OFFICE OF HEALTH CARE ACCESS TWELVE MONTHS ACTUAL FILING WATERBURY HOSPITAL WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION** (1) (2) (3) (4) (6) (5) FY 2014 FY 2015 AMOUNT LINE DESCRIPTION DIFFERENCE **ACTUAL ACTUAL** DIFFERENCE **ASSETS Current Assets:** Cash and Cash Equivalents \$27,492,453 \$16,313,006 (\$11,179,447)-41% Short Term Investments \$0 0% Accounts Receivable (Less: Allowance for Doubtful Accounts) \$26.853.209 \$27.695.330 \$842.121 3% 0% Current Assets Whose Use is Limited for Current Liabilities \$0 \$0 5 Due From Affiliates \$0 \$0 \$0 0% 0% 6 Due From Third Party Payers \$0 \$0 \$0 -12% 7 \$3,694,606 \$3,254,037 (\$440,569)Inventories of Supplies Prepaid Expenses \$1,493,653 \$1,401,820 (\$91,833)-6% Other Current Assets \$3,603,082 \$3,708,354 \$105,272 3% **Total Current Assets** \$63,137,003 \$52,372,547 (\$10,764,456) -17% В. Noncurrent Assets Whose Use is Limited: Held by Trustee \$46,117,761 \$43,411,397 (\$2,706,364)-6% Board Designated for Capital Acquisition \$3.315.500 (\$3,315,500)-100% 2 \$0 0% Funds Held in Escrow \$0 \$0 \$0 Other Noncurrent Assets Whose Use is Limited \$0 \$0 \$0 0% Total Noncurrent Assets Whose Use is Limited: \$49,433,261 \$43,411,397 (\$6,021,864) -12% Interest in Net Assets of Foundation 0% \$0 \$0 \$0 \$11,017,660 -5% Long Term Investments \$10,521,190 (\$496,470)Other Noncurrent Assets \$522,138 \$447,767 -14% (\$74,371)C. **Net Fixed Assets:** Property, Plant and Equipment \$267,838,747 \$273,590,166 \$5,751,419 2% Less: Accumulated Depreciation \$236,509,671 \$243,205,726 \$6,696,055 3% Property, Plant and Equipment, Net \$31,329,076 \$30,384,440 (\$944,636)-3% \$0 \$0 \$0 0% Construction in Progress **Total Net Fixed Assets** -3% \$31,329,076 \$30,384,440 (\$944,636)**Total Assets** \$155,439,138 \$137,137,341 (\$18,301,797) -12% LIABILITIES AND NET ASSETS

\$21,414,080

\$7,138,794

\$24,179,749

\$3.538.095

\$2,765,669

(\$3.600.699)

13%

-50%

Current Liabilities:

Accounts Payable and Accrued Expenses

Salaries, Wages and Payroll Taxes

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015 REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION** (1) (4) (2) (3) (5) (6) FY 2014 FY 2015 AMOUNT LINE DESCRIPTION DIFFERENCE DIFFERENCE **ACTUAL ACTUAL** 76% Due To Third Party Payers \$4,171,981 \$7,348,352 \$3,176,371 3% Due To Affiliates \$2,916,986 \$3,000,067 \$83,081 Current Portion of Long Term Debt \$493,776 \$516,408 \$22,632 5% Current Portion of Notes Payable \$416.447 \$1,440,902 \$1.024.455 246% Other Current Liabilities 0% \$0 \$0 **Total Current Liabilities** \$36,552,064 \$40.023.573 \$3,471,509 9% B. Long Term Debt: -2% Bonds Payable (Net of Current Portion) \$23,789,744 \$23,273,336 (\$516,408)797% Notes Payable (Net of Current Portion) \$404,144 \$3,623,371 \$3,219,227 **Total Long Term Debt** \$24,193,888 \$26,896,707 \$2,702,819 11% 3 Accrued Pension Liability \$0 \$0 \$0 0% Other Long Term Liabilities \$25,163,807 \$25,870,676 \$706.869 3% **Total Long Term Liabilities** \$49.357.695 \$52,767,383 \$3,409,688 7% Interest in Net Assets of Affiliates or Joint Ventures 0% \$0 \$0 \$0 Net Assets: -185% 1 Unrestricted Net Assets or Equity \$11,890,055 (\$10,077,417) (\$21,967,472) Temporarily Restricted Net Assets \$8,729,527 \$8,220,369 (\$509,158)-6% -6% Permanently Restricted Net Assets \$48,909,797 \$46,203,433 (\$2,706,364)Total Net Assets -36% \$69,529,379 \$44,346,385 (\$25,182,994) Total Liabilities and Net Assets \$155,439,138 \$137,137,341 (\$18,301,797) -12%

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2015 REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION** (1) (2) (4) (5) (6)FY 2014 FY 2015 **AMOUNT** LINE DESCRIPTION **ACTUAL ACTUAL DIFFERENCE** DIFFERENCE **Operating Revenue:** 1% Total Gross Patient Revenue \$905.475.426 \$916.257.719 \$10.782.293 2 Less: Allowances \$679,028,309 \$705,161,881 \$26,133,572 4% -9% 3 Less: Charity Care \$5,839,743 \$5,323,038 (\$516,705)Less: Other Deductions \$8,287,736 12% \$9,321,152 \$1.033.416 **Total Net Patient Revenue** \$212.319.638 \$196.451.648 (\$15,867,990)-7% 1% 5 Provision for Bad Debts \$3,692,986 \$3,747,762 \$54,776 Net Patient Service Revenue less provision for bad debts \$208.626.652 \$192,703,886 (\$15.922.766) -8% -46% 6 Other Operating Revenue \$2,671,751 \$1,447,376 (\$1,224,375)7 Net Assets Released from Restrictions \$5,542,491 \$5,014,429 -10% (\$528,062)\$216,840,894 -8% **Total Operating Revenue** \$199,165,691 (\$17,675,203) **Operating Expenses:** Salaries and Wages -4% 1 \$83,908,937 \$80,843,782 (\$3,065,155)2 Fringe Benefits \$23,614,272 \$26,172,827 \$2,558,555 11% 3 Physicians Fees \$17,306,125 \$11,845,274 (\$5,460,851)-32% 4 Supplies and Drugs \$29,780,875 \$28,836,195 (\$944,680)-3% -4% 5 Depreciation and Amortization \$7.077.295 \$6.812.424 (\$264,871)0% 6 **Bad Debts** \$0 \$0 \$0 Interest Expense \$1,196,363 \$1,330,630 \$134,267 11% -1% 8 Malpractice Insurance Cost \$6,226,587 \$6,135,436 (\$91,151)Other Operating Expenses \$47,342,839 \$48,976,298 \$1,633,459 3% -3% **Total Operating Expenses** \$216,453,293 \$210,952,866 (\$5,500,427)Income/(Loss) From Operations \$387,601 (\$11,787,175)(\$12,174,776) -3141% C. **Non-Operating Revenue:** Income from Investments -2% \$1.819.310 \$1,788,788 (\$30,522)-46% 2 Gifts, Contributions and Donations \$1,240,261 \$669,966 (\$570,295)3 Other Non-Operating Gains/(Losses) \$0 \$0 \$0 0% -20% **Total Non-Operating Revenue** \$3,059,571 \$2,458,754 (\$600,817)Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) \$3,447,172 -371% (\$9,328,421)(\$12,775,593)

\$76,602

(\$289,566)

(\$366,168)

-478%

Other Adjustments: Unrealized Gains/(Losses)

	WA	TERBURY HOSPITAL			
	TWELVE	MONTHS ACTUAL FII	LING		
	F	ISCAL YEAR 2015			
	REPORT 150 - HOSPITAL S	TATEMENT OF OPER	ATIONS INFORMA	TION	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$76,602	(\$289,566)	(\$366,168)	-478%
	Excess/(Deficiency) of Revenue Over Expenses	\$3,523,774	(\$9,617,987)	(\$13,141,761)	-373%
	Principal Payments	\$1,173,560	\$1,131,501	(\$42,059)	-4%

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
l.	GROSS REVENUE BY PAYER				
Α.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$222,469,378	\$215,740,955	(\$6,728,423)	-3%
2	MEDICARE MANAGED CARE	\$54,188,572	\$62,559,918	\$8,371,346	15%
3	MEDICAID	\$101,019,874	\$104,268,326	\$3,248,452	3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$709,650	\$880,448	\$170,798	24%
6	COMMERCIAL INSURANCE	\$49,831,628	\$49,763,946	(\$67,682)	0%
7	NON-GOVERNMENT MANAGED CARE	\$65,806,280	\$63,405,760	(\$2,400,520)	-4%
8	WORKER'S COMPENSATION	\$6,059,908	\$5,970,848	(\$89,060)	-1%
9	SELF- PAY/UNINSURED	\$3,441,689	\$2,869,380	(\$572,309)	-17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$503,526,979	\$505,459,581	\$1,932,602	0%
B.	OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$113,197,942	\$112,236,352	(\$961,590)	-1%
2	MEDICARE MANAGED CARE	\$35,096,066	\$38,026,082	\$2,930,016	8%
3	MEDICAID	\$88,713,154	\$99,862,668	\$11,149,514	13%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$521,724	\$693,299	\$171,575	33%
6	COMMERCIAL INSURANCE	\$54,393,435	\$59,751,928	\$5,358,493	10%
7	NON-GOVERNMENT MANAGED CARE	\$92,580,908	\$85,877,841	(\$6,703,067)	-7%
8	WORKER'S COMPENSATION	\$10,179,985	\$8,417,810	(\$1,762,175)	-17%
9 10	SELF- PAY/UNINSURED SAGA	\$7,265,233	\$5,932,157	(\$1,333,076)	-18%
11	OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
11	TOTAL OUTPATIENT GROSS REVENUE	\$401,948,447	\$410,798,137	\$8,849,690	2%
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	TOTAL GROSS REVENUE	4007.007.000	****	(47 000 040)	
1	MEDICARE TRADITIONAL	\$335,667,320	\$327,977,307	(\$7,690,013)	-2%
2	MEDICARE MANAGED CARE	\$89,284,638	\$100,586,000	\$11,301,362	13%
3	MEDICAID	\$189,733,028	\$204,130,994	\$14,397,966	8%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,231,374	\$1,573,747	\$342,373	28%
6	COMMERCIAL INSURANCE	\$104,225,063	\$109,515,874	\$5,290,811	5%
7	NON-GOVERNMENT MANAGED CARE	\$158,387,188	\$149,283,601	(\$9,103,587)	-6%
8	WORKER'S COMPENSATION	\$16,239,893	\$14,388,658	(\$1,851,235)	-11%
9	SELF- PAY/UNINSURED	\$10,706,922	\$8,801,537	(\$1,905,385)	-18%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$905,475,426	\$916,257,718	\$10,782,292	1%
II.	NET REVENUE BY PAYER				
Α.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$53,510,829	\$43,294,385	(\$10,216,444)	-19%
2	MEDICARE MANAGED CARE	\$13,041,951	\$13,500,923	\$458,972	4%
3	MEDICAID	\$20,019,856	\$21,903,510	\$1,883,654	9%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
E	CHAMPUS/TRICARE	\$156,975	\$126,256	(\$30,719)	-20%
5	CHAMP 03/TRICARE	Ψ100,31	Ψ120,200	(ψου, π το)	<u>-20</u> /0

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$21,476,571	\$0	(\$21,476,571)	-100%
8	WORKER'S COMPENSATION	\$5,703,690	\$3,746,182	(\$1,957,508)	-34%
9	SELF- PAY/UNINSURED	\$323,524	\$179,431	(\$144,093)	-45%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$132,618,946	\$116,089,850	(\$16,529,096)	-12%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$16,674,960	\$19,226,909	\$2,551,949	15%
2	MEDICARE MANAGED CARE	\$4,914,119	\$6,437,131	\$1,523,012	31%
3	MEDICAID	\$11,593,083	\$17,436,349	\$5,843,266	50%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$121,718	\$128,676	\$6,958	6%
6	COMMERCIAL INSURANCE	\$15,476,890	\$33,201,230	\$17,724,340	115%
7	NON-GOVERNMENT MANAGED CARE	\$19,703,240	\$0	(\$19,703,240)	-100%
8	WORKER'S COMPENSATION	\$8,961,307	\$6,662,100	(\$2,299,207)	-26%
9	SELF- PAY/UNINSURED	\$615,098	\$1,216,331	\$601,233	98%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$78,060,415	\$84,308,726	\$6,248,311	8%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$70,185,789	\$62,521,294	(\$7,664,495)	-11%
2	MEDICARE MANAGED CARE	\$17,956,070	\$19,938,054	\$1,981,984	11%
3	MEDICAID	\$31,612,939	\$39,339,859	\$7,726,920	24%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$278,693	\$254,932	(\$23,761)	-9%
6	COMMERCIAL INSURANCE	\$33,862,440	\$66,540,393	\$32,677,953	97%
7	NON-GOVERNMENT MANAGED CARE	\$41,179,811	\$0	(\$41,179,811)	-100%
8	WORKER'S COMPENSATION	\$14,664,997	\$10,408,282	(\$4,256,715)	-29%
9	SELF- PAY/UNINSURED	\$938,622	\$1,395,762	\$457,140	49%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
-	TOTAL NET REVENUE	\$210,679,361	\$200,398,576	(\$10,280,785)	-5%
	TOTAL NET KEVENGE	Ψ210,010,001	Ψ200,000,010	(ψ10,200,100)	070
III.	STATISTICS BY PAYER				
					_
A.	<u>DISCHARGES</u>				
1	MEDICARE TRADITIONAL	4,334	4,231	(103)	-2%
2	MEDICARE MANAGED CARE	1,062	1,172	110	10%
3	MEDICAID	3,186	3,324	138	4%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	22	22	0	0%
6	COMMERCIAL INSURANCE	1,290	2,730	1,440	112%
7	NON-GOVERNMENT MANAGED CARE	1,615	0	(1,615)	-100%
8	WORKER'S COMPENSATION	71	66	(5)	-7%
9	SELF- PAY/UNINSURED	113	101	(12)	-11%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	11,693	11,646	(47)	0%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	25,315	23,422	(1,893)	-7%
2	MEDICARE MANAGED CARE	5,593	5,868	275	5%
		14,750	14,685	(65)	0%

