<b><u>OUTPATIENT VISITS</u></b>				
1	MEDICARE TRADITIONAL	42,244	43,870	1,626	4%
2	MEDICARE MANAGED CARE	20,607	21,701	1,094	5%
3	MEDICAID	104,092	113,563	9,471	9%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	399	345	(54)	-14%
6	COMMERCIAL INSURANCE	38,781	38,562	(219)	-1%
7	NON-GOVERNMENT MANAGED CARE	54,533	54,879	346	1%
8	WORKER'S COMPENSATION	1,878	2,190	312	17%
9	SELF- PAY/UNINSURED	14,508	12,967	(1,541)	-11%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>277,042</b>	<b>288,077</b>	<b>11,035</b>	<b>4%</b>
<b>IV.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</u></b>				
<b>A.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$23,471,567	\$22,827,748	(\$643,819)	-3%
2	MEDICARE MANAGED CARE	\$11,333,395	\$10,992,157	(\$341,238)	-3%
3	MEDICAID	\$108,272,737	\$120,439,985	\$12,167,248	11%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$302,488	\$279,649	(\$22,839)	-8%
6	COMMERCIAL INSURANCE	\$24,834,176	\$22,751,435	(\$2,082,741)	-8%
7	NON-GOVERNMENT MANAGED CARE	\$31,058,209	\$29,609,688	(\$1,448,521)	-5%
8	WORKER'S COMPENSATION	\$1,513,901	\$2,007,781	\$493,880	33%
9	SELF- PAY/UNINSURED	\$21,348,487	\$14,490,390	(\$6,858,097)	-32%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$222,134,960</b>	<b>\$223,398,833</b>	<b>\$1,263,873</b>	<b>1%</b>
<b>B.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$4,694,313	\$3,325,148	(\$1,369,165)	-29%

**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	MEDICARE MANAGED CARE	\$3,400,018	\$1,436,701	(\$1,963,317)	-58%
3	MEDICAID	\$27,068,184	\$13,391,932	(\$13,676,252)	-51%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$241,990	\$53,649	(\$188,341)	-78%
6	COMMERCIAL INSURANCE	\$12,290,863	\$8,535,883	(\$3,754,980)	-31%
7	NON-GOVERNMENT MANAGED CARE	\$18,802,820	\$9,468,979	(\$9,333,841)	-50%
8	WORKER'S COMPENSATION	\$1,211,121	\$792,584	(\$418,537)	-35%
9	SELF- PAY/UNINSURED	\$17,078,789	\$3,947,603	(\$13,131,186)	-77%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$84,788,098</b>	<b>\$40,952,479</b>	<b>(\$43,835,619)</b>	<b>-52%</b>
<b>C.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u></b>				
1	MEDICARE TRADITIONAL	6,149	5,750	(399)	-6%
2	MEDICARE MANAGED CARE	2,715	2,802	87	3%
3	MEDICAID	39,450	45,211	5,761	15%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	123	121	(2)	-2%
6	COMMERCIAL INSURANCE	7,992	7,050	(942)	-12%
7	NON-GOVERNMENT MANAGED CARE	10,161	9,111	(1,050)	-10%
8	WORKER'S COMPENSATION	527	703	176	33%
9	SELF- PAY/UNINSURED	6,789	5,526	(1,263)	-19%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>73,906</b>	<b>76,274</b>	<b>2,368</b>	<b>3%</b>

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I.</b>	<b>OPERATING EXPENSE BY CATEGORY</b>				
<b>A.</b>	<b>Salaries &amp; Wages:</b>				
1	Nursing Salaries	\$53,745,825	\$58,048,061	\$4,302,236	8%
2	Physician Salaries	\$13,355,748	\$14,415,875	\$1,060,127	8%
3	Non-Nursing, Non-Physician Salaries	\$86,349,427	\$84,157,064	(\$2,192,363)	-3%
	<b>Total Salaries &amp; Wages</b>	<b>\$153,451,000</b>	<b>\$156,621,000</b>	<b>\$3,170,000</b>	<b>2%</b>
<b>B.</b>	<b>Fringe Benefits:</b>				
1	Nursing Fringe Benefits	\$13,784,956	\$15,773,784	\$1,988,828	14%
2	Physician Fringe Benefits	\$2,616,814	\$2,895,000	\$278,186	11%
3	Non-Nursing, Non-Physician Fringe Benefits	\$31,703,230	\$31,916,216	\$212,986	1%
	<b>Total Fringe Benefits</b>	<b>\$48,105,000</b>	<b>\$50,585,000</b>	<b>\$2,480,000</b>	<b>5%</b>
<b>C.</b>	<b>Contractual Labor Fees:</b>				
1	Nursing Fees	\$1,877,442	\$1,877,442	\$0	0%
2	Physician Fees	\$25,569,000	\$27,676,000	\$2,107,000	8%
3	Non-Nursing, Non-Physician Fees	\$44,874,388	\$49,765,859	\$4,891,471	11%
	<b>Total Contractual Labor Fees</b>	<b>\$72,320,830</b>	<b>\$79,319,301</b>	<b>\$6,998,471</b>	<b>10%</b>
<b>D.</b>	<b>Medical Supplies and Pharmaceutical Cost:</b>				
1	Medical Supplies	\$37,229,000	\$40,470,000	\$3,241,000	9%
2	Pharmaceutical Costs	\$12,879,000	\$12,094,000	(\$785,000)	-6%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$50,108,000</b>	<b>\$52,564,000</b>	<b>\$2,456,000</b>	<b>5%</b>
<b>E.</b>	<b>Depreciation and Amortization:</b>				
1	Depreciation-Building	\$16,106,000	\$16,206,000	\$100,000	1%
2	Depreciation-Equipment	\$14,851,000	\$14,942,000	\$91,000	1%
3	Amortization	\$0	\$0	\$0	0%
	<b>Total Depreciation and Amortization</b>	<b>\$30,957,000</b>	<b>\$31,148,000</b>	<b>\$191,000</b>	<b>1%</b>
<b>F.</b>	<b>Bad Debts:</b>				
1	Bad Debts	\$0	\$0	\$0	0%
<b>G.</b>	<b>Interest Expense:</b>				
1	Interest Expense	\$2,566,000	\$3,048,000	\$482,000	19%
<b>H.</b>	<b>Malpractice Insurance Cost:</b>				
1	Malpractice Insurance Cost	(\$285,000)	\$6,225,000	\$6,510,000	-2284%
<b>I.</b>	<b>Utilities:</b>				
1	Water	\$350,604	\$426,410	\$75,806	22%
2	Natural Gas	\$1,713,841	\$798,743	(\$915,098)	-53%
3	Oil	\$0	\$0	\$0	0%
4	Electricity	\$3,572,578	\$4,025,277	\$452,699	13%
5	Telephone	\$52,135	\$62,410	\$10,275	20%
6	Other Utilities	\$1,727	\$262	(\$1,465)	-85%
	<b>Total Utilities</b>	<b>\$5,690,885</b>	<b>\$5,313,102</b>	<b>(\$377,783)</b>	<b>-7%</b>
<b>J.</b>	<b>Business Expenses:</b>				
1	Accounting Fees	\$412,432	\$408,000	(\$4,432)	-1%
2	Legal Fees	\$948,577	\$148,411	(\$800,166)	-84%
3	Consulting Fees	\$628,109	\$633,481	\$5,372	1%
4	Dues and Membership	\$635,782	\$762,801	\$127,019	20%
5	Equipment Leases	\$70,806	\$14,442	(\$56,364)	-80%
6	Building Leases	\$3,275,359	\$3,722,969	\$447,610	14%
7	Repairs and Maintenance	\$9,478,420	\$10,150,275	\$671,855	7%
8	Insurance	\$765,438	\$631,621	(\$133,817)	-17%
9	Travel	\$606,795	\$676,834	\$70,039	12%
10	Conferences	\$4,954	\$5,740	\$786	16%



<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
11	Property Tax	\$221,091	\$443,411	\$222,320	101%
12	General Supplies	\$5,104,234	\$5,499,527	\$395,293	8%
13	Licenses and Subscriptions	\$527,232	\$484,662	(\$42,570)	-8%
14	Postage and Shipping	\$465,300	\$407,476	(\$57,824)	-12%
15	Advertising	\$0	\$0	\$0	0%
16	Corporate parent/system fees	\$5,161,234	\$5,461,092	\$299,858	6%
17	Computer Software	\$177,274	\$179,524	\$2,250	1%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$601,994	\$616,851	\$14,857	2%
20	Lab Fees / Red Cross charges	\$1,052,918	\$1,245,850	\$192,932	18%
21	Billing & Collection / Bank Fees	\$3,611,620	\$473,989	(\$3,137,631)	-87%
22	Recruiting / Employee Education & Recognition	\$283,566	\$249,757	(\$33,809)	-12%
23	Laundry / Linen	\$2,328,543	\$2,446,103	\$117,560	5%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$162,951	\$139,787	(\$23,164)	-14%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$4,361,611	\$4,237,874	(\$123,737)	-3%
	<b>Total Business Expenses</b>	<b>\$40,886,240</b>	<b>\$39,040,477</b>	<b>(\$1,845,763)</b>	<b>-5%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	\$22,696,045	\$19,592,120	(\$3,103,925)	-14%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$426,496,000</b>	<b>\$443,456,000</b>	<b>\$16,960,000</b>	<b>4%</b>
	<b>*A.-K.The total operating expenses amount above must agree with the total operating expenses amount on Report 150</b>				
<b>II.</b>	<b>OPERATING EXPENSE BY DEPARTMENT</b>				
<b>A.</b>	<b>General Services:</b>				
1	General Administration	\$27,514,622	\$34,776,450	\$7,261,828	26%
2	General Accounting	\$3,836,655	\$3,428,009	(\$408,646)	-11%
3	Patient Billing & Collection	\$11,486,083	\$15,975,168	\$4,489,085	39%
4	Admitting / Registration Office	\$1,122,400	\$72,425	(\$1,049,975)	-94%
5	Data Processing	\$21,328,532	\$21,261,779	(\$66,753)	0%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$50,555,994	\$53,082,174	\$2,526,180	5%
8	Public Relations	\$0	\$0	\$0	0%
9	Purchasing	\$907,918	\$1,038,133	\$130,215	14%
10	Dietary and Cafeteria	\$4,627,497	\$5,010,086	\$382,589	8%
11	Housekeeping	\$4,076,217	\$4,707,580	\$631,363	15%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$5,444,812	\$4,770,394	(\$674,418)	-12%
14	Security	\$3,078,103	\$2,677,637	(\$400,466)	-13%
15	Repairs and Maintenance	\$6,704,194	\$7,519,375	\$815,181	12%
16	Central Sterile Supply	\$2,787,140	\$3,438,561	\$651,421	23%
17	Pharmacy Department	\$16,634,188	\$16,124,254	(\$509,934)	-3%
18	Other General Services	\$36,308,032	\$35,206,796	(\$1,101,236)	-3%
	<b>Total General Services</b>	<b>\$196,412,387</b>	<b>\$209,088,821</b>	<b>\$12,676,434</b>	<b>6%</b>
<b>B.</b>	<b>Professional Services:</b>				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$3,457,287	\$3,744,861	\$287,574	8%
4	Medical Records	\$2,853,284	\$160,474	(\$2,692,810)	-94%
5	Social Service	\$3,373,658	\$3,759,917	\$386,259	11%
6	Other Professional Services	\$0	\$0	\$0	0%
	<b>Total Professional Services</b>	<b>\$9,684,229</b>	<b>\$7,665,252</b>	<b>(\$2,018,977)</b>	<b>-21%</b>
<b>C.</b>	<b>Special Services:</b>				