(1)	(2)	(3)	(4)	(5)	(6)
(.,	(-)	FY 2014	FY 2015	AMOUNT	<u>(0)</u> %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	76 DIFFERENCE
LINE	DESCRIPTION	AOTOAL	ACTUAL	DITTERCHOL	DILITERCE
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	80	119	39	49%
6	COMMERCIAL INSURANCE	5,393	10,802	5,409	100%
7	NON-GOVERNMENT MANAGED CARE	6,378	0	(6,378)	-100%
8	WORKER'S COMPENSATION	218	180	(38)	-17%
9	SELF- PAY/UNINSURED	355	314	(41)	-12%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	58,082	55,390	(2,692)	-5%
_	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	59,310	45,711	(13,599)	-23%
2	MEDICARE MANAGED CARE	16,896	15,227	(1,669)	-10%
3	MEDICAID MANAGED CARE	53,305	43,529	(9,776)	-18%
4	MEDICAID MANAGED CARE	0	0	0 (9)	0% -3%
5 6	CHAMPUS/TRICARE COMMERCIAL INSURANCE	296 25,672	287 21,350	(4,322)	-3% -17%
7	NON-GOVERNMENT MANAGED CARE	25,672 36,780	30.904	(4,322) (5,876)	-17% -16%
8	WORKER'S COMPENSATION	1,468	1,184	(284)	-10 <i>%</i>
9	SELF- PAY/UNINSURED	5,635	4,052	(1,583)	-28%
10	SAGA	0,000	0	(1,500)	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	199,362	162,244	(37,118)	-19%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS				
A.	REVENUE				
1	MEDICARE TRADITIONAL	\$24,779,139	\$25,998,849	\$1,219,710	5%
2	MEDICARE MANAGED CARE	\$7,142,805	\$8,691,426	\$1,548,621	22%
3	MEDICAID	\$40,869,394	\$45,185,452	\$4,316,058	11%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$0	\$0	\$0	0%
6	COMMERCIAL INSURANCE	\$10,881,818	\$12,566,804	\$1,684,986	15%
7	NON-GOVERNMENT MANAGED CARE	\$15,348,563	\$14,973,064	(\$375,499)	-2%
8	WORKER'S COMPENSATION	\$974,976	\$1,068,332	\$93,356	10%
9 10	SELF- PAY/UNINSURED SAGA	\$5,579,542	\$4,699,133	(\$880,409) \$0	-16% 0%
11	OTHER	\$0 \$0	\$0 \$0	\$0 \$0	0%
' '	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	ΨΟ	ΨΟ	ΨΟ	0 70
	GROSS REVENUE	\$105,576,237	\$112 192 DED	\$7 606 922	7%
	EMERGENCY DEPARTMENT OUTPATIENT NET	φ103,370,237	\$113,183,060	\$7,606,823	1 70
	REVENUE				
1	MEDICARE TRADITIONAL	\$4,956,378	\$5,064,977	\$108,599	2%
2	MEDICARE MANAGED CARE	\$1,408,144	\$1,630,579	\$222,435	16%
3	MEDICAID	\$7,174,758	\$7,640,799	\$466,041	6%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$0	\$0	\$0	0%
6	COMMERCIAL INSURANCE	\$3,544,170	\$4,122,962	\$578,792	16%
7	NON-GOVERNMENT MANAGED CARE	\$4,239,081	\$4,177,129	(\$61,952)	-1%
8	WORKER'S COMPENSATION	\$478,083	\$670,705	\$192,622	40%
9	SELF- PAY/UNINSURED	\$135,195	\$206,918	\$71,723	53%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	NET REVENUE	\$21,935,809	\$23,514,069	\$1,578,260	7%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	7,306	6,767	(539)	-7%
2	MEDICARE MANAGED CARE	2,018	2,186	168	8%
3	MEDICAID	21,273	20,667	(606)	-3%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	0	0	0	0%
6	COMMERCIAL INSURANCE	4,665	4,542	(123)	-3%
7	NON-GOVERNMENT MANAGED CARE	6,000	5,081	(919)	-15%
8	WORKER'S COMPENSATION	665	642	(23)	-3%
9	SELF- PAY/UNINSURED	3,660	2,688	(972)	-27%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	45,587	42,573	(3,014)	-7%

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
I.	OPERATING EXPENSE BY CATEGORY				
Α.	Salaries & Wages:				
1	Nursing Salaries	\$32,573,504	\$31,988,923	(\$584,581)	-2%
2	Physician Salaries	\$3,568,677	\$5,125,182	\$1,556,505	44%
3	Non-Nursing, Non-Physician Salaries	\$47,766,756	\$43,729,677	(\$4,037,079)	-8%
	Total Salaries & Wages	\$83,908,937	\$80,843,782	(\$3,065,155)	-4%
В.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$9,167,076	\$10,356,276	\$1,189,200	13%
2	Physician Fringe Benefits	\$1,004,323	\$1,659,256	\$654,933	65%
3	Non-Nursing, Non-Physician Fringe Benefits	\$13,442,873	\$14,157,295	\$714,422	5%
	Total Fringe Benefits	\$23,614,272	\$26,172,827	\$2,558,555	11%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$767,316	\$786,335	\$19,019	2%
2	Physician Fees	\$17,306,125	\$11,845,274	(\$5,460,851)	-32%
3	Non-Nursing, Non-Physician Fees	\$249,794	\$677,513	\$427,719	171%
	Total Contractual Labor Fees	\$18,323,235	\$13,309,122	(\$5,014,113)	-27%
	Madical Complies and Dhamasautical Cost				
D.	Medical Supplies and Pharmaceutical Cost: Medical Supplies	\$24.049.4E4	CO4 O44 ECO	/¢726 002\	20/
2	Pharmaceutical Costs	\$21,948,451 \$7,832,424	\$21,211,568 \$7,624,627	(\$736,883) (\$207,797)	-3% -3%
	Total Medical Supplies and Pharmaceutical Cost	\$29,780,875	\$28,836,195	(\$944,680)	-3%
E.	Depreciation and Amortization:				
<u></u>	Depreciation-Building	\$2,431,780	\$2,326,109	(\$105,671)	-4%
2	Depreciation-Equipment	\$4,489,306	\$4,350,719	(\$138,587)	-3%
3	Amortization	\$156,209	\$135,596	(\$20,613)	-13%
	Total Depreciation and Amortization	\$7,077,295	\$6,812,424	(\$264,871)	-4%
	D- I D-Idea				
F	Bad Debts:	CO	¢0	# 0	00/
11	Bad Debts	\$0	\$0	\$0	0%
G.	Interest Expense:				
11	Interest Expense	\$1,196,363	\$1,330,630	\$134,267	11%
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$6,226,587	\$6,135,436	(\$91,151)	-1%
I.	Utilities:				
 1	Water	\$159,833	\$173,077	\$13,244	8%
2	Natural Gas	\$963,082	\$1,161,657	\$198,575	21%
3	Oil	\$161,439	(\$10,066)	(\$171,505)	-106%
4	Electricity	\$1,983,176	\$1,925,251	(\$57,925)	-3%
5	Telephone	\$256,246	\$241,429	(\$14,817)	-6%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$3,523,776	\$3,491,348	(\$32,428)	-1%
J.	Business Expenses:				
1	Accounting Fees	\$228,328	\$213,198	(\$15,130)	-7%
2	Legal Fees	\$1,686,113	\$2,045,976	\$359,863	21%
3	Consulting Fees	\$2,149,906	\$3,229,903	\$1,079,997	50%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
4	Dues and Membership	\$324,590	\$234,649	(\$89,941)	-28%
5	Equipment Leases	\$1,815,388	\$2,104,334	\$288,946	16%
6	Building Leases	\$784,064	\$712,454	(\$71,610)	-9%
7	Repairs and Maintenance	\$2,856,241	\$3,099,068	\$242,827	9%
8	Insurance	\$390,712	\$398,381	\$7,669	2%
9	Travel	\$87,321	\$73,963	(\$13,358)	-15%
10	Conferences	\$85,865	\$93,053	\$7,188	8%
11	Property Tax	\$363,986	\$293,305	(\$70,681)	-19%
12	General Supplies	\$1,379,688	\$924,593	(\$455,095)	-33%
13	Licenses and Subscriptions	\$0	\$0	\$0	0%
14 15	Postage and Shipping Advertising	\$239,339 \$676,288	\$453,221 \$726,420	\$213,882 \$50,132	89% 7%
16	Corporate parent/system fees	\$076,288	\$720,420	\$50,132 \$0	0%
17	Computer Software	\$0 \$0	\$0 \$0	\$0 \$0	0%
18	Computer Conware Computer hardware & small equipment	\$0 \$0	\$0 \$0	\$0	0%
19	Dietary / Food Services	\$0	\$0	\$0	0%
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%
21	Billing & Collection / Bank Fees	\$0	\$0	\$0	0%
22	Recruiting / Employee Education & Recognition	\$0	\$0	\$0	0%
23	Laundry / Linen	\$0	\$0	\$0	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$24,678,265	\$23,735,219	(\$943,046)	-4%
	Total Business Expenses	\$37,746,094	\$38,337,737	\$591,643	2%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$5,055,859	\$5,683,365	\$627,506	12%
	T. (10 () F. (10	4040 450 000	\$040.050.000	(05 500 407)	20/
	Total Operating Expenses - All Expense Categories*	\$216,453,293	\$210,952,866	(\$5,500,427)	-3%
	*AK.The total operating expenses amount above mus	st agree with the to	otal operating expe	enses amount on R	eport 150
II.	OPERATING EXPENSE BY DEPARTMENT				
	<u> </u>				
A.	General Services:				
1	General Administration	\$13,695,185	\$14,397,967	\$702,782	5%
2	General Accounting	\$1,280,841	\$1,250,267	(\$30,574)	-2%
3	Patient Billing & Collection	\$3,176,850	\$2,219,705	(\$957,145)	-30%
4	Admitting / Registration Office	\$1,407,813	\$1,220,863	(\$186,950)	-13%
5	Data Processing	\$8,694,564	\$8,539,259	(\$155,305)	-2%
6 7	Communications Personnel	\$0 \$1,182,434	\$0 \$1,206,191	\$0 \$23,757	0% 2%
8	Public Relations	\$1,182,434 \$635,112	\$1,206,191 \$755,330	\$23,757 \$120,218	
9	Purchasing	\$1,147,651	\$1,306,539	\$158,888	14%
10	Dietary and Cafeteria	\$3,739,040	\$3,750,048	\$11,008	0%
11	Housekeeping	\$6,068,010	\$6,230,635	\$162,625	3%
12	Laundry & Linen	\$1,156,990	\$1,047,622	(\$109,368)	-9%
13	Operation of Plant	\$6,516,608	\$6,360,254	(\$156,354)	-2%
14	Security	\$1,342,356	\$1,255,064	(\$87,292)	-7%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$1,357,997	\$1,208,735	(\$149,262)	-11%

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
(1)	(2)	FY 2014	FY 2015	AMOUNT	(0) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DITTERCE	DITTERENCE
17	Pharmacy Department	\$10,215,385	\$10,488,422	\$273,037	3%
18	Other General Services	\$34,798,506	\$35,950,807	\$1,152,301	3%
10	Total General Services	\$96,415,342	\$97,187,708	\$772,366	1%
	Total General Gervices	Ψ30,413,342	Ψ31,101,100	Ψ112,300	1 70
В.	Professional Services:				
1	Medical Care Administration	\$8,385,281	\$8,294,135	(\$91,146)	-1%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,197,631	\$964,595	(\$233,036)	-19%
4	Medical Records	\$1,570,973	\$1,840,465	\$269,492	17%
5	Social Service	\$1,479,531	\$1,677,604	\$198,073	13%
6	Other Professional Services	\$10,039,283	\$6,936,011	(\$3,103,272)	-31%
_	Total Professional Services	\$22,672,699	\$19,712,810	(\$2,959,889)	-13%
				•	
C.	Special Services:				
1	Operating Room	\$15,325,034	\$14,896,297	(\$428,737)	-3%
2	Recovery Room	\$976,484	\$913,365	(\$63,119)	-6%
3	Anesthesiology	\$543,619	\$374,077	(\$169,542)	-31%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$2,599,472	\$2,559,513	(\$39,959)	-2%
6	Diagnostic Ultrasound	\$452,949	\$434,003	(\$18,946)	-4%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$861,223	\$640,741	(\$220,482)	-26%
9	CT Scan	\$816,652	\$773,385	(\$43,267)	-5%
10	Laboratory	\$7,672,412	\$7,503,780	(\$168,632)	-2%
11	Blood Storing/Processing	\$1,578,038	\$1,304,931	(\$273,107)	-17%
12	Cardiology	\$7,511,103	\$7,008,314	(\$502,789)	-7%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$498,906	\$348,925	(\$149,981)	-30%
15	Occupational Therapy	\$117	\$0	(\$117)	-100%
16	Speech Pathology	\$223	\$506	\$283	127%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,592,509	\$1,586,746	(\$5,763)	0%
19	Pulmonary Function Intravenous Therapy	\$26,954	\$22,565	(\$4,389)	-16%
20 21	Shock Therapy	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
22	Psychiatry / Psychology Services	\$5,750,640	\$6,003,563	\$252,923	4%
	Renal Dialysis	\$336,663	\$349,799	\$13,136	4%
24	Emergency Room	\$6,811,375	\$6,868,479	\$57,104	1%
25	MRI	\$1,143,350	\$1,080,494	(\$62,856)	-5%
26	PET Scan	\$1,143,330	\$1,000,494	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0 \$0	0%
28	Endoscopy	\$1,765,220	\$1,624,812	(\$140,408)	-8%
29	Sleep Center	\$563,731	\$502,647	(\$61,084)	-11%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$250,174	\$257,580	\$7,406	3%
32	Occupational Therapy / Physical Therapy	\$1,334,817	\$1,338,787	\$3,970	0%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$427,181	\$410,608	(\$16,573)	-4%
	Total Special Services	\$58,838,846	\$56,803,917	(\$2,034,929)	-3%
	-				
D.	Routine Services:				
1	Medical & Surgical Units	\$16,851,430	\$16,371,125	(\$480,305)	-3%
2	Intensive Care Unit	\$4,877,994	\$4,228,167	(\$649,827)	-13%
3	Coronary Care Unit	\$1,777,924	\$1,454,314	(\$323,610)	-18%

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
	,	FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
4	Psychiatric Unit	\$4,622,256	\$4,887,887	\$265,631	6%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,430,148	\$4,669,693	\$239,545	5%
7	Newborn Nursery Unit	\$1,460,906	\$1,557,460	\$96,554	7%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$2,161,866	\$2,031,590	(\$130,276)	-6%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	Total Routine Services	\$36,182,524	\$35,200,236	(\$982,288)	-3%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$2,343,882	\$2,048,195	(\$295,687)	-13%
	Total Operating Expenses - All Departments*	\$216,453,293	\$210,952,866	(\$5,500,427)	-3%
	*A E. The total operating expenses amount above	must agree with the to	otal operating exp	enses amount on l	Report 150.

	WATE	RBURY HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
(.,	(-)	ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	<u>FY 2013</u>	FY 2014	FY 2015					
Α.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$207,698,016	\$208,626,652	\$192,703,886					
2	Other Operating Revenue	9,034,648	8,214,242	6,461,805					
3	Total Operating Revenue	\$216,732,664	\$216,840,894	\$199,165,691					
4	Total Operating Expenses	213,170,829	216,453,293	210,952,866					
5	Income/(Loss) From Operations	\$3,561,835	\$387,601	(\$11,787,175)					
6	Total Non-Operating Revenue	2,172,878	3,136,173	2,169,188					
7	Excess/(Deficiency) of Revenue Over Expenses	\$5,734,713	\$3,523,774	(\$9,617,987)					
В.	Profitability Summary								
1	Hospital Operating Margin	1.63%	0.18%	-5.85%					
2	Hospital Non Operating Margin	0.99%	1.43%	1.08%					
3	Hospital Total Margin	2.62%	1.60%	-4.78%					
4	Income/(Loss) From Operations	\$3,561,835	\$387,601	(\$11,787,175)					
5	Total Operating Revenue	\$216,732,664	\$216,840,894	\$199,165,691					
6	Total Non-Operating Revenue	\$2,172,878	\$3,136,173	\$2,169,188					
7	Total Revenue	\$218,905,542	\$219,977,067	\$201,334,879					
8	Excess/(Deficiency) of Revenue Over Expenses	\$5,734,713	\$3,523,774	(\$9,617,987)					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$18,667,399	\$11,890,055	(\$10,077,417)					
2	Hospital Total Net Assets	\$74,829,268	\$69,529,379	\$44,346,385					
3	Hospital Change in Total Net Assets	\$3,657,339	(\$5,299,889)	(\$25,182,994)					
4	Hospital Change in Total Net Assets %	105.1%	-7.1%	-36.2%					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.25	0.24	0.23					
2	Total Operating Expenses	\$213,170,829	\$216,453,293	\$210,952,866					
3	Total Gross Revenue	\$857,736,451	\$905,475,426	\$916,257,718					
4	Total Other Operating Revenue	\$9,034,648	\$8,214,242	\$6,461,805					

	WA ⁻	TERBURY HOSPITAL		
	TWELVE	MONTHS ACTUAL FILING		
		FISCAL YEAR 2015		
	REPORT 185 - HOSPITAL FIN	NANCIAL AND STATISTICAL D	ATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	<u>FY 2015</u>
5	Private Payment to Cost Ratio	1.32	1.36	1.23
6	Total Non-Government Payments	\$90,654,562	\$90,645,870	\$78,344,437
7	Total Uninsured Payments	\$2,351,750	\$938,622	\$1,395,762
8	Total Non-Government Charges	\$286,257,087	\$289,559,066	\$281,989,670
9	Total Uninsured Charges	\$14,171,639	\$10,706,922	\$8,801,537
10	Medicare Payment to Cost Ratio	0.82	0.88	0.84
11	Total Medicare Payments	\$80,520,052	\$88,141,859	\$82,459,348
12	Total Medicare Charges	\$399,115,512	\$424,951,958	\$428,563,307
13	Medicaid Payment to Cost Ratio	0.85	0.70	0.84
14	Total Medicaid Payments	\$35,585,404	\$31,612,939	\$39,339,859
15	Total Medicaid Charges	\$170,970,777	\$189,733,028	\$204,130,994
16	Uncompensated Care Cost	\$3,014,287	\$2,212,000	\$1,940,291
17	Charity Care	\$1,472,594	\$5,644,280	\$4,739,178
18	Bad Debts	\$10,783,760	\$3,692,986	\$3,747,762
19	Total Uncompensated Care	\$12,256,354	\$9,337,266	\$8,486,940
20	Uncompensated Care % of Total Expenses	1.4%	1.0%	0.9%
21	Total Operating Expenses	\$213,170,829	\$216,453,293	\$210,952,866
E.	Liquidity Measures Summary			
1	Current Ratio	2	2	1
2	Total Current Assets	\$56,446,772	\$63,137,003	\$52,372,547
3	Total Current Liabilities	\$31,743,159	\$36,552,064	\$40,023,573
4	Days Cash on Hand	42	48	29
5	Cash and Cash Equivalents	\$23,662,300	\$27,492,453	\$16,313,006
6	Short Term Investments	0	0	0

	WATERBURY	Y HOSPITAL							
	TWELVE MONTHS	S ACTUAL FILING							
	FISCAL YEAR 2015 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
(1)	(-)	ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015					
7	Total Cash and Short Term Investments	\$23,662,300	\$27,492,453	\$16,313,006					
8	Total Operating Expenses	\$213,170,829	\$216,453,293	\$210,952,866					
9	Depreciation Expense	\$7,612,970	\$7,077,295	\$6,812,424					
10	Operating Expenses less Depreciation Expense	\$205,557,859	\$209,375,998	\$204,140,442					
11	Days Revenue in Patient Accounts Receivable	39	40	39					
12	Net Patient Accounts Receivable	\$25,010,738	\$26,853,209	\$27,695,330					
13	Due From Third Party Payers	\$0	\$0	\$0					
14	Due To Third Party Payers	\$2,969,391	\$4,171,981	\$7,348,352					
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$22,041,347	\$22,681,228	\$20,346,978					
16	Total Net Patient Revenue	\$207,698,016	\$208,626,652	\$192,703,886					
17	Average Payment Period	56	64	72					
18	Total Current Liabilities	\$31,743,159	\$36,552,064	\$40,023,573					
19	Total Operating Expenses	\$213,170,829	\$216,453,293	\$210,952,866					
20	Depreciation Expense	\$7,612,970	\$7,077,295	\$6,812,424					
21	Total Operating Expenses less Depreciation Expense	\$205,557,859	\$209,375,998	\$204,140,442					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	48.9	44.7	32.3					
2	Total Net Assets	\$74,829,268	\$69,529,379	\$44,346,385					
3	Total Assets	\$153,158,558	\$155,439,138	\$137,137,341					
4	Cash Flow to Total Debt Ratio	23.5	17.5	(4.2)					
5	Excess/(Deficiency) of Revenues Over Expenses	\$5,734,713	\$3,523,774	(\$9,617,987)					
6	Depreciation Expense	\$7,612,970	\$7,077,295	\$6,812,424					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$13,347,683	\$10,601,069	(\$2,805,563)					
8	Total Current Liabilities	\$31,743,159	\$36,552,064	\$40,023,573					
9	Total Long Term Debt	\$25,104,111	\$24,193,888	\$26,896,707					
10	Total Current Liabilities and Total Long Term Debt	\$56,847,270	\$60,745,952	\$66,920,280					

	WATER	BURY HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
(-/	(-)	ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015				
11	Long Term Debt to Capitalization Ratio	25.1	25.8	37.8				
12	Total Long Term Debt	\$25,104,111	\$24,193,888	\$26,896,707				
13	Total Net Assets	\$74,829,268	\$69,529,379	\$44,346,385				
14	Total Long Term Debt and Total Net Assets	\$99,933,379	\$93,723,267	\$71,243,092				
15	Debt Service Coverage Ratio	7.1	5.0	(0.6)				
16	Excess Revenues over Expenses	5,734,713	\$3,523,774	(\$9,617,987)				
17	Interest Expense	1,073,353	\$1,196,363	\$1,330,630				
18	Depreciation and Amortization Expense	7,612,970	\$7,077,295	\$6,812,424				
19	Principal Payments	949,860	\$1,173,560	\$1,131,501				
G.	Other Financial Ratios							
20	Average Age of Plant	30.1	33.4	35.7				
21	Accumulated Depreciation	229,493,366	236,509,671	243,205,726				
22	Depreciation and Amortization Expense	7,612,970	7,077,295	6,812,424				
Н.	Utilization Measures Summary							
1	Patient Days	55,099	58,082	55,390				
2	Discharges	11,847	11,693	11,646				
3	ALOS	4.7	5.0	4.8				
4	Staffed Beds	176	176	180				
5	Available Beds	-	290	282				
6	Licensed Beds	268	393	393				
7	Occupancy of Staffed Beds	85.8%	90.4%	84.3%				
8	Occupancy of Available Beds	56.3%	54.9%	53.8%				
9	Full Time Equivalent Employees	1,209.1	1,151.5	1,120.7				
l.	Hospital Gross Revenue Payer Mix Percentage							
11	Non-Government Gross Revenue Payer Mix Percentage	31.7%	30.8%	29.8%				
2	Medicare Gross Revenue Payer Mix Percentage	46.5%	46.9%	46.8%				