<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014 ACTUAL</b>	<b>FY 2015 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
1	Operating Room	\$24,024,837	\$24,696,802	\$671,965	3%
2	Recovery Room	\$1,409,368	\$1,394,795	(\$14,573)	-1%
3	Anesthesiology	\$1,257,162	\$1,333,226	\$76,064	6%
4	Delivery Room	\$4,328,261	\$4,703,042	\$374,781	9%
5	Diagnostic Radiology	\$11,415,739	\$10,234,410	(\$1,181,329)	-10%
6	Diagnostic Ultrasound	\$1,925,293	\$1,671,518	(\$253,775)	-13%
7	Radiation Therapy	\$4,863,403	\$4,756,287	(\$107,116)	-2%
8	Radioisotopes	\$729,758	\$1,142,824	\$413,066	57%
9	CT Scan	\$1,564,798	\$1,510,592	(\$54,206)	-3%
10	Laboratory	\$13,457,780	\$13,920,082	\$462,302	3%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$14,460,914	\$14,147,335	(\$313,579)	-2%
13	Electrocardiology	\$859,843	\$1,435,905	\$576,062	67%
14	Electroencephalography	\$199,578	\$188,949	(\$10,629)	-5%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$2,842,875	\$2,882,362	\$39,487	1%
19	Pulmonary Function	\$326,636	\$275,942	(\$50,694)	-16%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,998,482	\$1,939,830	(\$58,652)	-3%
23	Renal Dialysis	\$664,614	\$746,311	\$81,697	12%
24	Emergency Room	\$23,067,128	\$24,100,559	\$1,033,431	4%
25	MRI	\$0	\$0	\$0	0%
26	PET Scan	\$400,846	\$341,242	(\$59,604)	-15%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$2,680,642	\$2,827,175	\$146,533	5%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$5,483,029	\$5,355,777	(\$127,252)	-2%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$0	\$0	0%
	<b>Total Special Services</b>	<b>\$117,960,986</b>	<b>\$119,604,965</b>	<b>\$1,643,979</b>	<b>1%</b>
<b>D.</b>	<b>Routine Services:</b>				
1	Medical & Surgical Units	\$43,555,342	\$47,670,718	\$4,115,376	9%
2	Intensive Care Unit	\$3,699,447	\$3,613,750	(\$85,697)	-2%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,537,779	\$2,649,098	\$111,319	4%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$2,213,725	\$2,158,616	(\$55,109)	-2%
10	Ambulatory Surgery	\$9,880,813	\$9,725,496	(\$155,317)	-2%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$3,743,113	\$3,240,969	(\$502,144)	-13%
13	Other Routine Services	\$2,009,979	\$1,900,426	(\$109,553)	-5%
	<b>Total Routine Services</b>	<b>\$67,640,198</b>	<b>\$70,959,073</b>	<b>\$3,318,875</b>	<b>5%</b>
<b>E.</b>	<b>Other Departments:</b>				
1	Miscellaneous Other Departments	\$34,798,200	\$36,137,889	\$1,339,689	4%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$426,496,000</b>	<b>\$443,456,000</b>	<b>\$16,960,000</b>	<b>4%</b>
	<b>*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				

<b>BRIDGEPORT HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$418,827,000	\$439,375,000	\$466,074,000
2	Other Operating Revenue	22,885,000	24,165,000	32,055,000
3	Total Operating Revenue	\$441,712,000	\$463,540,000	\$498,129,000
4	Total Operating Expenses	409,234,000	426,496,000	443,456,000
5	Income/(Loss) From Operations	\$32,478,000	\$37,044,000	\$54,673,000
6	Total Non-Operating Revenue	3,969,000	5,852,000	944,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$36,447,000	\$42,896,000	\$55,617,000
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	7.29%	7.89%	10.95%
2	Hospital Non Operating Margin	0.89%	1.25%	0.19%
3	Hospital Total Margin	8.18%	9.14%	11.14%
4	Income/(Loss) From Operations	\$32,478,000	\$37,044,000	\$54,673,000
5	Total Operating Revenue	\$441,712,000	\$463,540,000	\$498,129,000
6	Total Non-Operating Revenue	\$3,969,000	\$5,852,000	\$944,000
7	Total Revenue	\$445,681,000	\$469,392,000	\$499,073,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$36,447,000	\$42,896,000	\$55,617,000
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$123,039,000	\$100,811,000	\$110,843,000
2	Hospital Total Net Assets	\$175,860,000	\$155,833,000	\$168,564,000
3	Hospital Change in Total Net Assets	\$52,602,000	(\$20,027,000)	\$12,731,000
4	Hospital Change in Total Net Assets %	142.7%	-11.4%	8.2%

<b>BRIDGEPORT HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>D.</b>	<b><u>Cost Data Summary</u></b>			
<b>1</b>	<b><u>Ratio of Cost to Charges</u></b>	<b>0.27</b>	<b>0.25</b>	<b>0.25</b>
2	Total Operating Expenses	\$409,234,000	\$426,496,000	\$443,456,000
3	Total Gross Revenue	\$1,512,519,567	\$1,693,079,737	\$1,759,987,340
4	Total Other Operating Revenue	\$4,728,741	\$5,236,454	\$6,414,248
<b>5</b>	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.49</b>	<b>1.47</b>	<b>1.62</b>
6	Total Non-Government Payments	\$191,706,566	\$198,001,904	\$227,480,796
7	Total Uninsured Payments	\$5,710,793	\$13,867,244	\$26,862,875
8	Total Non-Government Charges	\$516,542,643	\$544,853,123	\$548,094,394
9	Total Uninsured Charges	\$52,204,765	\$45,956,006	\$53,378,851
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>1.03</b>	<b>1.01</b>	<b>1.06</b>
11	Total Medicare Payments	\$160,079,187	\$159,487,014	\$180,950,464
12	Total Medicare Charges	\$573,620,453	\$629,169,018	\$680,244,143
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.69</b>	<b>0.71</b>	<b>0.63</b>
14	Total Medicaid Payments	\$77,809,615	\$92,516,930	\$83,506,972
15	Total Medicaid Charges	\$420,590,203	\$516,578,722	\$530,402,255
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$14,066,134</b>	<b>\$17,291,595</b>	<b>\$12,584,936</b>
17	Charity Care	\$19,484,535	\$13,389,500	\$13,728,345
18	Bad Debts	\$32,666,112	\$55,466,000	\$36,400,755
19	Total Uncompensated Care	\$52,150,647	\$68,855,500	\$50,129,100
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>3.4%</b>	<b>4.1%</b>	<b>2.8%</b>

<b>BRIDGEPORT HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>
21	Total Operating Expenses	\$409,234,000	\$426,496,000	\$443,456,000
<b>E. <u>Liquidity Measures Summary</u></b>				
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1</b>	<b>2</b>	<b>2</b>
2	Total Current Assets	\$143,463,000	\$146,801,000	\$169,088,000
3	Total Current Liabilities	\$113,611,000	\$90,997,000	\$96,897,000
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>60</b>	<b>61</b>	<b>78</b>
5	Cash and Cash Equivalents	\$30,127,000	\$28,527,000	\$25,968,000
6	Short Term Investments	33,642,000	37,860,000	61,779,000
7	Total Cash and Short Term Investments	\$63,769,000	\$66,387,000	\$87,747,000
8	Total Operating Expenses	\$409,234,000	\$426,496,000	\$443,456,000
9	Depreciation Expense	\$22,794,000	\$30,957,000	\$31,148,000
10	Operating Expenses less Depreciation Expense	\$386,440,000	\$395,539,000	\$412,308,000
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>45</b>	<b>41</b>	<b>43</b>
12	Net Patient Accounts Receivable	\$51,432,000	\$49,732,000	\$54,662,000
13	Due From Third Party Payers	\$10,552,000	\$0	\$0
14	Due To Third Party Payers	\$10,552,000	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$51,432,000	\$49,732,000	\$54,662,000
16	Total Net Patient Revenue	\$418,827,000	\$439,375,000	\$466,074,000
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>107</b>	<b>84</b>	<b>86</b>
18	Total Current Liabilities	\$113,611,000	\$90,997,000	\$96,897,000
19	Total Operating Expenses	\$409,234,000	\$426,496,000	\$443,456,000
20	Depreciation Expense	\$22,794,000	\$30,957,000	\$31,148,000

<b>BRIDGEPORT HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
21	Total Operating Expenses less Depreciation Expense	\$386,440,000	\$395,539,000	\$412,308,000
<b>F. <u>Solvency Measures Summary</u></b>				
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>39.9</b>	<b>33.0</b>	<b>31.7</b>
2	Total Net Assets	\$175,860,000	\$155,833,000	\$168,564,000
3	Total Assets	\$440,309,000	\$472,575,000	\$532,167,000
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>36.4</b>	<b>38.7</b>	<b>37.6</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$36,447,000	\$42,896,000	\$55,617,000
6	Depreciation Expense	\$22,794,000	\$30,957,000	\$31,148,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$59,241,000	\$73,853,000	\$86,765,000
8	Total Current Liabilities	\$113,611,000	\$90,997,000	\$96,897,000
9	Total Long Term Debt	\$49,202,000	\$100,042,000	\$133,681,000
10	Total Current Liabilities and Total Long Term Debt	\$162,813,000	\$191,039,000	\$230,578,000
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>21.9</b>	<b>39.1</b>	<b>44.2</b>
12	Total Long Term Debt	\$49,202,000	\$100,042,000	\$133,681,000
13	Total Net Assets	\$175,860,000	\$155,833,000	\$168,564,000
14	Total Long Term Debt and Total Net Assets	\$225,062,000	\$255,875,000	\$302,245,000
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>11.3</b>	<b>11.7</b>	<b>11.6</b>
16	Excess Revenues over Expenses	36,447,000	\$42,896,000	\$55,617,000
17	Interest Expense	1,665,000	\$2,566,000	\$3,048,000
18	Depreciation and Amortization Expense	22,794,000	\$30,957,000	\$31,148,000
19	Principal Payments	3,747,000	\$3,948,000	\$4,696,000
<b>G. <u>Other Financial Ratios</u></b>				

<b>BRIDGEPORT HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>
<b>20</b>	<b>Average Age of Plant</b>	<b>12.5</b>	<b>9.8</b>	<b>9.3</b>
21	Accumulated Depreciation	285,402,000	303,677,000	289,391,000
22	Depreciation and Amortization Expense	22,794,000	30,957,000	31,148,000
<b>H. Utilization Measures Summary</b>				
1	Patient Days	97,440	101,235	109,472
2	Discharges	18,453	18,207	19,815
3	ALOS	5.3	5.6	5.5
4	Staffed Beds	271	281	302
5	Available Beds	-	368	383
6	Licensed Beds	333	383	383
7	Occupancy of Staffed Beds	98.5%	98.7%	99.3%
8	Occupancy of Available Beds	80.2%	75.4%	78.3%
9	Full Time Equivalent Employees	2,126.0	2,151.0	2,137.9
<b>I. Hospital Gross Revenue Payer Mix Percentage</b>				
1	Non-Government Gross Revenue Payer Mix Percentage	30.7%	29.5%	28.1%
2	Medicare Gross Revenue Payer Mix Percentage	37.9%	37.2%	38.7%
3	Medicaid Gross Revenue Payer Mix Percentage	27.8%	30.5%	30.1%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	3.5%	2.7%	3.0%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$464,337,878	\$498,897,117	\$494,715,543
9	Medicare Gross Revenue (Charges)	\$573,620,453	\$629,169,018	\$680,244,143
10	Medicaid Gross Revenue (Charges)	\$420,590,203	\$516,578,722	\$530,402,255
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$52,204,765	\$45,956,006	\$53,378,851
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,766,268	\$2,478,874	\$1,246,548
14	Total Gross Revenue (Charges)	\$1,512,519,567	\$1,693,079,737	\$1,759,987,340
<b>J. Hospital Net Revenue Payer Mix Percentage</b>				
1	Non-Government Net Revenue Payer Mix Percentage	43.3%	40.9%	40.8%
2	Medicare Net Revenue Payer Mix Percentage	37.2%	35.4%	36.8%

<b>BRIDGEPORT HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2015</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
3	Medicaid Net Revenue Payer Mix Percentage	18.1%	20.5%	17.0%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	1.3%	3.1%	5.5%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.2%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$185,995,773	\$184,134,660	\$200,617,921
9	Medicare Net Revenue (Payments)	\$160,079,187	\$159,487,014	\$180,950,464
10	Medicaid Net Revenue (Payments)	\$77,809,615	\$92,516,930	\$83,506,972
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$5,710,793	\$13,867,244	\$26,862,875
13	CHAMPUS / TRICARE Net Revenue Payments)	\$317,227	\$731,387	\$272,912
14	Total Net Revenue (Payments)	\$429,912,595	\$450,737,235	\$492,211,144
<b>K.</b>	<b>Discharges</b>			
1	Non-Government (Including Self Pay / Uninsured)	5,525	5,161	5,639
2	Medicare	7,117	6,958	7,920
3	Medical Assistance	5,789	6,057	6,240
4	Medicaid	5,789	6,057	6,240
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	22	31	16
7	Uninsured (Included In Non-Government)	301	215	785
8	Total	18,453	18,207	19,815
<b>L.</b>	<b>Case Mix Index</b>			
1	Non-Government (Including Self Pay / Uninsured)	1.24220	1.27940	1.28301
2	Medicare	1.59207	1.59206	1.64680
3	Medical Assistance	1.03493	1.07163	1.06882
4	Medicaid	1.03493	1.07163	1.06882
5	Other Medical Assistance	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.20585	1.13051	0.86005
7	Uninsured (Included In Non-Government)	1.15332	1.18129	1.03671
8	Total Case Mix Index	1.31207	1.32951	1.36062
<b>M.</b>	<b>Emergency Department Visits</b>			
1	Emergency Room - Treated and Admitted	10,835	13,334	15,012
2	Emergency Room - Treated and Discharged	66,060	73,906	76,274
3	Total Emergency Room Visits	76,895	87,240	91,286



**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$2,804,119	\$2,365,699	(\$438,420)	-16%
2	Inpatient Payments	\$684,068	\$712,886	\$28,818	4%
3	Outpatient Charges	\$1,252,399	\$1,541,489	\$289,090	23%
4	Outpatient Payments	\$105,021	\$212,917	\$107,896	103%
5	Discharges	30	43	13	43%
6	Patient Days	330	353	23	7%
7	Outpatient Visits (Excludes ED Visits)	236	300	64	27%
8	Emergency Department Outpatient Visits	49	57	8	16%
9	Emergency Department Inpatient Admissions	48	41	(7)	-15%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$4,056,518</b>	<b>\$3,907,188</b>	<b>(\$149,330)</b>	<b>-4%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$789,089</b>	<b>\$925,803</b>	<b>\$136,714</b>	<b>17%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$28,648,977	\$38,006,441	\$9,357,464	33%
2	Inpatient Payments	\$7,973,341	\$12,007,762	\$4,034,421	51%
3	Outpatient Charges	\$21,416,204	\$22,144,110	\$727,906	3%
4	Outpatient Payments	\$3,245,595	\$3,351,672	\$106,077	3%
5	Discharges	503	653	150	30%
6	Patient Days	3,283	4,592	1,309	40%
7	Outpatient Visits (Excludes ED Visits)	4,559	5,339	780	17%
8	Emergency Department Outpatient Visits	452	543	91	20%
9	Emergency Department Inpatient Admissions	468	563	95	20%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$50,065,181</b>	<b>\$60,150,551</b>	<b>\$10,085,370</b>	<b>20%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$11,218,936</b>	<b>\$15,359,434</b>	<b>\$4,140,498</b>	<b>37%</b>

**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$54,275,620	\$47,168,458	(\$7,107,162)	-13%
2	Inpatient Payments	\$15,829,254	\$14,837,086	(\$992,168)	-6%
3	Outpatient Charges	\$32,253,209	\$25,547,603	(\$6,705,606)	-21%
4	Outpatient Payments	\$4,664,615	\$3,456,876	(\$1,207,739)	-26%
5	Discharges	934	864	(70)	-7%
6	Patient Days	6,804	6,310	(494)	-7%
7	Outpatient Visits (Excludes ED Visits)	6,866	6,129	(737)	-11%
8	Emergency Department Outpatient Visits	1,027	931	(96)	-9%
9	Emergency Department Inpatient Admissions	1,056	874	(182)	-17%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$86,528,829</b>	<b>\$72,716,061</b>	<b>(\$13,812,768)</b>	<b>-16%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$20,493,869</b>	<b>\$18,293,962</b>	<b>(\$2,199,907)</b>	<b>-11%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$13,522,667	\$19,838,815	\$6,316,148	47%
2	Inpatient Payments	\$3,719,123	\$6,094,036	\$2,374,913	64%
3	Outpatient Charges	\$13,271,572	\$17,081,399	\$3,809,827	29%
4	Outpatient Payments	\$1,954,430	\$2,371,095	\$416,665	21%
5	Discharges	281	397	116	41%
6	Patient Days	1,765	2,517	752	43%
7	Outpatient Visits (Excludes ED Visits)	3,049	3,934	885	29%
8	Emergency Department Outpatient Visits	825	954	129	16%
9	Emergency Department Inpatient Admissions	901	431	(470)	-52%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$26,794,239</b>	<b>\$36,920,214</b>	<b>\$10,125,975</b>	<b>38%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$5,673,553</b>	<b>\$8,465,131</b>	<b>\$2,791,578</b>	<b>49%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$25,770,204	\$15,793,494	(\$9,976,710)	-39%
2	Inpatient Payments	\$6,814,098	\$4,807,354	(\$2,006,744)	-29%
3	Outpatient Charges	\$13,901,765	\$15,519,437	\$1,617,672	12%
4	Outpatient Payments	\$2,877,626	\$3,000,420	\$122,794	4%
5	Discharges	317	277	(40)	-13%
6	Patient Days	2,067	1,846	(221)	-11%
7	Outpatient Visits (Excludes ED Visits)	3,182	3,197	15	0%
8	Emergency Department Outpatient Visits	362	317	(45)	-12%
9	Emergency Department Inpatient Admissions	372	291	(81)	-22%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$39,671,969</b>	<b>\$31,312,931</b>	<b>(\$8,359,038)</b>	<b>-21%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$9,691,724</b>	<b>\$7,807,774</b>	<b>(\$1,883,950)</b>	<b>-19%</b>

**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J. HUMANA</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**BRIDGEPORT HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2015**  
**REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$125,021,587</b>	<b>\$123,172,907</b>	<b>(\$1,848,680)</b>	<b>-1%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$35,019,884</b>	<b>\$38,459,124</b>	<b>\$3,439,240</b>	<b>10%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$82,095,149</b>	<b>\$81,834,038</b>	<b>(\$261,111)</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$12,847,287</b>	<b>\$12,392,980</b>	<b>(\$454,307)</b>	<b>-4%</b>
	<b>TOTAL DISCHARGES</b>	<b>2,065</b>	<b>2,234</b>	<b>169</b>	<b>8%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>14,249</b>	<b>15,618</b>	<b>1,369</b>	<b>10%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>17,892</b>	<b>18,899</b>	<b>1,007</b>	<b>6%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>2,715</b>	<b>2,802</b>	<b>87</b>	<b>3%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>2,845</b>	<b>2,200</b>	<b>(645)</b>	<b>-23%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$207,116,736</b>	<b>\$205,006,945</b>	<b>(\$2,109,791)</b>	<b>-1%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$47,867,171</b>	<b>\$50,852,104</b>	<b>\$2,984,933</b>	<b>6%</b>

**BRIDGEPORT HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2014 ACTUAL	(4) FY 2015 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**BRIDGEPORT HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2014 ACTUAL	(4) FY 2015 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**BRIDGEPORT HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2015  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2014 ACTUAL	(4) FY 2015 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL DISCHARGES</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>



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

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

## REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$161,059,000	\$194,946,000	\$33,887,000	21%
2	Short Term Investments	\$1,040,882,000	\$1,160,670,000	\$119,788,000	12%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$368,342,000	\$405,694,000	\$37,352,000	10%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$40,473,000	\$45,816,000	\$5,343,000	13%
8	Prepaid Expenses	\$13,846,000	\$25,580,000	\$11,734,000	85%
9	Other Current Assets	\$58,405,000	\$57,779,000	(\$626,000)	-1%
	<b>Total Current Assets</b>	<b>\$1,683,007,000</b>	<b>\$1,890,485,000</b>	<b>\$207,478,000</b>	<b>12%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$31,833,000	\$30,531,000	(\$1,302,000)	-4%
2	Board Designated for Capital Acquisition	\$107,073,000	\$96,951,000	(\$10,122,000)	-9%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$94,644,000	\$78,837,000	(\$15,807,000)	-17%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$233,550,000</b>	<b>\$206,319,000</b>	<b>(\$27,231,000)</b>	<b>-12%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$394,904,000	\$420,800,000	\$25,896,000	7%
7	Other Noncurrent Assets	\$400,099,000	\$421,351,000	\$21,252,000	5%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$2,900,150,000	\$2,940,033,000	\$39,883,000	1%
2	Less: Accumulated Depreciation	\$1,444,576,000	\$1,551,286,000	\$106,710,000	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$1,455,574,000</b>	<b>\$1,388,747,000</b>	<b>(\$66,827,000)</b>	<b>-5%</b>
3	Construction in Progress	\$66,043,000	\$157,101,000	\$91,058,000	138%
	<b>Total Net Fixed Assets</b>	<b>\$1,521,617,000</b>	<b>\$1,545,848,000</b>	<b>\$24,231,000</b>	<b>2%</b>
	<b>Total Assets</b>	<b>\$4,233,177,000</b>	<b>\$4,484,803,000</b>	<b>\$251,626,000</b>	<b>6%</b>