	WATERBUR'	Y HOSPITAL							
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2015								
	REPORT 185 - HOSPITAL FINANCIAL		ΔΤΔ ΔΝΔΙ ΥΟΙΟ						
	KEI OKI 100 - 1100I ITAL I INAKOIAL	AND GIATIOTICAL DI	ATA ANALTOIO						
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2013	FY 2014	FY 2015					
3	Medicaid Gross Revenue Payer Mix Percentage	19.9%	21.0%	22.3%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%					
5	Uninsured Gross Revenue Payer Mix Percentage	1.7%	1.2%	1.0%					
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.2%					
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Gross Revenue (Charges)	\$272,085,448	\$278,852,144	\$273,188,133					
9	Medicare Gross Revenue (Charges)	\$399,115,512	\$424,951,958	\$428,563,307					
10	Medicaid Gross Revenue (Charges)	\$170,970,777	\$189,733,028	\$204,130,994					
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0					
12	Uninsured Gross Revenue (Charges)	\$14,171,639	\$10,706,922	\$8,801,537					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,393,075	\$1,231,374	\$1,573,747					
14	Total Gross Revenue (Charges)	\$857,736,451	\$905,475,426	\$916,257,718					
J.	Hospital Net Revenue Payer Mix Percentage								
1	Non-Government Net Revenue Payer Mix Percentage	42.7%	42.6%	38.4%					
2	Medicare Net Revenue Payer Mix Percentage	38.9%	41.8%	41.1%					
3	Medicaid Net Revenue Payer Mix Percentage	17.2%	15.0%	19.6%					
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%					
5	Uninsured Net Revenue Payer Mix Percentage	1.1%	0.4%	0.7%					
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%					
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Net Revenue (Payments)	\$88,302,812	\$89,707,248	\$76,948,675					
9	Medicare Net Revenue (Payments)	\$80,520,052	\$88,141,859	\$82,459,348					
10	Medicaid Net Revenue (Payments)	\$35,585,404	\$31,612,939	\$39,339,859					
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0					
12	Uninsured Net Revenue (Payments)	\$2,351,750	\$938,622	\$1,395,762					
13	CHAMPUS / TRICARE Net Revenue Payments)	\$263,313	\$278,693	\$254,932					
14	Total Net Revenue (Payments)	\$207,023,331	\$210,679,361	\$200,398,576					
K.	<u>Discharges</u>								
1	Non-Government (Including Self Pay / Uninsured)	3,287	3,089	2,897					
2	Medicare	5,301	5,396	5,403					
		3,234	3,186	3,324					
3 4	Medical Assistance Medicaid								
	Other Medical Assistance	3,234	3,186	3,324					
5		-	- 22	-					
6	CHAMPUS / TRICARE	25	22	22					

	WATE	DRIIDV HOSDITAI							
	WATERBURY HOSPITAL								
		ONTHS ACTUAL FILING							
	FI	SCAL YEAR 2015							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	<u>FY 2015</u>					
7	Uninsured (Included In Non-Government)	144	113	101					
8	Total	11,847	11,693	11,646					
L.	Case Mix Index								
1	Non-Government (Including Self Pay / Uninsured)	1.25950	1.26220	1.25770					
2	Medicare	1.56990	1.51500	1.45920					
3	Medical Assistance	0.96430	1.02160	0.97370					
4	Medicaid	0.96430	1.02160	0.97370					
5	Other Medical Assistance	0.00000	0.00000	0.00000					
6	CHAMPUS / TRICARE	0.81670	0.87480	0.91200					
7	Uninsured (Included In Non-Government)	1.19050	1.05100	1.01220					
8	Total Case Mix Index	1.31687	1.31257	1.26947					
М.	Emergency Department Visits								
1	Emergency Room - Treated and Admitted	7,836	8,097	8,080					
2	Emergency Room - Treated and Discharged	46,520	45,587	42,573					
3	Total Emergency Room Visits	54,356	53,684	50,653					

REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
l		FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	MEDICARE MANAGED CARE				
1.	MEDICARE MANAGED GARE				
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$1,796,693	\$2,482,578	\$685,885	38%
2	Inpatient Payments	\$365,767	\$618,725	\$252,958	69%
3	Outpatient Charges	\$719,609	\$1,869,890	\$1,150,281	160%
4	Outpatient Payments	\$128,633	\$300,296	\$171,663	133%
	Discharges	29	44	15	52%
	Patient Days	153	237	84	55%
	Outpatient Visits (Excludes ED Visits)	340	485	145	43%
	Emergency Department Outpatient Visits	36	101	65	181%
9	Emergency Department Inpatient Admissions	21	35	14	67%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,516,302	\$4,352,468	\$1,836,166	73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$494,400	\$919,021	\$424,621	86%
В.	CIGNA HEALTHCARE				
	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.	044.004.044	\$00.074.005	#0.000.0E4	F 40/
	Inpatient Charges	\$14,901,641	\$22,971,295	\$8,069,654	54%
	Inpatient Payments	\$3,457,737	\$4,768,748	\$1,311,011	38%
4	Outpatient Charges Outpatient Payments	\$10,459,228 \$1,465,677	\$13,442,532 \$2,262,952	\$2,983,304 \$797,275	29% 54%
	Discharges	271	<u> </u>	127	47%
	Patient Days	1,314	2,065	751	57%
	Outpatient Visits (Excludes ED Visits)	4,415	4,760	345	8%
	Emergency Department Outpatient Visits	416	512	96	23%
	Emergency Department Inpatient Admissions	214	326	112	52%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$25,360,869	\$36,413,827	\$11,052,958	44%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,923,414	\$7,031,700	\$2,108,286	43%
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits Emergency Department Inpatient Admissions	0	0	0	0% 0%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$ 0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0	0%

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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
		I			
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$856,592	\$533,648	(\$322,944)	-38%
2	Inpatient Payments	\$157,268	\$82,047	(\$75,221)	-48%
3	Outpatient Charges	\$189,899	\$221,789	\$31,890	17%
4	Outpatient Payments	\$31,257	\$47,551	\$16,294	52%
5	Discharges	11	10	(1)	-9%
6	Patient Days	109	100	(9)	-8%
7	Outpatient Visits (Excludes ED Visits)	24	49	25	104%
8	Emergency Department Outpatient Visits	45 11	60 10	15 (1)	33%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,046,491	\$755,437	(\$291, 054)	-9% -28%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,046,491	\$129,598	(\$58,927)	-26% -31%
	TOTAL INFATIENT & COTFATIENT FATMENTS	\$100,323	ψ129,390	(\$30,921)	-31/0
F.	OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAG	E			
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$15,160,298	\$12,034,933	(\$3,125,365)	-21%
2	Inpatient Payments	\$3,998,820	\$2,792,154	(\$1,206,666)	-30%
3	Outpatient Charges	\$8,886,953	\$5,992,689	(\$2,894,264)	-33%
4	Outpatient Payments	\$1,204,055	\$1,074,807	(\$129,248)	-11%
5	Discharges	311	273	(38)	-12%
6	Patient Days	1,656	1,264	(392)	-24%
7	Outpatient Visits (Excludes ED Visits)	3,785	2,045	(1,740)	-46%
8	Emergency Department Outpatient Visits	559	518	(41)	-7%
9	Emergency Department Inpatient Admissions	275	261	(14)	-5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$24,047,251	\$18,027,622	(\$6,019,629)	-25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,202,875	\$3,866,961	(\$1,335,914)	-26%
H.	WELLCARE OF CONNECTICUT				
п. 1	Inpatient Charges	\$5,927,630	\$7,680,303	\$1,752,673	30%
2	Inpatient Charges Inpatient Payments	\$1,235,408	\$1,672,695	\$437,287	35%
3	Outpatient Charges	\$4,236,587	\$5,777,763	\$1,541,176	36%
4	Outpatient Onlinges Outpatient Payments	\$629,736	\$1,012,832	\$383,096	61%
5	Discharges	135	157	22	16%
6	Patient Days	764	739	(25)	-3%
7	Outpatient Visits (Excludes ED Visits)	2,050	2,096	46	2%
8	Emergency Department Outpatient Visits	512	563	51	10%
9	Emergency Department Inpatient Admissions	125	144	19	15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$10,164,217	\$13,458,066	\$3,293,849	32%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,865,144	\$2,685,527	\$820,383	44%
I.	AETNA				

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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
4	1	* 45, 400, 707	# 40.040.004	* * * * * * * * * *	20/
1	Inpatient Charges	\$15,496,707	\$16,840,091	\$1,343,384	9%
	Inpatient Payments	\$3,817,924	\$3,560,049	(\$257,875)	-7%
	Outpatient Charges	\$10,601,202 \$1,454,008	\$10,716,819 \$1,738,371	\$115,617 \$284,363	1%
	Outpatient Payments Discharges	\$1,454,008	φ1,736,371 289	\$204,303 (15)	20% -5%
6	Patient Days	1,591	1,460	(131)	-8%
7	Outpatient Visits (Excludes ED Visits)	4,262	3,606	(656)	-15%
	Emergency Department Outpatient Visits	450	432	(18)	-4%
	Emergency Department Inpatient Admissions	254	233	(21)	-8%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$26,097,909	\$27,556,910	\$1,459,001	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,271,932	\$5,298,420	\$26,488	1%
			. , ,	. ,	
J.	HUMANA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0	0 \$0	0% 0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
	TOTAL INFATIENT & OUTFATIENT FATMENTS	\$0	φυ	Ψυ	U /0
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0 \$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	UNIVERSAL AMERICAN				
R/	I UNIVERSAL AMERICAN	i l			
M. 1	Inpatient Charges	\$0	\$0	\$0	0%

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REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
	_/	FY 2014	FY 2015	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$49,011	\$17,070	(\$31,941)	-65%
2	Inpatient Payments	\$9,027	\$6,505	(\$2,522)	-28%
3	Outpatient Charges	\$2,588	\$4,600	\$2,012	78%
4	Outpatient Payments	\$753	\$322	(\$431)	-57%
5	Discharges	1	1	0	0%
6	Patient Days	6	3	(3)	-50%
7	Outpatient Visits (Excludes ED Visits)	2	0	(2)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	1	0	(1)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$51,599	\$21,670	(\$29,929)	-58%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,780	\$6,827	(\$2,953)	-30%
II.	TOTAL MEDICARE MANAGED CARE				
11.	TOTAL MEDICANE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$54,188,572	\$62,559,918	\$8,371,346	15%
	TOTAL INPATIENT PAYMENTS	\$13,041,951	\$13,500,923	\$458,972	4%
	TOTAL OUTPATIENT CHARGES	\$35,096,066	\$38,026,082	\$2,930,016	8%
	TOTAL OUTPATIENT PAYMENTS	\$4,914,119	\$6,437,131	\$1,523,012	31%
	TOTAL DISCHARGES	1,062	1,172	110	10%
	TOTAL PATIENT DAYS	5,593	5,868	275	5%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	14,878	13,041	(1,837)	-12%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(, ,	
	VISITS	2,018	2,186	168	8%
	TOTAL EMERGENCY DEPARTMENT INPATIENT	_,;::0	_,.30	. 30	370
	ADMISSIONS	901	1,009	108	12%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$89,284,638	\$100,586,000	\$11,301,362	13%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$17,956,070	\$19,938,054	\$1,981,984	11%

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REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICAID MANAGED CARE				
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
Α.	CONNECTICUT	\$ 0	\$ 0	¢ο	00/
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
3	Outpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
В.	COMMUNITY HEALTH NETWORK OF CT	ФО.	Φ0	ФО.	00/
2	Inpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
3	Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
_					
C.	HEALTHNET OF THE NORTHEAST, INC.				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0% 0%
6 7	Patient Days Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Odipatient Visits Emergency Department Inpatient Admissions	0	0	0	0%
3	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
			-		
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	0/ DIFFEDENCE
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL INI ATILITI & COTT ATILITI TATINLINI	ΨΟ	ΨΟ	ΨΟ	070
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0 \$0	<u> </u>	0% 0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0 \$0	0%
	FIRST CHOICE OF CONNECTICUT, PREFERRED	φυ	φυ	ΨΟ	0 / 0
F.	ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
ы	AETNA				
H.	AETNA Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0 \$0	\$0 \$0	\$0 \$0	0%
3	Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0%
4	Outpatient Charges Outpatient Payments	\$0	\$0 \$0	\$0 \$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
(.)	\-_	FY 2014	FY 2015	AMOUNT	(0)
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

	GREAT	ER WATERBURY HEA	LTH NETWORK		
	TV	WELVE MONTHS ACTU	JAL FILING		
		FISCAL YEAR 20	015		
	REPORT 300 - PARENT CORP	ORATION CONSOLIDA	ATED BALANCE SHE	ET INFORMATION	
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DITTERENCE	DITTERENCE
I.	<u>ASSETS</u>				
Α.	Current Assets:				
		¢24.002.272	¢22.272.002	(\$44,420,200 <u>)</u>	2204
1	Cash and Cash Equivalents	\$34,802,272	\$23,373,992	(\$11,428,280)	-33%
2	Short Term Investments	\$1,420,733	\$1,527,528	\$106,795	8%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts) Current Assets Whose Use is Limited for Current	\$31,329,622	\$32,315,680	\$986,058	3%
4	Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$190,880	\$189,380	(\$1,500)	-1%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,922,673	\$3,461,115	(\$461,558)	-12%
8	Prepaid Expenses	\$1,967,241	\$2,060,247	\$93,006	5%
9	Other Current Assets	\$3,843,762	\$3,837,291	(\$6,471)	0%
	Total Current Assets	\$77,477,183	\$66,765,233	(\$10,711,950)	-14%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$46,117,761	\$43,411,397	(\$2,706,364)	-6%
2	Board Designated for Capital Acquisition	\$3,315,500	\$0	(\$3,315,500)	-100%
3	Funds Held in Escrow	\$32,613	\$31,682	(\$931)	-3%
4	Other Noncurrent Assets Whose Use is Limited	\$0	Φ0	\$0	0%
4	Total Noncurrent Assets Whose Use is	Φ0	\$0	Φ0	0%
	Limited:	\$49,465,874	\$43,443,079	(\$6,022,795)	-12%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$26,937,851	\$25,903,153	(\$1,034,698)	-4%
7	Other Noncurrent Assets	\$2,368,410	\$2,410,157	\$41,747	2%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$286,543,385	\$292,402,087	\$5,858,702	2%
2	Less: Accumulated Depreciation	\$248,520,576	\$256,109,338	\$7,588,762	\$0
	Property, Plant and Equipment, Net	\$38,022,809	\$36,292,749	(\$1,730,060)	-5%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$38,022,809	\$36,292,749	(\$1,730,060)	-5%
	Total Assets	\$194,272,127	\$174,814,371	(\$19,457,756)	-10%
II.	LIABILITIES AND NET ASSETS				
	Commond Linkilliding				
Α.	Current Liabilities:				