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

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

## REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$354,226,000	\$377,319,000	\$23,093,000	7%
2	Salaries, Wages and Payroll Taxes	\$115,172,000	\$122,564,000	\$7,392,000	6%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$57,727,000	\$51,101,000	(\$6,626,000)	-11%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$40,432,000	\$92,866,000	\$52,434,000	130%
	<b>Total Current Liabilities</b>	<b>\$567,557,000</b>	<b>\$643,850,000</b>	<b>\$76,293,000</b>	<b>13%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$902,400,000	\$906,150,000	\$3,750,000	0%
2	Notes Payable (Net of Current Portion)	\$85,709,000	\$107,159,000	\$21,450,000	25%
	<b>Total Long Term Debt</b>	<b>\$988,109,000</b>	<b>\$1,013,309,000</b>	<b>\$25,200,000</b>	<b>3%</b>
3	Accrued Pension Liability	\$321,442,000	\$339,901,000	\$18,459,000	6%
4	Other Long Term Liabilities	\$489,445,000	\$495,824,000	\$6,379,000	1%
	<b>Total Long Term Liabilities</b>	<b>\$1,798,996,000</b>	<b>\$1,849,034,000</b>	<b>\$50,038,000</b>	<b>3%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$1,644,056,000	\$1,750,995,000	\$106,939,000	7%
2	Temporarily Restricted Net Assets	\$141,712,000	\$147,568,000	\$5,856,000	4%
3	Permanently Restricted Net Assets	\$80,856,000	\$93,356,000	\$12,500,000	15%
	<b>Total Net Assets</b>	<b>\$1,866,624,000</b>	<b>\$1,991,919,000</b>	<b>\$125,295,000</b>	<b>7%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$4,233,177,000</b>	<b>\$4,484,803,000</b>	<b>\$251,626,000</b>	<b>6%</b>

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHC)					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$11,767,478,000	\$12,297,458,000	\$529,980,000	5%
2	Less: Allowances	\$8,106,128,000	\$8,479,889,000	\$373,761,000	5%
3	Less: Charity Care	\$200,412,000	\$184,456,000	(\$15,956,000)	-8%
4	Less: Other Deductions	\$49,503,000	\$58,900,000	\$9,397,000	19%
	<b>Total Net Patient Revenue</b>	<b>\$3,411,435,000</b>	<b>\$3,574,213,000</b>	<b>\$162,778,000</b>	<b>5%</b>
5	Provision for Bad Debts	\$123,743,000	\$81,528,000	(\$42,215,000)	-34%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$3,287,692,000</b>	<b>\$3,492,685,000</b>	<b>\$204,993,000</b>	<b>6%</b>
6	Other Operating Revenue	\$103,175,000	\$104,061,000	\$886,000	1%
7	Net Assets Released from Restrictions	\$3,819,000	\$5,534,000	\$1,715,000	45%
	<b>Total Operating Revenue</b>	<b>\$3,394,686,000</b>	<b>\$3,602,280,000</b>	<b>\$207,594,000</b>	<b>6%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$1,318,391,000	\$1,390,520,000	\$72,129,000	5%
2	Fringe Benefits	\$425,746,000	\$467,952,000	\$42,206,000	10%
3	Physicians Fees	\$121,415,000	\$127,505,000	\$6,090,000	5%
4	Supplies and Drugs	\$493,932,000	\$572,515,000	\$78,583,000	16%
5	Depreciation and Amortization	\$192,072,000	\$185,944,000	(\$6,128,000)	-3%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$26,917,000	\$24,188,000	(\$2,729,000)	-10%
8	Malpractice Insurance Cost	\$58,999,000	\$64,096,000	\$5,097,000	9%
9	Other Operating Expenses	\$587,102,000	\$609,904,000	\$22,802,000	4%
	<b>Total Operating Expenses</b>	<b>\$3,224,574,000</b>	<b>\$3,442,624,000</b>	<b>\$218,050,000</b>	<b>7%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$170,112,000</b>	<b>\$159,656,000</b>	<b>(\$10,456,000)</b>	<b>-6%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$3,103,000	\$5,099,000	\$1,996,000	64%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$23,196,000)	(\$35,200,000)	(\$12,004,000)	52%
	<b>Total Non-Operating Revenue</b>	<b>(\$20,093,000)</b>	<b>(\$30,101,000)</b>	<b>(\$10,008,000)</b>	<b>50%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$150,019,000</b>	<b>\$129,555,000</b>	<b>(\$20,464,000)</b>	<b>-14%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$86,913,000	\$14,536,000	(\$72,377,000)	-83%
	All Other Adjustments	(\$32,631,000)	\$0	\$32,631,000	-100%
	<b>Total Other Adjustments</b>	<b>\$54,282,000</b>	<b>\$14,536,000</b>	<b>(\$39,746,000)</b>	<b>-73%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$204,301,000</b>	<b>\$144,091,000</b>	<b>(\$60,210,000)</b>	<b>-29%</b>

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

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$418,827,000	\$3,287,692,000	\$3,492,685,000
2	Other Operating Revenue	26,208,000	106,994,000	109,595,000
3	Total Operating Revenue	\$445,035,000	\$3,394,686,000	\$3,602,280,000
4	Total Operating Expenses	425,775,000	3,224,574,000	3,442,624,000
5	Income/(Loss) From Operations	\$19,260,000	\$170,112,000	\$159,656,000
6	Total Non-Operating Revenue	3,969,000	34,189,000	(15,565,000)
7	Excess/(Deficiency) of Revenue Over Expenses	\$23,229,000	\$204,301,000	\$144,091,000
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	4.29%	4.96%	4.45%
2	Parent Corporation Non-Operating Margin	0.88%	1.00%	-0.43%
3	Parent Corporation Total Margin	5.17%	5.96%	4.02%
4	Income/(Loss) From Operations	\$19,260,000	\$170,112,000	\$159,656,000
5	Total Operating Revenue	\$445,035,000	\$3,394,686,000	\$3,602,280,000
6	Total Non-Operating Revenue	\$3,969,000	\$34,189,000	(\$15,565,000)
7	Total Revenue	\$449,004,000	\$3,428,875,000	\$3,586,715,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$23,229,000	\$204,301,000	\$144,091,000
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$120,290,000	\$1,644,056,000	\$1,750,995,000
2	Parent Corporation Total Net Assets	\$173,111,000	\$1,866,624,000	\$1,991,919,000
3	Parent Corporation Change in Total Net Assets	\$52,379,000	\$1,693,513,000	\$125,295,000
4	Parent Corporation Change in Total Net Assets %	143.4%	978.3%	6.7%

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

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015
	<b>D. <u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.56</b>	<b>2.97</b>	<b>2.94</b>
2	Total Current Assets	\$174,682,000	\$1,683,007,000	\$1,890,485,000
3	Total Current Liabilities	\$112,303,000	\$567,557,000	\$643,850,000
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>86</b>	<b>145</b>	<b>152</b>
5	Cash and Cash Equivalents	\$30,636,000	\$161,059,000	\$194,946,000
6	Short Term Investments	\$64,307,000	\$1,040,882,000	\$1,160,670,000
7	Total Cash and Short Term Investments	\$94,943,000	\$1,201,941,000	\$1,355,616,000
8	Total Operating Expenses	\$425,775,000	\$3,224,574,000	\$3,442,624,000
9	Depreciation Expense	\$22,858,000	\$192,072,000	\$185,944,000
10	Operating Expenses less Depreciation Expense	\$402,917,000	\$3,032,502,000	\$3,256,680,000
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>45</b>	<b>41</b>	<b>42</b>
12	Net Patient Accounts Receivable	\$ 51,432,000	\$ 368,342,000	\$ 405,694,000
13	Due From Third Party Payers	\$10,552,000	\$0	\$0
14	Due To Third Party Payers	\$10,552,000	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 51,432,000	\$ 368,342,000	\$ 405,694,000
16	Total Net Patient Revenue	\$418,827,000	\$3,287,692,000	\$3,492,685,000
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>102</b>	<b>68</b>	<b>72</b>
18	Total Current Liabilities	\$112,303,000	\$567,557,000	\$643,850,000
19	Total Operating Expenses	\$425,775,000	\$3,224,574,000	\$3,442,624,000
20	Depreciation Expense	\$22,858,000	\$192,072,000	\$185,944,000
20	Total Operating Expenses less Depreciation Expense	\$402,917,000	\$3,032,502,000	\$3,256,680,000

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

## TWELVE MONTHS ACTUAL FILING

## FISCAL YEAR 2015

## REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015
<b>E. Solvency Measures Summary</b>				
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>39.1</b>	<b>44.1</b>	<b>44.4</b>
2	Total Net Assets	\$173,111,000	\$1,866,624,000	\$1,991,919,000
3	Total Assets	\$442,874,000	\$4,233,177,000	\$4,484,803,000
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>28.5</b>	<b>25.5</b>	<b>19.9</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$23,229,000	\$204,301,000	\$144,091,000
6	Depreciation Expense	\$22,858,000	\$192,072,000	\$185,944,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$46,087,000	\$396,373,000	\$330,035,000
8	Total Current Liabilities	\$112,303,000	\$567,557,000	\$643,850,000
9	Total Long Term Debt	\$49,202,000	\$988,109,000	\$1,013,309,000
10	Total Current Liabilities and Total Long Term Debt	\$161,505,000	\$1,555,666,000	\$1,657,159,000
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>22.1</b>	<b>34.6</b>	<b>33.7</b>
12	Total Long Term Debt	\$49,202,000	\$988,109,000	\$1,013,309,000
13	Total Net Assets	\$173,111,000	\$1,866,624,000	\$1,991,919,000
14	Total Long Term Debt and Total Net Assets	\$222,313,000	\$2,854,733,000	\$3,005,228,000

BRIDGEPORT HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2015								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
LINE	DESCRIPTION	PATIENT DAYS	DISCHARGES OR CU/CCU # PATIEN	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
1	Adult Medical/Surgical	72,199	13,490	13,497	198	231	99.9%	85.6%
2	ICU/CCU (Excludes Neonatal ICU)	7,570	370	0	21	32	98.8%	64.8%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	10,326	997	887	29	39	97.6%	72.5%
	<b>TOTAL PSYCHIATRIC</b>	<b>10,326</b>	<b>997</b>	<b>887</b>	<b>29</b>	<b>39</b>	<b>97.6%</b>	<b>72.5%</b>
5	Rehabilitation	5,274	336	341	15	18	96.3%	80.3%
6	Maternity	8,688	2,968	2,786	24	39	99.2%	61.0%
7	Newborn	5,415	2,024	2,299	15	24	98.9%	61.8%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>104,057</b>	<b>17,791</b>	<b>17,511</b>	<b>287</b>	<b>359</b>	<b>99.3%</b>	<b>79.4%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>109,472</b>	<b>19,815</b>	<b>19,810</b>	<b>302</b>	<b>383</b>	<b>99.3%</b>	<b>78.3%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>109,472</b>	<b>19,815</b>	<b>19,810</b>	<b>302</b>	<b>383</b>	<b>99.3%</b>	<b>78.3%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>101,235</b>	<b>18,207</b>	<b>18,207</b>	<b>281</b>	<b>368</b>	<b>98.7%</b>	<b>75.4%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>8,237</b>	<b>1,608</b>	<b>1,603</b>	<b>21</b>	<b>15</b>	<b>0.6%</b>	<b>2.9%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>8%</b>	<b>9%</b>	<b>9%</b>	<b>7%</b>	<b>4%</b>	<b>1%</b>	<b>4%</b>
	Total Licensed Beds and Bassinets	383						
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>								
<b>Note: Total discharges do not include ICU/CCU patients.</b>								

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	10,054	11,258	1,204	12%
2	Outpatient Scans (Excluding Emergency Department Scans)	7,900	7,245	-655	-8%
3	Emergency Department Scans	8,849	8,601	-248	-3%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>26,803</b>	<b>27,104</b>	<b>301</b>	<b>1%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	1,412	1,759	347	25%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,299	3,806	507	15%
3	Emergency Department Scans	292	237	-55	-19%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>5,003</b>	<b>5,802</b>	<b>799</b>	<b>16%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	0	3	3	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	313	406	93	30%
3	Emergency Department Scans	1	0	-1	-100%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>314</b>	<b>409</b>	<b>95</b>	<b>30%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	189	244	55	29%
2	Outpatient Procedures	11,004	11,349	345	3%
	<b>Total Linear Accelerator Procedures</b>	<b>11,193</b>	<b>11,593</b>	<b>400</b>	<b>4%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	390	442	52	13%
2	Outpatient Procedures	292	497	205	70%
	<b>Total Cardiac Catheterization Procedures</b>	<b>682</b>	<b>939</b>	<b>257</b>	<b>38%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	169	174	5	3%
2	Elective Procedures	228	254	26	11%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>397</b>	<b>428</b>	<b>31</b>	<b>8%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	128	124	-4	-3%
2	Outpatient Studies	262	359	97	37%
	<b>Total Electrophysiology Studies</b>	<b>390</b>	<b>483</b>	<b>93</b>	<b>24%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	4,079	3,852	-227	-6%
2	Outpatient Surgical Procedures	9,494	8,900	-594	-6%
	<b>Total Surgical Procedures</b>	<b>13,573</b>	<b>12,752</b>	<b>-821</b>	<b>-6%</b>
<b>J. Endoscopy Procedures</b>					



BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Endoscopy Procedures	300	362	62	21%
2	Outpatient Endoscopy Procedures	4,278	4,145	-133	-3%
	<b>Total Endoscopy Procedures</b>	<b>4,578</b>	<b>4,507</b>	<b>-71</b>	<b>-2%</b>
<b>K. Hospital Emergency Room Visits</b>					
1	Emergency Room Visits: Treated and Admitted	13,334	15,012	1,678	13%
2	Emergency Room Visits: Treated and Discharged	73,906	76,274	2,368	3%
	<b>Total Emergency Room Visits</b>	<b>87,240</b>	<b>91,286</b>	<b>4,046</b>	<b>5%</b>
<b>L. Hospital Clinic Visits</b>					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	2	2	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	18,911	19,056	145	1%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	7,845	8,406	561	7%
13	Specialty Clinic Visits - Other Speciality Clinics	2,424	2,905	481	20%
	<b>Total Hospital Clinic Visits</b>	<b>29,180</b>	<b>30,369</b>	<b>1,189</b>	<b>4%</b>
<b>M. Other Hospital Outpatient Visits</b>					
1	Rehabilitation (PT/OT/ST)	102,417	80,298	-22,119	-22%
2	Cardiac Rehabilitation	3,172	4,202	1,030	32%
3	Chemotherapy	2,610	1,478	-1,132	-43%
4	Gastroenterology	6,862	7,062	200	3%
5	Other Outpatient Visits	58,895	88,394	29,499	50%
	<b>Total Other Hospital Outpatient Visits</b>	<b>173,956</b>	<b>181,434</b>	<b>7,478</b>	<b>4%</b>
<b>N. Hospital Full Time Equivalent Employees</b>					
1	Total Nursing FTEs	616.4	666.6	50.2	8%
2	Total Physician FTEs	117.0	122.4	5.4	5%
3	Total Non-Nursing and Non-Physician FTEs	1,417.6	1,348.9	-68.7	-5%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>2,151.0</b>	<b>2,137.9</b>	<b>-13.1</b>	<b>-1%</b>

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2015					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Outpatient Surgical Procedures</b>					
1	Bridgeport Hospital	9,494	8,900	-594	-6%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>9,494</b>	<b>8,900</b>	<b>-594</b>	<b>-6%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Bridgeport Hospital	4,278	4,145	-133	-3%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>4,278</b>	<b>4,145</b>	<b>-133</b>	<b>-3%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	Bridgeport Hospital	73,906	76,274	2,368	3%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>73,906</b>	<b>76,274</b>	<b>2,368</b>	<b>3%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$395,362,847	\$438,394,231	\$43,031,384	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$122,306,782	\$141,330,892	\$19,024,110	16%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.94%	32.24%	1.30%	4%
4	DISCHARGES	6,958	7,920	962	14%
5	CASE MIX INDEX (CMI)	1.59206	1.64680	0.05474	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	11,077.55348	13,042.65600	1,965.10252	18%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,040.96	\$10,836.05	(\$204.90)	-2%
8	PATIENT DAYS	50,222	56,895	6,673	13%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,435.32	\$2,484.07	\$48.74	2%
10	AVERAGE LENGTH OF STAY	7.2	7.2	(0.0)	0%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$233,806,171	\$241,849,912	\$8,043,741	3%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$37,180,232	\$39,619,572	\$2,439,340	7%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.90%	16.38%	0.48%	3%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	59.14%	55.17%	-3.97%	-7%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,114.76028	4,369.24386	254.48359	6%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,035.82	\$9,067.83	\$32.01	0%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$629,169,018	\$680,244,143	\$51,075,125	8%
18	TOTAL ACCRUED PAYMENTS	\$159,487,014	\$180,950,464	\$21,463,450	13%
19	TOTAL ALLOWANCES	\$469,682,004	\$499,293,679	\$29,611,675	6%

<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b><u>NON-GOVERNMENT INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$203,888,134	\$214,836,674	\$10,948,540	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$85,266,636	\$103,455,045	\$18,188,409	21%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.82%	48.16%	6.33%	15%
4	DISCHARGES	5,161	5,639	478	9%
5	CASE MIX INDEX (CMI)	1.27940	1.28301	0.00361	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,602.98340	7,234.89339	631.90999	10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$12,913.35	\$14,299.46	\$1,386.11	11%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,872.39)	(\$3,463.41)	(\$1,591.01)	85%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$12,363,386)	(\$25,057,368)	(\$12,693,982)	103%
10	PATIENT DAYS	21,689	24,080	2,391	11%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,931.33	\$4,296.31	\$364.97	9%
12	AVERAGE LENGTH OF STAY	4.2	4.3	0.1	2%
<b><u>NON-GOVERNMENT OUTPATIENT</u></b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$340,964,989	\$333,257,720	(\$7,707,269)	-2%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$112,735,268	\$124,025,751	\$11,290,483	10%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	33.06%	37.22%	4.15%	13%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	167.23%	155.12%	-12.11%	-7%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	8,630.81276	8,747.29741	116.48466	1%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$13,061.95	\$14,178.75	\$1,116.80	9%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$4,026.13)	(\$5,110.92)	(\$1,084.79)	27%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$34,748,800)	(\$44,706,722)	(\$9,957,922)	29%
<b><u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u></b>					
21	TOTAL ACCRUED CHARGES	\$544,853,123	\$548,094,394	\$3,241,271	1%
22	TOTAL ACCRUED PAYMENTS	\$198,001,904	\$227,480,796	\$29,478,892	15%
23	TOTAL ALLOWANCES	\$346,851,219	\$320,613,598	(\$26,237,621)	-8%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$47,112,186)	(\$69,764,090)	(\$22,651,904)	48%
<b><u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u></b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$485,798,950	\$481,291,196	(\$4,507,754)	-1%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$308,406,459	\$287,018,071	(\$21,388,388)	-7%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$177,392,491	\$194,273,125	\$16,880,634	10%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	36.52%	40.36%	3.85%	

<b>BRIDGEPORT HOSPITAL</b>					
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<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>C.</b>	<b><u>UNINSURED</u></b>				
	<b><u>UNINSURED INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$8,164,273	\$20,207,327	\$12,043,054	148%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,903,873	\$10,449,109	\$8,545,236	449%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.32%	51.71%	28.39%	122%
4	DISCHARGES	215	785	570	265%
5	CASE MIX INDEX (CMI)	1.18129	1.03671	(0.14458)	-12%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	253.97735	813.81735	559.84000	220%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,496.23	\$12,839.62	\$5,343.39	71%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$5,417.12	\$1,459.83	(\$3,957.29)	-73%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$3,544.72	(\$2,003.57)	(\$5,548.30)	-157%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$900,280	(\$1,630,542)	(\$2,530,822)	-281%
11	PATIENT DAYS	881	3,075	2,194	249%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,161.04	\$3,398.08	\$1,237.05	57%
13	AVERAGE LENGTH OF STAY	4.1	3.9	(0.2)	-4%
	<b><u>UNINSURED OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$37,791,733	\$33,171,524	(\$4,620,209)	-12%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$11,963,371	\$16,413,766	\$4,450,395	37%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.66%	49.48%	17.83%	56%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	462.89%	164.16%	-298.74%	-65%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	995.21692	1,288.62399	293.40707	29%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,020.87	\$12,737.44	\$716.57	6%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$1,041.08	\$1,441.31	\$400.23	38%
21	MEDICARE - UNINSURED OP PMT / OPED	(\$2,985.05)	(\$3,669.60)	(\$684.56)	23%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,970,770)	(\$4,728,739)	(\$1,757,969)	59%
	<b><u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$45,956,006	\$53,378,851	\$7,422,845	16%
24	TOTAL ACCRUED PAYMENTS	\$13,867,244	\$26,862,875	\$12,995,631	94%
25	TOTAL ALLOWANCES	\$32,088,762	\$26,515,976	(\$5,572,786)	-17%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,070,491)	(\$6,359,282)	(\$4,288,791)	207%

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b><u>MEDICAID INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$230,209,572	\$222,828,904	(\$7,380,668)	-3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$49,876,097	\$40,320,958	(\$9,555,139)	-19%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.67%	18.10%	-3.57%	-16%
4	DISCHARGES	6,057	6,240	183	3%
5	CASE MIX INDEX (CMI)	1.07163	1.06882	(0.00281)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,490.86291	6,669.43680	178.57389	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,684.05	\$6,045.63	(\$1,638.42)	-21%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,229.30	\$8,253.83	\$3,024.52	58%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,356.91	\$4,790.42	\$1,433.51	43%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$21,789,236	\$31,949,403	\$10,160,167	47%
11	PATIENT DAYS	29,184	28,455	(729)	-2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,709.02	\$1,417.01	(\$292.01)	-17%
13	AVERAGE LENGTH OF STAY	4.8	4.6	(0.3)	-5%
<b><u>MEDICAID OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$286,369,150	\$307,573,351	\$21,204,201	7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$42,640,833	\$43,186,014	\$545,181	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.89%	14.04%	-0.85%	-6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	124.39%	138.03%	13.64%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	7,534.60391	8,613.14522	1,078.54131	14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,659.33	\$5,013.97	(\$645.37)	-11%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,402.62	\$9,164.79	\$1,762.17	24%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,376.49	\$4,053.87	\$677.38	20%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$25,440,490	\$34,916,545	\$9,476,056	37%
<b><u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u></b>					
23	TOTAL ACCRUED CHARGES	\$516,578,722	\$530,402,255	\$13,823,533	3%
24	TOTAL ACCRUED PAYMENTS	\$92,516,930	\$83,506,972	(\$9,009,958)	-10%
25	TOTAL ALLOWANCES	\$424,061,792	\$446,895,283	\$22,833,491	5%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$47,229,725	\$66,865,948	\$19,636,223	42%