GREATER WATERBURY HEALTH NETWORK TWELVE MONTHS ACTUAL FILING

		FISCAL YEAR 20	15		
	REPORT 300 - PARENT CO	RPORATION CONSOLIDA	TED BALANCE SHE	ET INFORMATION	
(1) <u>LINE</u>	(2) <u>DESCRIPTION</u>	(3) FY 2014 <u>ACTUAL</u>	(4) FY 2015 <u>ACTUAL</u>	(5) AMOUNT DIFFERENCE	(6) % <u>DIFFERENCE</u>
1	Accounts Payable and Accrued Expenses	\$23,475,219	\$26,034,893	\$2,559,674	11%
2	Salaries, Wages and Payroll Taxes	\$10,175,574	\$6,161,178	(\$4,014,396)	-39%
3	Due To Third Party Payers	\$4,444,304	\$7,729,230	\$3,284,926	74%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$548,776	\$576,408	\$27,632	5%
6	Current Portion of Notes Payable	\$461,705	\$1,455,894	\$994,189	215%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$39,105,578	\$41,957,603	\$2,852,025	7%
В.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$25,059,744	\$24,483,336	(\$576,408)	-2%
2	Notes Payable (Net of Current Portion)	\$438,984	\$3,647,977	\$3,208,993	731%
	Total Long Term Debt	\$25,498,728	\$28,131,313	\$2,632,585	10%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$25,354,977	\$26,049,588	\$694,611	3%
	Total Long Term Liabilities	\$50,853,705	\$54,180,901	\$3,327,196	7%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$2,716,294	\$2,668,511	(\$47,783)	-2%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	\$43,957,226	\$21,583,554	(\$22,373,672)	-51%
2	Temporarily Restricted Net Assets	\$8,729,527	\$8,220,369	(\$509,158)	-6%
3	Permanently Restricted Net Assets	\$48,909,797	\$46,203,433	(\$2,706,364)	-6%
	Total Net Assets	\$101,596,550	\$76,007,356	(\$25,589,194)	-25%

\$194,272,127

\$174,814,371

(\$19,457,756)

-10%

Total Liabilities and Net Assets

GREATER WATERBURY HEALTH NETWORK

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

DEDODT 350 -	DADENT CODDODATIO	N CONSOLIDATED STAT	EMENT OF OPERATIONS I	NEODMATION
KEPUKI 33U -	PARENI CURPURATIO	N CUNSULIDATED STAT	EMENT OF OPERATIONS I	NECKINATION

(1)	(2)	(3) FY 2014	(4) FY 2015	(5) AMOUNT	(6) %
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A.	Operating Revenue:				
1	Total Gross Patient Revenue	\$991,028,165	\$1,002,524,595	\$11,496,430	1%
2	Less: Allowances	\$723,506,680	\$749,730,757	\$26,224,077	4%
3	Less: Charity Care	\$5,839,743	\$5,323,038	(\$516,705)	-9%
4	Less: Other Deductions	\$8,287,736	\$9,321,152	\$1,033,416	12%
	Total Net Patient Revenue	\$253,394,006	\$238,149,648	(\$15,244,358)	-6%
5	Provision for Bad Debts	\$4,454,817	\$4,483,187	\$28,370	1%
	Net Patient Service Revenue less provision for bad debts	\$248,939,189	\$233,666,461	(\$15,272,728)	-6%
6	Other Operating Revenue	\$5,990,648	\$6,386,976	\$396,328	7%
	Other Operating Nevertue	ψ5,550,040	ψ0,000,970	ψ330,320	1 70
7	Net Assets Released from Restrictions	\$5,542,491	\$5,014,429	(\$528,062)	-10%
	Total Operating Revenue	\$260,472,328	\$245,067,866	(\$15,404,462)	-6%
В.	Operating Expenses:				
	Salaries and Wages	\$121,602,412	\$120,866,891	(\$735,521)	-1%
2	Fringe Benefits	\$30,157,778	\$33,239,752	\$3,081,974	10%
3	Physicians Fees	\$18,162,745	\$12,654,147	(\$5,508,598)	-30%
4	Supplies and Drugs	\$31,202,932	\$31,171,674	(\$31,258)	-30 % 0%
5	Depreciation and Amortization	\$7,991,436	\$7,670,258	(\$31,238)	-4%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$1,476,326	\$1,535,311	\$58,985	4%
8	Malpractice Insurance Cost	\$8,243,823	\$7,838,777	(\$405,046)	-5%
9	Other Operating Expenses	\$49,612,743	\$53,076,094	\$3,463,351	7%
	Total Operating Expenses	\$268,450,195	\$268,052,904	(\$397,291)	0%
	Total operating Expenses	\$200,100,100	4 200,002,001	(4001,201)	5,0
	Income/(Loss) From Operations	(\$7,977,867)	(\$22,985,038)	(\$15,007,171)	188%
C.	Non-Operating Revenue:				
1	Income from Investments	\$1,706,241	\$1,876,016	\$169,775	10%
2	Gifts, Contributions and Donations	\$1,249,261	\$669,579	(\$579,682)	-46%
3	Other Non-Operating Gains/(Losses)	(\$926,677)	(\$750,533)	\$176,144	-19%
	Total Non-Operating Revenue	\$2,028,825	\$1,795,062	(\$233,763)	-12%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$5,949,042)	(\$21,189,976)	(\$15,240,934)	256%
	Other Adjustments:				

	GREATER WA	TERBURY HEALTH N	ETWORK		
	TWELVE	MONTHS ACTUAL FI	LING		
		FISCAL YEAR 2015			
	REPORT 350 - PARENT CORPORATION CO	NSOLIDATED STATE	MENT OF OPERA	TIONS INFORMATI	ON
(1) (2) (3) (4) (5) FY 2014 FY 2015 AMOUNT					
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% <u>DIFFERENCE</u>
	Unrealized Gains/(Losses)	\$294,354	(\$1,197,928)	(\$1,492,282)	-507%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$294,354	(\$1,197,928)	(\$1,492,282)	-507%
	Excess/(Deficiency) of Revenue Over Expenses	(\$5,654,688)	(\$22,387,904)	(\$16,733,216)	296%

GREATER WATERBURY HEALTH NETWORK

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	<u>FY 2015</u>
A.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$248,028,586	\$248,939,189	\$233,666,461
2	Other Operating Revenue	12,423,300	11,533,139	11,401,405
3	Total Operating Revenue	\$260,451,886	\$260,472,328	\$245,067,866
4	Total Operating Expenses	263,937,259	268,450,195	268,052,904
5	Income/(Loss) From Operations	(\$3,485,373)	(\$7,977,867)	(\$22,985,038)
6	Total Non-Operating Revenue	1,888,552	2,323,179	597,134
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,596,821)	(\$5,654,688)	(\$22,387,904)
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	-1.33%	-3.04%	-9.36%
2	Parent Corporation Non-Operating Margin	0.72%	0.88%	0.24%
3	Parent Corporation Total Margin	-0.61%	-2.15%	-9.11%
4	Income/(Loss) From Operations	(\$3,485,373)	(\$7,977,867)	(\$22,985,038)
5	Total Operating Revenue	\$260,451,886	\$260,472,328	\$245,067,866
6	Total Non-Operating Revenue	\$1,888,552	\$2,323,179	\$597,134
7	Total Revenue	\$262,340,438	\$262,795,507	\$245,665,000
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,596,821)	(\$5,654,688)	(\$22,387,904)
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$50,223,049	\$43,957,226	\$21,583,554
2	Parent Corporation Total Net Assets	\$106,384,918	\$101,596,550	\$76,007,356
3	Parent Corporation Change in Total Net Assets	\$4,041,834	(\$4,788,368)	(\$25,589,194)
4	Parent Corporation Change in Total Net Assets %	103.9%	-4.5%	-25.2%
D.	<u>Liquidity Measures Summary</u>			
1	Current Ratio	2.09	1.98	1.59
2	Total Current Assets	\$70,475,090	\$77,477,183	\$66,765,233
3	Total Current Liabilities	\$33,765,589	\$39,105,578	\$41,957,603
4	Days Cash on Hand	45	51	35

GREATER WATERBURY HEALTH NETWORK

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
5	Cash and Cash Equivalents	\$30,231,958	\$34,802,272	\$23,373,992
6	Short Term Investments	\$1,203,559	\$1,420,733	\$1,527,528
7	Total Cash and Short Term Investments	\$31,435,517	\$36,223,005	\$24,901,520
8	Total Operating Expenses	\$263,937,259	\$268,450,195	\$268,052,904
9	Depreciation Expense	\$8,996,581	\$7,991,436	\$7,670,258
10	Operating Expenses less Depreciation Expense	\$254,940,678	\$260,458,759	\$260,382,646
11	Days Revenue in Patient Accounts Receivable	3:	9 39	38
12	Net Patient Accounts Receivable	\$ 29,957,753	\$ \$ 31,329,622	\$ 32,315,680
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$3,143,186	\$4,444,304	\$7,729,230
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 26,814,567	\$ 26,885,318	\$ 24,586,450
16	Total Net Patient Revenue	\$248,028,586		\$233,666,461
10	Total Net Fallent Neverlue	\$240,020,300	φ240,939,109	\$233,000,401
17	Average Payment Period	4	8 55	59
18	Total Current Liabilities	\$33,765,589	\$39,105,578	\$41,957,603
19	Total Operating Expenses	\$263,937,259	\$268,450,195	\$268,052,904
20	Depreciation Expense	\$8,996,58	1 \$7,991,436	\$7,670,258
20	Total Operating Expenses less Depreciation Expense	\$254,940,678	\$260,458,759	\$260,382,646
E.	Solvency Measures Summary			
1	Equity Financing Ratio	55.7	52.3	43.5
2	Total Net Assets	\$106,384,918		\$76,007,356
3	Total Assets	\$191,139,608		\$174,814,371
4	Cash Flow to Total Debt Ratio	12.3	3.6	(21.0)
5	Excess/(Deficiency) of Revenues Over Expenses	(\$1,596,821) (\$5,654,688)	(\$22,387,904)
6	Depreciation Expense	\$8,996,58	1 \$7,991,436	\$7,670,258
7	Excess of Revenues Over Expenses and Depreciation Expense	\$7,399,760	\$2,336,748	(\$14,717,646)
8	Total Current Liabilities	\$33,765,589	\$39,105,578	\$41,957,603
9	Total Long Term Debt	\$26,461,088	\$25,498,728	\$28,131,313

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	GREATER WATERBU	RY HEALTH NETWORK						
	TWELVE MONTH	IS ACTUAL FILING						
	FISCAL	YEAR 2015						
	REPORT 385 - PARENT CORPORATION C	ONSOLIDATED FINANCIAL [DATA ANALYSIS					
(1)	(1) (2) (3) (4)							
		ACTUAL ACTUAL ACTUAL						
<u>LINE</u>	DESCRIPTION	FY 2013	FY 2014	FY 2015				
10	Total Current Liabilities and Total Long Term Debt	\$60,226,677	\$64,604,306	\$70,088,916				
		700,==0,011	* • • • • • • • • • • • • • • • • • • •	ψ. . ,,				
11	Long Term Debt to Capitalization Ratio	19.9	20.1	27.0				
12	Total Long Term Debt	\$26,461,088	\$25,498,728	\$28,131,313				
13	Total Net Assets	\$106,384,918	\$101,596,550	\$76,007,356				
14	Total Long Term Debt and Total Net Assets	\$132,846,006	\$127,095,278	\$104,138,669				

				WAT	ERBURY HOSPI	TAL		
					MONTHS ACTUA			
					ISCAL YEAR 201			
			REPORT 40	0 - HOSPITAL INP		~	PARTMENT	
			1121 0111 40	I IIII	ATIENT BED OT	LILATION BY BE	ARTIMENT	
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
(')	(-/	(-)	(02)	(0.0)	(-)	(0)	OCCUPANCY	OCCUPANCY
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION		CU/CCU # PATIENT	7.500.01.10	BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	35,286	8,611	8,585	113	170	85.6%	56.9%
	-		·	,				
2	ICU/CCU (Excludes Neonatal ICU)	4,231	288	0	14	20	82.8%	58.0%
	Psychiatric: Ages 0 to 17	1,205		127	4	5	82.5%	66.0%
4	Psychiatric: Ages 18+	7,842	643	640	23	25	93.4%	85.9%
	TOTAL PSYCHIATRIC	9,047	771	767	27	30	91.8%	82.6%
-	Rehabilitation	0	0	0	0	0	0.0%	0.00/
5	Renabilitation	0	0	0	U	U	0.0%	0.0%
6	Maternity	3.101	1,156	1,155	10	26	85.0%	32.7%
0	Waternity	3,101	1,100	1,100	10	20	00.070	32.7 /
7	Newborn	2,107	917	1,106	10	22	57.7%	26.2%
-		_,	,	1,100			· · · · · · · · ·	
8	Neonatal ICU	1,618	191	0	6	14	73.9%	31.7%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
						_		
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	50.000	40.700	40.507	170	222	05.00/	50 40/
	TOTAL EXCLUDING NEWBORN	53,283	10,729	10,507	170	260	85.9%	56.1%
	TOTAL INPATIENT BED UTILIZATION	55,390	11.646	11,613	180	282	84.3%	53.8%
	TOTAL INPATIENT BED OTILIZATION	33,390	11,040	11,013	100	202	04.3 //	33.070
	TOTAL INPATIENT REPORTED YEAR	55,390	11,646	11,613	180	282	84.3%	53.8%
	TOTAL INPATIENT PRIOR YEAR	58,082		11,767	176	290	90.4%	54.9%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-2,692		-154	4	-8	-6.1%	-1.1%
		_,,,,					53170	
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-5%	0%	-1%	2%	-3%	-7%	-2%
	Total Licensed Beds and Bassinets	393						
(A) TI	his number may not exceed the number of availal	ble beds for eac	h department or in	total.				
Note:	Total discharges do not include ICU/CCU patien	ts.						

		TERBURY HOSPITAL			
		MONTHS ACTUAL FILE FISCAL YEAR 2015	LING		
	REPORT 450 - HOSPITAL INPATIENT AN		R SERVICES UTILI	ZATION AND FTES	<u> </u>
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	0/
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	112014	1 1 2013	DITTERCENCE	DITTERCHOL
A.	CT Scans (A)				
1	Inpatient Scans	7,014	6,596	-418	-6%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,330	4,784	1 454	44%
3	Emergency Department Scans	8,993	7,911	1,454 -1,082	-12%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	09
	Total CT Scans	19,337	19,291	-46	0%
B.	MRI Scans (A)	0	0	0	0%
ı	Inpatient Scans Outpatient Scans (Excluding Emergency Department	0	0	0	<u> </u>
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	8,195	7,686	-509	-6%
	Total MRI Scans	8,195	7,686	-509	-6%
C.	PET Scans (A)				
1	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	0	0	0	0%
3 4	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	0	0	0	0% 0%
	Total PET Scans	0	0	0	0%
	PET/CT Scans (A)				
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	0	0	0	0%
2	Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
	(A) If the Hospital is not the primary provider of thes	e scans the Hosnital	must obtain the fis	cal year	
	volume of each of these types of scans from the			scar year	
E.	<u>Linear Accelerator Procedures</u>				
1	Inpatient Procedures	8	76	68	850%
2	Outpatient Procedures Total Linear Accelerator Procedures	0 8	2 78	2 70	09 875 %
	200000000000000000000000000000000000000		, 0	70	0107
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	345	371	26	8%
2	Outpatient Procedures Total Cardiac Catheterization Procedures	438 783	474 845	36 62	89 8 %
	Total Calulac Catheterization Frocedures	103	040	62	87
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	157	166	9	6%
2	Elective Procedures	178	167	-11	-6%
	Total Cardiac Angioplasty Procedures	335	333	-2	-19
Н.	Electrophysiology Studies				
1	Inpatient Studies	116	0	-116	-1009
2	Outpatient Studies	125	0	-125	-100%
	Total Electrophysiology Studies	241	0	-241	-100%

	WA	ATERBURY HOSPITAL				
		MONTHS ACTUAL FIL	ING			
	REPORT 450 - HOSPITAL INPATIENT AN	FISCAL YEAR 2015	D SEDVICES LITH I	ZATION AND ETEO		
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHE	K SERVICES UTILI	ZATION AND FIES		
(1)	(2)	(3)	(4)	(5)	(6)	
	,	,	()	. ,		
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE	
Ι.	Surgical Procedures					
	Inpatient Surgical Procedures	2,126	1,950	-176	-8%	
2	Outpatient Surgical Procedures	4,795	4,288	-507	-11%	
	Total Surgical Procedures	6,921	6,238	-683	-10%	
	<u> </u>					
J.	Endoscopy Procedures	200	25.4	40	4.40/	
2	Inpatient Endoscopy Procedures Outpatient Endoscopy Procedures	296 691	254 500	-42 -191	-14% -28%	
	Total Endoscopy Procedures	987	754	-233	-24%	
K.	Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	8,097	8,080	-17	0%	
2	Emergency Room Visits: Treated and Discharged	45,587	42,573	-3,014	-7%	
	Total Emergency Room Visits	53,684	50,653	-3,031	-6%	
L.	Hospital Clinic Visits					
<u></u> 1	Substance Abuse Treatment Clinic Visits	0	0	0	0%	
2	Dental Clinic Visits	0	0	0	0%	
3	Psychiatric Clinic Visits	25,078	22,540	-2,538	-10%	
4	Medical Clinic Visits	0	0	0	0%	
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%	
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0% 0%	
7 8	Medical Clinic Visits - Family Practice Clinic Medical Clinic Visits - Other Medical Clinics	0	0	0	0%	
9	Specialty Clinic Visits	0	0	0	0%	
	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	0	0	0	0%	
13	Specialty Clinic Visits - Other Speciality Clinics	14,337	14,021	-316	-2%	
	Total Hospital Clinic Visits	39,415	36,561	-2,854	-7%	
М.	Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	0	0	0	0%	
2	Cardiac Rehabilitation	2,498	3,382	884	35%	
3	Chemotherapy	874	971	97	11%	
4	Gastroenterology	2,704	1,641	-1,063	-39%	
5	Other Outpatient Visits Total Other Hospital Outpatient Visits	103,333	95,305	-8,028	-8% -7%	
	Total Other Hospital Outpatient Visits	109,409	101,299	-8,110	-170	
N.	Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	343.2	331.9	-11.3	-3%	
2	Total Physician FTEs	33.0	53.9	20.9	63%	
3	Total Non-Nursing and Non-Physician FTEs	775.3	734.9	-40.4	-5%	
	Total Hospital Full Time Equivalent Employees	1,151.5	1,120.7	-30.8	-3%	
	i e					

01110	L OF FILALITY CARL ACCESS	13 ACTUAL FILING		VV /-	ATENDON'I HOSFITAL
	WATERBUR	Y HOSPITAL			
	TWELVE MONTH	S ACTUAL FILIN	IG		
	FISCAL Y	'EAR 2015			
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EM	ERGENCY RO	OM SERVICES E	3Y LOCATION
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2014	<u>FY 2015</u>	DIFFERENCE	DIFFERENCE
Α.	Outpatient Surgical Procedures				
1	Waterbury Hospital	4,795	4,288	-507	-11%
T.	Total Outpatient Surgical Procedures(A)	4,795	4,288	-507	-11%
B.	Outpatient Endoscopy Procedures				
1	Waterbury Hospital	691	500	-191	-28%
	Total Outpatient Endoscopy Procedures(B)	691	500	-191	-28%
C.	Outpatient Hospital Emergency Room Visits				
1	Waterbury Hospital	45,587	42,573	-3,014	-7%
	Total Outpatient Hospital Emergency Room Visits(C)	45,587	42,573	-3,014	
	(A) Must agree with Total Outpatient Surgical Procedure	 es on Report 450).		
	(c.)		-		
	(B) Must agree with Total Outpatient Endoscopy Proced	ures on Report	450.		
	(C) Must agree with Emergency Room Visits Treated an	d Discharged or	n Report 450.		T

FISCAL YEAR 2015

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

I	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%	
	DECORIDETION	ACTUAL	ACTUAL			
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE	
I.	DATA BY MAJOR PAYER CATEGORY					
Α.	MEDICARE					
	MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$276,657,950	\$278,300,873	\$1,642,923	1%	
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$66,552,780	\$56,795,308	(\$9,757,472)	-15%	
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.06%	20.41%	-3.65%	-15%	
4	DISCHARGES	5,396	5,403	7	0%	
5	CASE MIX INDEX (CMI)	1.51500	1.45920	(0.05580)	-4%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	8,174.94000	7,884.05760	(290.88240)	-4%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,141.07	\$7,203.82	(\$937.26)	-12%	
8	PATIENT DAYS	30,908	29,290	(1,618)	-5%	
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,153.25	\$1,939.07	(\$214.19)	-10%	
10	AVERAGE LENGTH OF STAY	5.7	5.4	(0.3)	-5%	
	MEDICARE OUTPATIENT					
	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$148,294,008	\$150,262,434	\$1,968,426	1%	
	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$21,589,079	\$25,664,040	\$4,074,961	19%	
	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.56%	17.08%	2.52%	17%	
14	OUTPATIENT CHARGES / INPATIENT CHARGES	53.60%	53.99%	0.39%	1%	
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,892.36029	2,917.23099	24.87070	1%	
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,464.17	\$8,797.40	\$1,333.22	18%	
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
	TOTAL ACCRUED CHARGES	\$424,951,958	\$428,563,307	\$3,611,349	1%	
	TOTAL ACCRUED PAYMENTS	\$88,141,859	\$82,459,348	(\$5,682,511)	-6%	
	TOTAL ALLOWANCES	\$336,810,099	\$346,103,959	\$9,293,860	3%	
В.	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
ъ.	NON-GOVERNMENT (INCLODING SELF PAT / UNINSURED)					
	NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$125,139,505	\$122,009,934	(\$3,129,571)	-3%	
	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$45,889,335	\$37,264,776	(\$8,624,559)	-19%	
	INPATIENT PAYMENTS / INPATIENT CHARGES	36.67%	30.54%	-6.13%	-17%	
	DISCHARGES	3,089	2,897	(192)	-6%	
	CASE MIX INDEX (CMI)	1.26220	1.25770	(0.00450)	0%	
	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,898.93580	3,643.55690	(255.37890)	-7%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,769.71	\$10,227.58	(\$1,542.13)	-13%	
	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,628.64)	(\$3,023.76)	\$604.87	-17%	
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$14,147,816)	(\$11,017,259)	\$3,130,557	-22%	
	PATIENT DAYS	12,344	11,296	(1,048)	-8%	
	INPATIENT ACCRUED PAYMENT / PATIENT DAY AVERAGE LENGTH OF STAY	\$3,717.54 4.0	\$3,298.94 3.9	(\$418.61)	-11% -2%	
		7.0	0.0	(0.1)	270	
	NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$164,419,561	\$159,979,736	(\$4,439,825)	-3%	
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$44,756,535	\$41,079,661	(\$3,676,874)	-8%	
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.22%	25.68%	-1.54%	-6%	

TWELVE MONTHS ACTUAL FILING

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE
			<u> </u>		
16	OUTPATIENT CHARGES / INPATIENT CHARGES	131.39%	131.12%	-0.27%	0%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,058.60662	3,798.55377	(260.05285)	-6%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$11,027.56	\$10,814.55	(\$213.01)	-2%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$3,563.39)	(\$2,017.16)	\$1,546.23	-43%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$14,462,391)	(\$7,662,274)	\$6,800,117	-47%
	NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)				
21	TOTAL ACCRUED CHARGES	\$289,559,066	\$281,989,670	(\$7,569,396)	-3%
22	TOTAL ACCRUED PAYMENTS	\$90,645,870	\$78,344,437	(\$12,301,433)	-14%
23	TOTAL ALLOWANCES	\$198,913,196	\$203,645,233	\$4,732,037	2%
	707A UDDED UNIT (0)(FD) (UNIDEDDA)(UTI)	(000 040 007)	(040,070,500)	#0.000.070	050/
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$28,610,207)	(\$18,679,533)	\$9,930,673	-35%
	NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$269,084,624	\$263,412,870	(\$5,671,754)	-2%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA	\$86,858,753	\$75,476,541	(\$11,382,212)	-13%
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)				
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$182,225,871	\$187,936,329	\$5,710,458	3%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	67.72%	71.35%	3.63%	
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$3,441,689	\$2,869,380	(\$572,309)	-17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$323,524	\$179,431	(\$144,093)	-45%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	9.40%	6.25%	-3.15%	-33%
4	DISCHARGES	113	101	(12)	-11%
5	CASE MIX INDEX (CMI)	1.05100	1.01220	(0.03880)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	118.76300	102.23220	(16.53080)	-14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,724.11	\$1,755.13	(\$968.98)	-36%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$9,045.59	\$8,472.45	(\$573.14)	-6%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$5,416.96	\$5,448.69	\$31.73	1%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$643,334	\$557,031	(\$86,303)	-13%
11	PATIENT DAYS	355	314	(41)	-12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$911.34	\$571.44	(\$339.90)	-37%
13	AVERAGE LENGTH OF STAY	3.1	3.1	(0.0)	-1%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,265,233	\$5,932,157	(\$1,333,076)	-18%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$615,098	\$1,216,331	\$601,233	98%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	8.47%	20.50%	12.04%	142%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	211.09%	206.74%	-4.35%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	238.53734	208.80743	(29.72991)	-12%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,578.62	\$5,825.13	\$3,246.51	126%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$8,448.94	\$4,989.42	(\$3,459.52)	-41%
21	MEDICARE - UNINSURED OP PMT / OPED	\$4,885.55	\$2,972.26	(\$1,913.29)	-39%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,165,386	\$620,631	(\$544,755)	-47%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
		M40 700 000	#C 001 TOT	(#4.00=.00=)	-18%
23	TOTAL ACCRUED CHARGES	\$10,706,922	\$8,801,537	(\$1,905,385)	-