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>E.</b>	<b><u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u></b>				
	<b><u>OTHER MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$12,913.35	\$14,299.46	\$1,386.11	11%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$11,040.96	\$10,836.05	(\$204.90)	-2%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$13,061.95	\$14,178.75	\$1,116.80	9%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$9,035.82	\$9,067.83	\$32.01	0%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>F.</b>	<b><u>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</u></b>				
	<b><u>TOTAL MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$230,209,572	\$222,828,904	(\$7,380,668)	-3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$49,876,097	\$40,320,958	(\$9,555,139)	-19%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.67%	18.10%	-3.57%	-16%
4	DISCHARGES	6,057	6,240	183	3%
5	CASE MIX INDEX (CMI)	1.07163	1.06882	(0.00281)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,490.86291	6,669.43680	178.57389	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,684.05	\$6,045.63	(\$1,638.42)	-21%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,229.30	\$8,253.83	\$3,024.52	58%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,356.91	\$4,790.42	\$1,433.51	43%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$21,789,236	\$31,949,403	\$10,160,167	47%
11	PATIENT DAYS	29,184	28,455	(729)	-2%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,709.02	\$1,417.01	(\$292.01)	-17%
13	AVERAGE LENGTH OF STAY	4.8	4.6	(0.3)	-5%
	<b><u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$286,369,150	\$307,573,351	\$21,204,201	7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$42,640,833	\$43,186,014	\$545,181	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.89%	14.04%	-0.85%	-6%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	124.39%	138.03%	13.64%	11%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	7,534.60391	8,613.14522	1,078.54131	14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,659.33	\$5,013.97	(\$645.37)	-11%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,402.62	\$9,164.79	\$1,762.17	24%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,376.49	\$4,053.87	\$677.38	20%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$25,440,490	\$34,916,545	\$9,476,056	37%
	<b><u>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$516,578,722	\$530,402,255	\$13,823,533	3%
24	TOTAL ACCRUED PAYMENTS	\$92,516,930	\$83,506,972	(\$9,009,958)	-10%
25	TOTAL ALLOWANCES	\$424,061,792	\$446,895,283	\$22,833,491	5%



<b>BRIDGEPORT HOSPITAL</b>					
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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2014</b>	<b>FY 2015</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>G. <u>CHAMPUS / TRICARE</u></b>					
<b><u>CHAMPUS / TRICARE INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$1,194,141	\$410,349	(\$783,792)	-66%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$184,899	\$91,862	(\$93,037)	-50%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	15.48%	22.39%	6.90%	45%
4	DISCHARGES	31	16	(15)	-48%
5	CASE MIX INDEX (CMI)	1.13051	0.86005	(0.27046)	-24%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	35.04581	13.76080	(21.28501)	-61%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,275.92	\$6,675.63	\$1,399.71	27%
8	PATIENT DAYS	140	42	(98)	-70%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,320.71	\$2,187.19	\$866.48	66%
10	AVERAGE LENGTH OF STAY	4.5	2.6	(1.9)	-42%
<b><u>CHAMPUS / TRICARE OUTPATIENT</u></b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,284,733	\$836,199	(\$448,534)	-35%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$546,488	\$181,050	(\$365,438)	-67%
<b><u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u></b>					
13	TOTAL ACCRUED CHARGES	\$2,478,874	\$1,246,548	(\$1,232,326)	-50%
14	TOTAL ACCRUED PAYMENTS	\$731,387	\$272,912	(\$458,475)	-63%
15	TOTAL ALLOWANCES	\$1,747,487	\$973,636	(\$773,851)	-44%
<b>H. <u>OTHER DATA</u></b>					
1	OTHER OPERATING REVENUE	\$5,236,454	\$6,414,248	\$1,177,794	22%
2	TOTAL OPERATING EXPENSES	\$426,496,000	\$443,456,000	\$16,960,000	4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<b><u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u></b>					
4	CHARITY CARE (CHARGES)	\$13,389,500	\$13,728,345	\$338,845	3%
5	BAD DEBTS (CHARGES)	\$55,466,000	\$36,400,755	(\$19,065,245)	-34%
6	UNCOMPENSATED CARE (CHARGES)	\$68,855,500	\$50,129,100	(\$18,726,400)	-27%
7	COST OF UNCOMPENSATED CARE	\$22,422,348	\$16,190,179	(\$6,232,170)	-28%
<b><u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u></b>					
8	TOTAL ACCRUED CHARGES	\$516,578,722	\$530,402,255	\$13,823,533	3%
9	TOTAL ACCRUED PAYMENTS	\$92,516,930	\$83,506,972	(\$9,009,958)	-10%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$168,220,519	\$171,303,837	\$3,083,318	2%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$75,703,589	\$87,796,865	\$12,093,276	16%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$830,654,694	\$876,470,158	\$45,815,464	6%
2	TOTAL INPATIENT PAYMENTS	\$257,634,414	\$285,198,757	\$27,564,343	11%
3	TOTAL INPATIENT PAYMENTS / CHARGES	31.02%	32.54%	1.52%	5%
4	TOTAL DISCHARGES	18,207	19,815	1,608	9%
5	TOTAL CASE MIX INDEX	1.32951	1.36062	0.03111	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	24,206.44560	26,960.74699	2,754.30139	11%
7	TOTAL OUTPATIENT CHARGES	\$862,425,043	\$883,517,182	\$21,092,139	2%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	103.82%	100.80%	-3.02%	-3%
9	TOTAL OUTPATIENT PAYMENTS	\$193,102,821	\$207,012,387	\$13,909,566	7%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.39%	23.43%	1.04%	5%
11	TOTAL CHARGES	\$1,693,079,737	\$1,759,987,340	\$66,907,603	4%
12	TOTAL PAYMENTS	\$450,737,235	\$492,211,144	\$41,473,909	9%
13	TOTAL PAYMENTS / TOTAL CHARGES	26.62%	27.97%	1.34%	5%
14	PATIENT DAYS	101,235	109,472	8,237	8%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$626,766,560	\$661,633,484	\$34,866,924	6%
2	INPATIENT PAYMENTS	\$172,367,778	\$181,743,712	\$9,375,934	5%
3	GOVT. INPATIENT PAYMENTS / CHARGES	27.50%	27.47%	-0.03%	0%
4	DISCHARGES	13,046	14,176	1,130	9%
5	CASE MIX INDEX	1.34934	1.39150	0.04216	3%
6	CASE MIX ADJUSTED DISCHARGES	17,603.46220	19,725.85360	2,122.39140	12%
7	OUTPATIENT CHARGES	\$521,460,054	\$550,259,462	\$28,799,408	6%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	83.20%	83.17%	-0.03%	0%
9	OUTPATIENT PAYMENTS	\$80,367,553	\$82,986,636	\$2,619,083	3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.41%	15.08%	-0.33%	-2%
11	TOTAL CHARGES	\$1,148,226,614	\$1,211,892,946	\$63,666,332	6%
12	TOTAL PAYMENTS	\$252,735,331	\$264,730,348	\$11,995,017	5%
13	TOTAL PAYMENTS / CHARGES	22.01%	21.84%	-0.17%	-1%
14	PATIENT DAYS	79,546	85,392	5,846	7%
15	TOTAL GOVERNMENT DEDUCTIONS	\$895,491,283	\$947,162,598	\$51,671,315	6%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	7.2	7.2	(0.0)	0%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.2	4.3	0.1	2%
3	UNINSURED	4.1	3.9	(0.2)	-4%
4	MEDICAID	4.8	4.6	(0.3)	-5%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	4.5	2.6	(1.9)	-42%
7	TOTAL AVERAGE LENGTH OF STAY	5.6	5.5	(0.0)	-1%

<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$1,693,079,737	\$1,759,987,340	\$66,907,603	4%
2	TOTAL GOVERNMENT DEDUCTIONS	\$895,491,283	\$947,162,598	\$51,671,315	6%
3	UNCOMPENSATED CARE	\$68,855,500	\$50,129,100	(\$18,726,400)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$177,392,491	\$194,273,125	\$16,880,634	10%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$1,141,739,274	\$1,191,564,823	\$49,825,549	4%
7	TOTAL ACCRUED PAYMENTS	\$551,340,463	\$568,422,517	\$17,082,054	3%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$551,340,463	\$568,422,517	\$17,082,054	3%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3256435305	0.3229696624	(0.0026738681)	-1%
11	COST OF UNCOMPENSATED CARE	\$22,422,348	\$16,190,179	(\$6,232,170)	-28%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$75,703,589	\$87,796,865	\$12,093,276	16%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$98,125,937	\$103,987,044	\$5,861,107	6%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$25,440,490	\$34,916,545	\$9,476,056	37%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$2,070,491)	(\$6,359,282)	(\$4,288,791)	207%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$23,369,999	\$28,557,264	\$5,187,265	22%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$11,362,275)	(\$26,136,895)	(\$14,774,620)	130.03%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$439,374,962	\$466,074,249	\$26,699,287	6.08%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,693,079,737	\$1,759,987,341	\$66,907,604	3.95%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$687,500	\$750,000	\$62,500	9.09%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$69,543,000	\$50,879,100	(\$18,663,900)	-26.84%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$203,888,134	\$214,836,674	\$10,948,540
2	MEDICARE	\$395,362,847	438,394,231	\$43,031,384
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$230,209,572	222,828,904	(\$7,380,668)
4	MEDICAID	\$230,209,572	222,828,904	(\$7,380,668)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$1,194,141	410,349	(\$783,792)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,164,273	20,207,327	\$12,043,054
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$626,766,560</b>	<b>\$661,633,484</b>	<b>\$34,866,924</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$830,654,694</b>	<b>\$876,470,158</b>	<b>\$45,815,464</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$340,964,989	\$333,257,720	(\$7,707,269)
2	MEDICARE	\$233,806,171	241,849,912	\$8,043,741
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$286,369,150	307,573,351	\$21,204,201
4	MEDICAID	\$286,369,150	307,573,351	\$21,204,201
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$1,284,733	836,199	(\$448,534)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$37,791,733	33,171,524	(\$4,620,209)
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$521,460,054</b>	<b>\$550,259,462</b>	<b>\$28,799,408</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$862,425,043</b>	<b>\$883,517,182</b>	<b>\$21,092,139</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$544,853,123	\$548,094,394	\$3,241,271
2	TOTAL MEDICARE	\$629,169,018	\$680,244,143	\$51,075,125
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$516,578,722	\$530,402,255	\$13,823,533
4	TOTAL MEDICAID	\$516,578,722	\$530,402,255	\$13,823,533
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$2,478,874	\$1,246,548	(\$1,232,326)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$45,956,006	\$53,378,851	\$7,422,845
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$1,148,226,614</b>	<b>\$1,211,892,946</b>	<b>\$63,666,332</b>
	<b>TOTAL CHARGES</b>	<b>\$1,693,079,737</b>	<b>\$1,759,987,340</b>	<b>\$66,907,603</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$85,266,636	\$103,455,045	\$18,188,409
2	MEDICARE	\$122,306,782	141,330,892	\$19,024,110
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$49,876,097	40,320,958	(\$9,555,139)
4	MEDICAID	\$49,876,097	40,320,958	(\$9,555,139)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$184,899	91,862	(\$93,037)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,903,873	10,449,109	\$8,545,236
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$172,367,778</b>	<b>\$181,743,712</b>	<b>\$9,375,934</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$257,634,414</b>	<b>\$285,198,757</b>	<b>\$27,564,343</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$112,735,268	\$124,025,751	\$11,290,483
2	MEDICARE	\$37,180,232	39,619,572	\$2,439,340
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$42,640,833	43,186,014	\$545,181
4	MEDICAID	\$42,640,833	43,186,014	\$545,181
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$546,488	181,050	(\$365,438)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$11,963,371	16,413,766	\$4,450,395
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$80,367,553</b>	<b>\$82,986,636</b>	<b>\$2,619,083</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$193,102,821</b>	<b>\$207,012,387</b>	<b>\$13,909,566</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$198,001,904	\$227,480,796	\$29,478,892
2	TOTAL MEDICARE	\$159,487,014	\$180,950,464	\$21,463,450
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$92,516,930	\$83,506,972	(\$9,009,958)
4	TOTAL MEDICAID	\$92,516,930	\$83,506,972	(\$9,009,958)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$731,387	\$272,912	(\$458,475)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$13,867,244	\$26,862,875	\$12,995,631
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$252,735,331</b>	<b>\$264,730,348</b>	<b>\$11,995,017</b>
	<b>TOTAL PAYMENTS</b>	<b>\$450,737,235</b>	<b>\$492,211,144</b>	<b>\$41,473,909</b>