TWELVE MONTHS ACTUAL FILING

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	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE		
24	TOTAL ACCRUED PAYMENTS	\$938,622	\$1,395,762	\$457,140	49%		
25	TOTAL ALLOWANCES	\$9,768,300	\$7,405,775	(\$2,362,525)	-24%		
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,808,720	\$1,177,662	(\$631,058)	-35%		
D.	STATE OF CONNECTICUT MEDICAID						
	MEDICAID INPATIENT						
1	INPATIENT ACCRUED CHARGES	\$101,019,874	\$104,268,326	\$3,248,452	3%		
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$20,019,856	\$21,903,510	\$1,883,654	9%		
3	INPATIENT PAYMENTS / INPATIENT CHARGES	19.82%	21.01%	1.19%	6%		
4	DISCHARGES	3,186	3,324	138	4%		
5	CASE MIX INDEX (CMI)	1.02160	0.97370	(0.04790)	-5%		
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,254.81760	3,236.57880	(18.23880)	-1%		
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,150.84	\$6,767.49	\$616.65	10%		
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,618.87	\$3,460.09	(\$2,158.78)	-38%		
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,990.23	\$436.33	(\$1,553.91)	-78%		
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,477,850	\$1,412,211	(\$5,065,639)	-78%		
	PATIENT DAYS	14,750	14,685	(65)	0%		
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,357.28	\$1,491.56	\$134.28	10%		
13	AVERAGE LENGTH OF STAY	4.6	4.4	(0.2)	-5%		
	MEDICAID OUTPATIENT						
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$88,713,154	\$99,862,668	\$11,149,514	13%		
15	OUTPATIENT ACCRUED CHARGES (OF CHGS) OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$11,593,083	\$17,436,349	\$5,843,266	50%		
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	13.07%	17.46%	4.39%	34%		
17	OUTPATIENT CHARGES / INPATIENT CHARGES	87.82%	95.77%	7.96%	9%		
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,797.86637	3,183.55076	385.68438	14%		
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,143.54	\$5,477.01	\$1,333.47	32%		
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,884.02	\$5,337.54	(\$1,546.48)	-22%		
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,320.63	\$3,320.38	(\$0.25)	0%		
	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,290,677	\$10,570,612	\$1,279,935	14%		
	OOT ATTENDED TO THE ENTITY (OVERLY) ONDERCOMMENT	ψ0,200,011	Ψ10,070,012	Ψ1,270,000	1470		
	MEDICAID TOTALS (INPATIENT + OUTPATIENT)						
23	TOTAL ACCRUED CHARGES	\$189,733,028	\$204,130,994	\$14,397,966	8%		
24	TOTAL ACCRUED PAYMENTS	\$31,612,939	\$39,339,859	\$7,726,920	24%		
25	TOTAL ALLOWANCES	\$158,120,089	\$164,791,135	\$6,671,046	4%		
		+ , -,	+ - , - ,	¥ = , = , = =			
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$15,768,527	\$11,982,823	(\$3,785,704)	-24%		
				,			
E.	OTHER MEDICAL ASSISTANCE (O.M.A.)						
	OTHER MEDICAL ASSISTANCE INPATIENT						
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%		

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	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		4071141	AOTUAL	444011117	0/	
		ACTUAL	ACTUAL	AMOUNT	%	
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%	
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$11,769.71	\$10,227.58	(\$1,542.13)	-13%	
9	MEDICARE - O.M.A. IP PMT / CMAD	\$8,141.07	\$7,203.82	(\$937.26)	-12%	
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%	
	OTHER MEDICAL ASSISTANCE OUTPATIENT					
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%	
	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$11,027.56	\$10,814.55	(\$213.01)	-2%	
21	MEDICARE - O.M.A. OP PMT / CMAD	\$7,464.17	\$8,797.40	\$1,333.22	18%	
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%	
	OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIE					
	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%	
	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%	
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA	AL ASSISTANCE	<u>=)</u>			
	TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$101,019,874	\$104,268,326	\$3,248,452	3%	
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$20,019,856	\$21,903,510	\$1,883,654	9%	
3	INPATIENT ACCROED FATMENTS (IF FWIT)	19.82%	21.01%	1.19%	6%	
4	DISCHARGES	3,186	3,324	138	4%	
5	CASE MIX INDEX (CMI)	1.02160	0.97370	(0.04790)	-5%	
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,254.81760	3,236.57880	(18.23880)	-1%	
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,150.84	\$6,767.49	\$616.65	10%	
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,618.87	\$3,460.09	(\$2,158.78)	-38%	
	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,990.23	\$436.33	(\$1,553.91)	-78%	
	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,477,850	\$1,412,211	(\$5,065,639)	-78%	
	PATIENT DAYS	14,750	14,685	(65)	0%	
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,357.28	\$1,491.56	\$134.28	10%	
13	AVERAGE LENGTH OF STAY	4.6	4.4	(0.2)	-5%	
	TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$88,713,154	\$99,862,668	\$11,149,514	13%	
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$11,593,083	\$17,436,349	\$5,843,266	50%	
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	13.07%	17.46%	4.39%	34%	
17	OUTPATIENT CHARGES / INPATIENT CHARGES	87.82%	95.77%	7.96%	9%	
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,797.86637	3,183.55076	385.68438	14%	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

ACTUAL PY 2015 MONOTO PY 2015 DIFFERENCE DIFF		AND BASELINE UNDERPATIMENT DATA: COMPARATIVE ANALYSIS					
DESCRIPTION			ACTUAL	ACTUAL	AMOUNT	%	
DITATIENT ACCRUED PAYMENTS (PRED \$4,143.54 \$5,477.01 \$1,333.47 32%	LINE	DESCRIPTION					
Description		2233Mi Tion	1.120.1	1 1 2010	<u> </u>	<u> </u>	
Description Section	19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,143.54	\$5,477.01	\$1,333.47	32%	
PRINCIPACE - TOTAL MEDICAL ASSISTANCE OF PATT OF DED \$3,220,03 \$3,320,38 \$(50,25) 0%	20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,884.02		(\$1,546.48)	-22%	
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)	21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED			, ,	0%	
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)	22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,290,677		` ′	14%	
TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 870,726,920 24% 870,726,920							
Total accrued payments		TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN	<u>T)</u>				
TOTAL ALLOWANCES \$158,120,089 \$164,791,135 \$6,671,046 4%	23	TOTAL ACCRUED CHARGES	\$189,733,028	\$204,130,994	\$14,397,966	8%	
G. CHAMPUS / TRICARE CHAMPUS / TRICARE INPATIENT DIPATRENT ACCRUED DHARGES 1 NPATIENT ACCRUED PAYMENTS (IP PATT) 1 NPATIENT ACCRUED PAYMENTS (IP PATT) 1 NPATIENT ACCRUED PAYMENTS (IP PATT) 2 NPATIENT ACCRUED PAYMENTS (IP PATT) 3 NPATIENT ACCRUED PAYMENTS (IP PATT) 3 NPATIENT ACCRUED PAYMENTS (IP PATT) 4 DISCHARGES 2 2 2 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	24	TOTAL ACCRUED PAYMENTS	\$31,612,939	\$39,339,859	\$7,726,920	24%	
CHAMPUS / TRICARE INPATIENT	25	TOTAL ALLOWANCES	\$158,120,089	\$164,791,135	\$6,671,046	4%	
INPATIENT ACCRUED CHARGES	G.	CHAMPUS / TRICARE					
INPATIENT ACCRUED CHARGES							
2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$156,975 \$126,256 \$(\$30,719) -20% 3 INPATIENT PAYMENTS (INPATIENT CHARGES 22.12% 13.34% 7.75% -35% 35% 4 DISCHARGES 22.2 2 0 0.09% 35% 4 DISCHARGES (CMD) 19.24560 20.06400 0.31840 4% 4% 4% ADUSTED DISCHARGES (CMAD) 19.24560 20.06400 0.31840 4% 36.295.66 (\$1.863.75) -23% 38 PATIENT CACRUED PAYMENT / CMAD \$8.156.41 \$6.292.66 (\$1.863.75) -23% 38 PATIENT DAYS 80 119 30 49% 39 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1.962.19 \$1,060.97 (\$901.21) 4-6% 40% 40% 40% 40% 40% 40% 40% 40% 40% 40							
3 NPATIENT PAYMENTS / INPATIENT CHARGES 22 22 0 0 0 0 0 0 0	-			•			
DISCHARGES					(, , , ,		
CASE MIX INDEX (CMI)							
6 CASE MIX ADJUSTED DISCHARGES (CMAD) 19.24560 20.06400 0.81840 4%. 7 INPATIENT ACCRUED PAYMENT (CMAD \$8,156.41 \$6,29.66 (\$1,863.75) 2.23% 8 PATIENT DAYS 80 119 39 49% 9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,962.19 \$1,060.97 (\$901.21) -46% 10 AVERAGE LENGTH OF STAY 3.6 5.4 1.8 49% CHAMPUS / TRICARE OUTPATIENT 11 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$521,724 \$693,299 \$171,575 33%. 12 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$121,718 \$128,676 \$6,958 6% CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT) 13 TOTAL ACCRUED CHARGES \$1,231,374 \$1,573,747 \$342,373 28% 14 TOTAL ACCRUED CHARGES \$1,231,374 \$1,573,747 \$342,373 28% 15 TOTAL ACCRUED PAYMENTS \$278,693 \$254,932 (\$23,761) -9% 15 TOTAL ALCOWANCES \$952,681 \$1,318,815 \$366,134 38% H. OTHER OPERATING EVERNUE \$8,214,242 \$6,461,805 (\$1,752,437) -21% 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 \$0 0% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$3,692,986 \$3,747,762 \$54,776 19% 15 DAD BETS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 19% 16 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$4,480,940 (\$850,326) -9% 15 TOTAL ACCRUED PAYMENTS (GROSS DSH plus Upper Limit Adjustment) \$2,172,526 \$1,856,214 (\$316,312) -15% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$3,692,986 \$3,747,762 \$54,776 19% 16 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$4,480,940 (\$850,326) -9% 17 COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 17 COST OF UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$4,480,940 (\$850,326) -9% 18 OTAL ACCRUED CHARGES \$9,337,266 \$1,856,214 (\$316,312) -15% 18 OTAL ACCRUED CHARGES \$9,333,985 \$7,726,920 24%							
7 INPATIENT ACCRUED PAYMENT / CMAD							
8		` '					
9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,962.19 \$1,060.97 (\$901.21) -46% AVERAGE LENGTH OF STAY 3.6 5.4 1.8 49% CHAMPUS / TRICARE OUTPATIENT			` '		,		
10 AVERAGE LENGTH OF STAY 3.6 5.4 1.8 49%							
CHAMPUS / TRICARE OUTPATIENT					` ´		
11 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$521,724 \$693,299 \$171,575 33% 12 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$121,718 \$128,676 \$6,958 6% CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT) \$121,718 \$128,676 \$6,958 6% CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT) \$1,231,374 \$1,573,747 \$342,373 28% 14 TOTAL ACCRUED PAYMENTS \$278,693 \$254,932 \$(23,761) 99% 15 TOTAL ALLOWANCES \$952,681 \$1,318,815 \$366,134 38% 16 OTHER DATA \$1,000000000000000000000000000000000000	10	AVERAGE LENGTH OF STAY	3.6	5.4	1.8	49%	
12 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$121,718 \$128,676 \$6,958 6%		CHAMPUS / TRICARE OUTPATIENT					
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)	11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$521,724	\$693,299	\$171,575	33%	
TOTAL ACCRUED CHARGES \$1,231,374 \$1,573,747 \$342,373 28%	12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$121,718	\$128,676	\$6,958	6%	
TOTAL ACCRUED CHARGES \$1,231,374 \$1,573,747 \$342,373 28%							
14 TOTAL ACCRUED PAYMENTS \$278,693 \$254,932 (\$23,761) -9% 15 TOTAL ALLOWANCES \$952,681 \$1,318,815 \$366,134 38% H. OTHER DATA 1 OTHER OPERATING REVENUE \$8,214,242 \$6,461,805 (\$1,752,437) -21% 2 TOTAL OPERATING EXPENSES \$216,453,293 \$210,952,866 (\$5,500,427) -3% 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 \$0 0% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$14,397,966 8%		CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
TOTAL ALLOWANCES \$952,681 \$1,318,815 \$366,134 38%	13	TOTAL ACCRUED CHARGES	\$1,231,374	\$1,573,747	\$342,373	28%	
H. OTHER DATA 1 OTHER OPERATING REVENUE 2 TOTAL OPERATING EXPENSES 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) 4 CHARITY CARE (CHARGES) 5 BAD DEBTS (CHARGES) 5 BAD DEBTS (CHARGES) 6 UNCOMPENSATED CARE (BASELINE METHODOLOGY) 7 COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 8 TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED PAYMENTS 8 \$1612,939 8 \$39,339,859 8 \$7,726,920 2 24%	14	TOTAL ACCRUED PAYMENTS	\$278,693	\$254,932	(\$23,761)	-9%	
1 OTHER OPERATING REVENUE \$8,214,242 \$6,461,805 (\$1,752,437) -21% 2 TOTAL OPERATING EXPENSES \$216,453,293 \$210,952,866 (\$5,500,427) -3% 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 \$0 0% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE (SASISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	15	TOTAL ALLOWANCES	\$952,681	\$1,318,815	\$366,134	38%	
1 OTHER OPERATING REVENUE \$8,214,242 \$6,461,805 (\$1,752,437) -21% 2 TOTAL OPERATING EXPENSES \$216,453,293 \$210,952,866 (\$5,500,427) -3% 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 \$0 0% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE (SASISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%							
2 TOTAL OPERATING EXPENSES \$216,453,293 \$210,952,866 (\$5,500,427) -3% 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 \$0 0% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	Н.	OTHER DATA					
2 TOTAL OPERATING EXPENSES \$216,453,293 \$210,952,866 (\$5,500,427) -3% 3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 \$0 0% COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	1	OTHER OPERATING REVENUE	\$8,214,242	\$6.461.805	(\$1.752.437)	-21%	
3 UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	2				` '		
4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)			, ,		
4 CHARITY CARE (CHARGES) \$5,644,280 \$4,739,178 (\$905,102) -16% 5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%				·			
5 BAD DEBTS (CHARGES) \$3,692,986 \$3,747,762 \$54,776 1% 6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%		COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
6 UNCOMPENSATED CARE (CHARGES) \$9,337,266 \$8,486,940 (\$850,326) -9% 7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	4	CHARITY CARE (CHARGES)	\$5,644,280	\$4,739,178	(\$905,102)	-16%	
7 COST OF UNCOMPENSATED CARE \$2,172,526 \$1,856,214 (\$316,312) -15% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	5	BAD DEBTS (CHARGES)	\$3,692,986	\$3,747,762	\$54,776	1%	
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) 8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	6	UNCOMPENSATED CARE (CHARGES)	\$9,337,266	\$8,486,940	(\$850,326)	-9%	
8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	7	COST OF UNCOMPENSATED CARE	\$2,172,526	\$1,856,214	(\$316,312)	-15%	
8 TOTAL ACCRUED CHARGES \$189,733,028 \$204,130,994 \$14,397,966 8% 9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%		TOTAL MEDICAL ASSISTANCE LINDERPAYMENT (BASELINE METHODOL	OGY)				
9 TOTAL ACCRUED PAYMENTS \$31,612,939 \$39,339,859 \$7,726,920 24%	ρ			\$204 130 004	\$14 397 966	80/	
	10	COST OF TOTAL MEDICAL ASSISTANCE	\$44,145,685	\$44,646,347	\$500,661	1%	