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12.04%	12.21%	0.16%
2	MEDICARE	23.35%	24.91%	1.56%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13.60%	12.66%	-0.94%
4	MEDICAID	13.60%	12.66%	-0.94%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.07%	0.02%	-0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.48%	1.15%	0.67%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>37.02%</b>	<b>37.59%</b>	<b>0.57%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>49.06%</b>	<b>49.80%</b>	<b>0.74%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	20.14%	18.94%	-1.20%
2	MEDICARE	13.81%	13.74%	-0.07%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.91%	17.48%	0.56%
4	MEDICAID	16.91%	17.48%	0.56%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.08%	0.05%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.23%	1.88%	-0.35%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>30.80%</b>	<b>31.26%</b>	<b>0.47%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>50.94%</b>	<b>50.20%</b>	<b>-0.74%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.92%	21.02%	2.10%
2	MEDICARE	27.13%	28.71%	1.58%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11.07%	8.19%	-2.87%
4	MEDICAID	11.07%	8.19%	-2.87%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.04%	0.02%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%	2.12%	1.70%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>38.24%</b>	<b>36.92%</b>	<b>-1.32%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>57.16%</b>	<b>57.94%</b>	<b>0.78%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.01%	25.20%	0.19%
2	MEDICARE	8.25%	8.05%	-0.20%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.46%	8.77%	-0.69%
4	MEDICAID	9.46%	8.77%	-0.69%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.12%	0.04%	-0.08%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.65%	3.33%	0.68%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>17.83%</b>	<b>16.86%</b>	<b>-0.97%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>42.84%</b>	<b>42.06%</b>	<b>-0.78%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,161	5,639	478
2	MEDICARE	6,958	7,920	962
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,057	6,240	183
4	MEDICAID	6,057	6,240	183
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	31	16	(15)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	215	785	570
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>13,046</b>	<b>14,176</b>	<b>1,130</b>
	<b>TOTAL DISCHARGES</b>	<b>18,207</b>	<b>19,815</b>	<b>1,608</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21,689	24,080	2,391
2	MEDICARE	50,222	56,895	6,673
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	29,184	28,455	(729)
4	MEDICAID	29,184	28,455	(729)
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	140	42	(98)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	881	3,075	2,194
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>79,546</b>	<b>85,392</b>	<b>5,846</b>
	<b>TOTAL PATIENT DAYS</b>	<b>101,235</b>	<b>109,472</b>	<b>8,237</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.2	4.3	0.1
2	MEDICARE	7.2	7.2	(0.0)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.8	4.6	(0.3)
4	MEDICAID	4.8	4.6	(0.3)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	4.5	2.6	(1.9)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.1	3.9	(0.2)
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>6.1</b>	<b>6.0</b>	<b>(0.1)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>5.6</b>	<b>5.5</b>	<b>(0.0)</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.27940	1.28301	0.00361
2	MEDICARE	1.59206	1.64680	0.05474
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.07163	1.06882	(0.00281)
4	MEDICAID	1.07163	1.06882	(0.00281)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.13051	0.86005	(0.27046)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.18129	1.03671	(0.14458)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.34934</b>	<b>1.39150</b>	<b>0.04216</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.32951</b>	<b>1.36062</b>	<b>0.03111</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$485,798,950	\$481,291,196	(\$4,507,754)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$308,406,459	\$287,018,071	(\$21,388,388)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$177,392,491	\$194,273,125	\$16,880,634
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	36.52%	40.36%	3.85%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$13,389,500	\$13,728,345	\$338,845
9	BAD DEBTS	\$55,466,000	\$36,400,755	(\$19,065,245)
10	TOTAL UNCOMPENSATED CARE	\$68,855,500	\$50,129,100	(\$18,726,400)
11	TOTAL OTHER OPERATING REVENUE	\$5,236,454	\$6,414,248	\$1,177,794
12	TOTAL OPERATING EXPENSES	\$426,496,000	\$443,456,000	\$16,960,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,602.98340	7,234.89339	631.90999
2	MEDICARE	11,077.55348	13,042.65600	1,965.10252
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,490.86291	6,669.43680	178.57389
4	MEDICAID	6,490.86291	6,669.43680	178.57389
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	35.04581	13.76080	(21.28501)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	253.97735	813.81735	559.84000
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>17,603.46220</b>	<b>19,725.85360</b>	<b>2,122.39140</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>24,206.44560</b>	<b>26,960.74699</b>	<b>2,754.30139</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,630.81276	8,747.29741	116.48466
2	MEDICARE	4,114.76028	4,369.24386	254.48359
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7,534.60391	8,613.14522	1,078.54131
4	MEDICAID	7,534.60391	8,613.14522	1,078.54131
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	33.35178	32.60440	-0.74737
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	995.21692	1,288.62399	293.40707
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>11,682.71596</b>	<b>13,014.99349</b>	<b>1,332.27752</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>20,313.52872</b>	<b>21,762.29090</b>	<b>1,448.76218</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,913.35	\$14,299.46	\$1,386.11
2	MEDICARE	\$11,040.96	\$10,836.05	(\$204.90)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,684.05	\$6,045.63	(\$1,638.42)
4	MEDICAID	\$7,684.05	\$6,045.63	(\$1,638.42)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,275.92	\$6,675.63	\$1,399.71
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,496.23	\$12,839.62	\$5,343.39
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$9,791.70</b>	<b>\$9,213.48</b>	<b>(\$578.22)</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$10,643.22</b>	<b>\$10,578.30</b>	<b>(\$64.92)</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,061.95	\$14,178.75	\$1,116.80
2	MEDICARE	\$9,035.82	\$9,067.83	\$32.01
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,659.33	\$5,013.97	(\$645.37)
4	MEDICAID	\$5,659.33	\$5,013.97	(\$645.37)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$16,385.57	\$5,552.93	(\$10,832.64)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,020.87	\$12,737.44	\$716.57
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$6,879.18</b>	<b>\$6,376.23</b>	<b>(\$502.95)</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$9,506.12</b>	<b>\$9,512.44</b>	<b>\$6.32</b>

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
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REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$25,440,490	\$34,916,545	\$9,476,056
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$2,070,491)	(\$6,359,282)	(\$4,288,791)
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$23,369,999</b>	<b>\$28,557,264</b>	<b>\$5,187,265</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$1,693,079,737	\$1,759,987,340	\$66,907,603
2	TOTAL GOVERNMENT DEDUCTIONS	\$895,491,283	\$947,162,598	\$51,671,315
3	UNCOMPENSATED CARE	\$68,855,500	\$50,129,100	(\$18,726,400)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$177,392,491	\$194,273,125	\$16,880,634
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$1,141,739,274	\$1,191,564,823	\$49,825,549
7	TOTAL ACCRUED PAYMENTS	\$551,340,463	\$568,422,517	\$17,082,054
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$551,340,463	\$568,422,517	\$17,082,054
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3256435305	0.3229696624	(0.0026738681)
11	COST OF UNCOMPENSATED CARE	\$22,422,348	\$16,190,179	(\$6,232,170)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$75,703,589	\$87,796,865	\$12,093,276
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$98,125,937	\$103,987,044	\$5,861,107
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	41.82%	48.16%	6.33%
2	MEDICARE	30.94%	32.24%	1.30%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	21.67%	18.10%	-3.57%
4	MEDICAID	21.67%	18.10%	-3.57%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	15.48%	22.39%	6.90%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	23.32%	51.71%	28.39%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>27.50%</b>	<b>27.47%</b>	<b>-0.03%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>31.02%</b>	<b>32.54%</b>	<b>1.52%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	33.06%	37.22%	4.15%
2	MEDICARE	15.90%	16.38%	0.48%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.89%	14.04%	-0.85%
4	MEDICAID	14.89%	14.04%	-0.85%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	42.54%	21.65%	-20.89%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	31.66%	49.48%	17.83%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>15.41%</b>	<b>15.08%</b>	<b>-0.33%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>22.39%</b>	<b>23.43%</b>	<b>1.04%</b>



BRIDGEPORT HOSPITAL				
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REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$450,737,235	\$492,211,144	\$41,473,909
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$450,737,235</b>	<b>\$492,211,144</b>	<b>\$41,473,909</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$11,362,275)	(\$26,136,895)	(\$14,774,620)
4	<b>CALCULATED NET REVENUE</b>	<b>\$494,840,960</b>	<b>\$466,074,249</b>	<b>(\$28,766,711)</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$439,374,962	\$466,074,249	\$26,699,287
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$55,465,998</b>	<b>\$0</b>	<b>(\$55,465,998)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$1,693,079,737	\$1,759,987,340	\$66,907,603
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$1,693,079,737</b>	<b>\$1,759,987,340</b>	<b>\$66,907,603</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,693,079,737	\$1,759,987,341	\$66,907,604
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>(\$1)</b>	<b>(\$1)</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$68,855,500	\$50,129,100	(\$18,726,400)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$687,500	\$750,000	\$62,500
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$69,543,000</b>	<b>\$50,879,100</b>	<b>(\$18,663,900)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$69,543,000	\$50,879,100	(\$18,663,900)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>BRIDGEPORT HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2015</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2015</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$214,836,674
2	MEDICARE	438,394,231
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	222,828,904
4	MEDICAID	222,828,904
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	410,349
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	20,207,327
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$661,633,484</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$876,470,158</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$333,257,720
2	MEDICARE	241,849,912
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	307,573,351
4	MEDICAID	307,573,351
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	836,199
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	33,171,524
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$550,259,462</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$883,517,182</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$548,094,394
2	TOTAL GOVERNMENT ACCRUED CHARGES	1,211,892,946
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$1,759,987,340</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$103,455,045
2	MEDICARE	141,330,892
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	40,320,958
4	MEDICAID	40,320,958
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	91,862
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,449,109
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$181,743,712</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$285,198,757</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$124,025,751
2	MEDICARE	39,619,572
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	43,186,014
4	MEDICAID	43,186,014
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	181,050
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	16,413,766
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$82,986,636</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$207,012,387</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$227,480,796
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	264,730,348
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$492,211,144</b>

<b>BRIDGEPORT HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2015</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2015</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,639
2	MEDICARE	7,920
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,240
4	MEDICAID	6,240
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	16
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	785
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>14,176</b>
	<b>TOTAL DISCHARGES</b>	<b>19,815</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,28301
2	MEDICARE	1,64680
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,06882
4	MEDICAID	1,06882
5	OTHER MEDICAL ASSISTANCE	0,00000
6	CHAMPUS / TRICARE	0,86005
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,03671
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1,39150</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1,36062</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$481,291,196
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$287,018,071
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$194,273,125
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	40.36%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$13,728,345
9	BAD DEBTS	\$36,400,755
10	TOTAL UNCOMPENSATED CARE	\$50,129,100
11	TOTAL OTHER OPERATING REVENUE	\$6,414,248
12	TOTAL OPERATING EXPENSES	\$443,456,000

<b>BRIDGEPORT HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
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<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2015</b>
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$492,211,144
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$492,211,144</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$26,136,895)
	<b>CALCULATED NET REVENUE</b>	<b>\$466,074,249</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$466,074,249
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$1,759,987,340
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$1,759,987,340</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,759,987,341
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$50,129,100
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$750,000
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$50,879,100</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$50,879,100
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 650 - HOSPITAL UNCOMPENSATED CARE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2014</b>	<b>ACTUAL FY 2015</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. <u>Hospital Charity Care (from HRS Report 500)</u></b>					
1	Number of Applicants	1,972	2,985	1,013	51%
2	Number of Approved Applicants	1,763	1,970	207	12%
3	<b>Total Charges (A)</b>	<b>\$13,389,500</b>	<b>\$13,728,345</b>	<b>\$338,845</b>	<b>3%</b>
4	<b>Average Charges</b>	<b>\$7,595</b>	<b>\$6,969</b>	<b>(\$626)</b>	<b>-8%</b>
5	Ratio of Cost to Charges (RCC)	0.269721	0.251129	(0.018592)	-7%
6	<b>Total Cost</b>	<b>\$3,611,429</b>	<b>\$3,447,586</b>	<b>(\$163,844)</b>	<b>-5%</b>
7	<b>Average Cost</b>	<b>\$2,048</b>	<b>\$1,750</b>	<b>(\$298)</b>	<b>-15%</b>
8	Charity Care - Inpatient Charges	\$2,743,485	\$3,832,447	\$1,088,962	40%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	4,256,896	5,464,756	1,207,860	28%
10	Charity Care - Emergency Department Charges	6,389,119	4,431,142	(1,957,977)	-31%
11	<b>Total Charges (A)</b>	<b>\$13,389,500</b>	<b>\$13,728,345</b>	<b>\$338,845</b>	<b>3%</b>
12	Charity Care - Number of Patient Days	3,334	2,652	(682)	-20%
13	Charity Care - Number of Discharges	511	643	132	26%
14	Charity Care - Number of Outpatient ED Visits	8,044	9,508	1,464	18%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	5,222	8,213	2,991	57%
<b>B. <u>Hospital Bad Debts (from HRS Report 500)</u></b>					
1	Bad Debts - Inpatient Services	\$30,104,291	\$10,161,748	(\$19,942,543)	-66%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	16,483,756	14,489,819	(1,993,937)	-12%
3	Bad Debts - Emergency Department	8,877,953	11,749,188	2,871,235	32%
4	<b>Total Bad Debts (A)</b>	<b>\$55,466,000</b>	<b>\$36,400,755</b>	<b>(\$19,065,245)</b>	<b>-34%</b>
<b>C. <u>Hospital Uncompensated Care (from HRS Report 500)</u></b>					
1	Charity Care (A)	\$13,389,500	\$13,728,345	\$338,845	3%
2	Bad Debts (A)	55,466,000	36,400,755	(19,065,245)	-34%
3	<b>Total Uncompensated Care (A)</b>	<b>\$68,855,500</b>	<b>\$50,129,100</b>	<b>(\$18,726,400)</b>	<b>-27%</b>
4	Uncompensated Care - Inpatient Services	\$32,847,776	\$13,994,195	(\$18,853,581)	-57%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	20,740,652	19,954,575	(786,077)	-4%
6	Uncompensated Care - Emergency Department	15,267,072	16,180,330	913,258	6%
7	<b>Total Uncompensated Care (A)</b>	<b>\$68,855,500</b>	<b>\$50,129,100</b>	<b>(\$18,726,400)</b>	<b>-27%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					

<b>BRIDGEPORT HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2015</b>					
<b>REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015		
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	<b><u>COMMERCIAL - ALL PAYERS</u></b>				
1	Total Gross Revenue	\$485,798,950	\$481,291,196	(\$4,507,754)	-1%
2	Total Contractual Allowances	\$177,392,491	\$194,273,125	\$16,880,634	10%
	<b>Total Accrued Payments (A)</b>	<b>\$308,406,459</b>	<b>\$287,018,071</b>	<b>(\$21,388,388)</b>	<b>-7%</b>
	<b>Total Discount Percentage</b>	<b>36.52%</b>	<b>40.36%</b>	<b>3.85%</b>	<b>11%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
<b>A.</b>	<b><u>Gross and Net Revenue</u></b>			
1	Inpatient Gross Revenue	\$790,434,049	\$830,654,694	\$876,470,158
2	Outpatient Gross Revenue	\$722,085,518	\$862,425,043	\$883,517,182
3	Total Gross Patient Revenue	\$1,512,519,567	\$1,693,079,737	\$1,759,987,340
4	Net Patient Revenue	\$418,827,000	\$439,375,000	\$466,074,000
<b>B.</b>	<b><u>Total Operating Expenses</u></b>			
1	Total Operating Expense	\$409,234,000	\$426,496,000	\$443,456,000
<b>C.</b>	<b><u>Utilization Statistics</u></b>			
1	Patient Days	97,440	101,235	109,472
2	Discharges	18,453	18,207	19,815
3	Average Length of Stay	5.3	5.6	5.5
4	Equivalent (Adjusted) Patient Days (EPD)	186,454	206,342	219,824
0	Equivalent (Adjusted) Discharges (ED)	35,310	37,110	39,789
<b>D.</b>	<b><u>Case Mix Statistics</u></b>			
1	Case Mix Index	1.31207	1.32951	1.36062
2	Case Mix Adjusted Patient Days (CMAPD)	127,848	134,593	148,950
3	Case Mix Adjusted Discharges (CMAD)	24,212	24,206	26,961
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	244,642	274,334	299,098
5	Case Mix Adjusted Equivalent Discharges (CMAED)	46,330	49,339	54,138
<b>E.</b>	<b><u>Gross Revenue Per Statistic</u></b>			
1	Total Gross Revenue per Patient Day	\$15,523	\$16,724	\$16,077
2	Total Gross Revenue per Discharge	\$81,966	\$92,991	\$88,821
3	Total Gross Revenue per EPD	\$8,112	\$8,205	\$8,006
4	Total Gross Revenue per ED	\$42,835	\$45,623	\$44,233
5	Total Gross Revenue per CMAEPD	\$6,183	\$6,172	\$5,884
6	Total Gross Revenue per CMAED	\$32,647	\$34,315	\$32,509
7	Inpatient Gross Revenue per EPD	\$4,239	\$4,026	\$3,987
8	Inpatient Gross Revenue per ED	\$22,385	\$22,383	\$22,028

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
<b>F. Net Revenue Per Statistic</b>				
1	Net Patient Revenue per Patient Day	\$4,298	\$4,340	\$4,257
2	Net Patient Revenue per Discharge	\$22,697	\$24,132	\$23,521
3	Net Patient Revenue per EPD	\$2,246	\$2,129	\$2,120
4	Net Patient Revenue per ED	\$11,861	\$11,840	\$11,714
5	Net Patient Revenue per CMAEPD	\$1,712	\$1,602	\$1,558
6	Net Patient Revenue per CMAED	\$9,040	\$8,905	\$8,609
<b>G. Operating Expense Per Statistic</b>				
1	Total Operating Expense per Patient Day	\$4,200	\$4,213	\$4,051
2	Total Operating Expense per Discharge	\$22,177	\$23,425	\$22,380
3	Total Operating Expense per EPD	\$2,195	\$2,067	\$2,017
4	Total Operating Expense per ED	\$11,590	\$11,493	\$11,145
5	Total Operating Expense per CMAEPD	\$1,673	\$1,555	\$1,483
6	Total Operating Expense per CMAED	\$8,833	\$8,644	\$8,191
<b>H. Nursing Salary and Fringe Benefits Expense</b>				
1	Nursing Salary Expense	\$53,194,778	\$53,745,825	\$58,048,061
2	Nursing Fringe Benefits Expense	\$13,655,559	\$13,784,956	\$15,773,784
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$66,850,337</b>	<b>\$67,530,781</b>	<b>\$73,821,845</b>
<b>I. Physician Salary and Fringe Expense</b>				
1	Physician Salary Expense	\$11,387,101	\$13,355,748	\$14,415,875
2	Physician Fringe Benefits Expense	\$2,563,288	\$2,616,814	\$2,895,000
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$13,950,389</b>	<b>\$15,972,562</b>	<b>\$17,310,875</b>
<b>J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>				
1	Non-Nursing, Non-Physician Salary Expense	\$83,395,121	\$86,349,427	\$84,157,064
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$31,797,153	\$31,703,230	\$31,916,216
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$115,192,274</b>	<b>\$118,052,657</b>	<b>\$116,073,280</b>



BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2013</u>	<u>ACTUAL FY 2014</u>	<u>ACTUAL FY 2015</u>
<b>K.</b>	<b>Total Salary and Fringe Benefits Expense</b>			
1	Total Salary Expense	\$147,977,000	\$153,451,000	\$156,621,000
2	Total Fringe Benefits Expense	\$48,016,000	\$48,105,000	\$50,585,000
<b>3</b>	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$195,993,000</b>	<b>\$201,556,000</b>	<b>\$207,206,000</b>

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2015				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	606.5	616.4	666.6
2	Total Physician FTEs	107.2	117.0	122.4
3	Total Non-Nursing, Non-Physician FTEs	1412.3	1417.6	1348.9
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>2,126.0</b>	<b>2,151.0</b>	<b>2,137.9</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$87,708	\$87,193	\$87,081
2	Nursing Fringe Benefits Expense per FTE	\$22,515	\$22,364	\$23,663
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$110,223</b>	<b>\$109,557</b>	<b>\$110,744</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$106,223	\$114,152	\$117,777
2	Physician Fringe Benefits Expense per FTE	\$23,911	\$22,366	\$23,652
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$130,134</b>	<b>\$136,518</b>	<b>\$141,429</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$59,049	\$60,912	\$62,389
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$22,514	\$22,364	\$23,661
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$81,564</b>	<b>\$83,276</b>	<b>\$86,050</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$69,603	\$71,339	\$73,259
2	Total Fringe Benefits Expense per FTE	\$22,585	\$22,364	\$23,661
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$92,189</b>	<b>\$93,703</b>	<b>\$96,920</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,011	\$1,991	\$1,893
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,621	\$11,070	\$10,457
3	Total Salary and Fringe Benefits Expense per EPD	\$1,051	\$977	\$943
4	Total Salary and Fringe Benefits Expense per ED	\$5,551	\$5,431	\$5,208
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$801	\$735	\$693
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,230	\$4,085	\$3,827