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
LINE	<u>DESCRIPTION</u>	ACTUAL FY 2014	ACTUAL FY 2015	AMOUNT DIFFERENCE	% DIFFERENCE		
	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$12,532,746	\$5,306,488	(\$7,226,259)	-58%		
II.	AGGREGATE DATA						
Α.	TOTALS - ALL PAYERS						
	TOTAL INPATIENT CHARGES	\$503,526,979	\$505,459,581	\$1,932,602	0%		
2	TOTAL INPATIENT CHARGES TOTAL INPATIENT PAYMENTS	\$132,618,946	\$116.089.850	(\$16,529,096)	-12%		
3	TOTAL INPATIENT PAYMENTS / CHARGES	26.34%	22.97%	,	-12%		
4	TOTAL DISCHARGES	11,693	11,646	(47)	0%		
5	TOTAL CASE MIX INDEX	1.31257	1.26947	(0.04310)	-3%		
6	TOTAL CASE MIX ADJUSTED DISCHARGES	15,347.93900	14,784.25730	(563.68170)	-4%		
7	TOTAL OUTPATIENT CHARGES	\$401,948,447	\$410,798,137	\$8,849,690	2%		
	OUTPATIENT CHARGES / INPATIENT CHARGES	79.83%	81.27%		2%		
9	TOTAL OUTPATIENT PAYMENTS	\$78,060,415	\$84,308,726	\$6.248.311	8%		
-	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	19.42%	20.52%	+ - , - , -	6%		
11	TOTAL CHARGES	\$905,475,426	\$916,257,718	\$10,782,292	1%		
12	TOTAL PAYMENTS	\$210,679,361	\$200,398,576	(\$10,280,785)	-5%		
	TOTAL PAYMENTS / TOTAL CHARGES	23.27%	21.87%	, , , , , , , , , , , , , , , , , , , ,	-6%		
	PATIENT DAYS	58,082	55,390	(2,692)	-5%		
				(, ,			
В.	TOTALS - ALL GOVERNMENT PAYERS						
1	INPATIENT CHARGES	\$378,387,474	\$383,449,647	\$5,062,173	1%		
2	INPATIENT PAYMENTS	\$86,729,611	\$78,825,074	(\$7,904,537)	-9%		
3	GOVT. INPATIENT PAYMENTS / CHARGES	22.92%	20.56%	-2.36%	-10%		
4	DISCHARGES	8,604	8,749	145	2%		
5	CASE MIX INDEX	1.33066	1.27337	(0.05729)	-4%		
6	CASE MIX ADJUSTED DISCHARGES	11,449.00320	11,140.70040	(308.30280)	-3%		
7	OUTPATIENT CHARGES	\$237,528,886	\$250,818,401	\$13,289,515	6%		
8	OUTPATIENT CHARGES / INPATIENT CHARGES	62.77%	65.41%	2.64%	4%		
9	OUTPATIENT PAYMENTS	\$33,303,880	\$43,229,065	\$9,925,185	30%		
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.02%	17.24%	3.21%	23%		
11	TOTAL CHARGES	\$615,916,360	\$634,268,048	\$18,351,688	3%		
12	TOTAL PAYMENTS	\$120,033,491	\$122,054,139	\$2,020,648	2%		
13	TOTAL PAYMENTS / CHARGES	19.49%	19.24%	-0.25%	-1%		
14	PATIENT DAYS	45,738	44,094	(1,644)	-4%		
15	TOTAL GOVERNMENT DEDUCTIONS	\$495,882,869	\$512,213,909	\$16,331,040	3%		
C.	AVERAGE LENGTH OF STAY						
1	MEDICARE	5.7	5.4	(0.3)	-5%		
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0	3.9	(0.1)	-2%		
3	UNINSURED	3.1	3.1	(0.0)	-1%		
4	MEDICAID	4.6	4.4	(0.2)	-5%		
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%		
6	CHAMPUS / TRICARE	3.6	5.4	1.8	49%		
7	TOTAL AVERAGE LENGTH OF STAY	5.0	4.8	(0.2)	-4%		
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION						
1	TOTAL CHARGES	\$905,475,426	\$916,257,718	\$10,782,292	1%		
2	TOTAL GOVERNMENT DEDUCTIONS	\$495,882,869	\$512,213,909	\$16,331,040	3%		

FISCAL YEAR 2015

REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT

	AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS						
		ACTUAL	ACTUAL	AMOUNT	%		
LINE	<u>DESCRIPTION</u>	FY 2014	FY 2015	DIFFERENCE	DIFFERENCE		
		*	**	(0.70.000)			
3	UNCOMPENSATED CARE	\$9,337,266	\$8,486,940	(\$850,326)			
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$182,225,871	\$187,936,329	\$5,710,458	3%		
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,350,058	\$7,221,967	(\$128,091)	-2%		
6	TOTAL ADJUSTMENTS	\$694,796,064	\$715,859,145	\$21,063,081	3%		
7	TOTAL ACCRUED PAYMENTS	\$210,679,362	\$200,398,573	(\$10,280,789)	-5%		
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%		
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$210,679,362	\$200,398,573	(\$10,280,789)	-5%		
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2326726446	0.2187141991	(0.0139584455)	-6%		
11	COST OF UNCOMPENSATED CARE	\$2,172,526	\$1,856,214	(\$316,312)	-15%		
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$12,532,746	\$5,306,488	(\$7,226,259)	-58%		
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%		
14	TOTAL COST OF UNCOMPENSATED CARE AND						
	MEDICAL ASSISTANCE UNDERPAYMENT	\$14,705,273	\$7,162,702	(\$7,542,571)	-51%		
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>					
	MEDICAID	\$9,290,677	\$10,570,612	\$1,279,935	14%		
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%		
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,808,720	\$1,177,662	(\$631,058)	-35%		
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$11,099,397	\$11,748,274	\$648,876	6%		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	DATA LICED IN DECONCIL IATIONS IN DEPORTS FEG. AND CO.	\					
V.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600						
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,767,520	\$9,775,266	\$7,746	0.08%		
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$2,052,705)	(\$7,694,690)	(\$5,641,985)	274.86%		
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$208,626,652	\$192,703,886	(\$15,922,766)	-7.63%		
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$79,932,300	\$80,287,239	\$354,939	0.44%		
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$985,407,726	\$996,544,955	\$11,137,229	1.13%		
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$195,462	\$583,860	\$388,398	198.71%		
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$9,532,729	\$9,070,799	(\$461,930)	-4.85%		

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REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

FISCAL YEAR 2015

(4)	(0)	(0)	[/A	/F\
(1)	(2)	(3)	(4)	(5)
			ACTUAL FY	AMOUNT
LINE	<u>DESCRIPTION</u>	<u>2014</u>	<u>2015</u>	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
	INPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12E 120 E0E	¢122.000.024	(\$2.420 E74
	MEDICARE	\$125,139,505 \$276,657,950	\$122,009,934 278,300,873	(\$3,129,571 \$1,642,923
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$101,019,874	104,268,326	\$3,248,452
	MEDICAID OTHER MEDICAL ASSISTANCE	\$101,019,874	104,268,326	\$3,248,452
	CHAMPUS / TRICARE	\$0 \$709,650	880,448	\$0 \$170,798
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,441,689	2,869,380	(\$572,309
	TOTAL INPATIENT GOVERNMENT CHARGES TOTAL INPATIENT CHARGES	\$378,387,474 \$503,526,979	\$383,449,647 \$505,459,581	\$5,062,173 \$1,932,602
	TOTAL INPATIENT CHARGES	\$503,526,979	\$505,459,561	\$1,932,602
	OUTPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$404.440.504	¢450,070,720	(#A 420 025
	MEDICARE	\$164,419,561 \$148,294,008	\$159,979,736 150,262,434	(\$4,439,825 \$1,968,426
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$88,713,154	99,862,668	\$11,149,514
	MEDICAID	\$88,713,154	99,862,668	\$11,149,514
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$0 \$521,724	693,299	\$0 \$171,575
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,265,233	5,932,157	(\$1,333,076
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$237,528,886	\$250,818,401	\$13,289,515
	TOTAL OUTPATIENT CHARGES	\$401,948,447	\$410,798,137	\$8,849,690
	TOTAL ACCRUED CHARGES			
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$289,559,066	\$281,989,670	(\$7,569,396
3	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$424,951,958 \$189.733.028	\$428,563,307 \$204,130,994	\$3,611,349 \$14,397,966
	TOTAL MEDICALD	\$189,733,028	\$204,130,994	\$14,397,966
	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6 7	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,231,374 \$10,706,922	\$1,573,747 \$8,801,537	\$342,373 (\$1,905,385
	TOTAL GIVINGGRED (INCLODED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$615,916,360	\$634,268,048	\$18,351,688
	TOTAL CHARGES	\$905,475,426	\$916,257,718	\$10,782,292
D.	INPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$45,889,335	\$37,264,776	(\$8,624,559
	MEDICARE	\$66,552,780	56,795,308	(\$9,757,472
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$20,019,856 \$20,019,856	21,903,510 21,903,510	\$1,883,654 \$1,883,654
	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
	CHAMPUS / TRICARE	\$156,975	126,256	(\$30,719
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	\$323,524 \$86,729,611	179,431 \$78,825,074	(\$144,093 (\$7,904,537
	TOTAL INPATIENT GOVERNMENT FATMENTS TOTAL INPATIENT PAYMENTS	\$132,618,946	\$116,089,850	(\$16,529,096
_	OUTDATIENT ACCOURT DAYMENTO			
	OUTPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$44,756,535	\$41,079,661	(\$3,676,874
	MEDICARE	\$21,589,079	25,664,040	\$4,074,961
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,593,083	17,436,349	\$5,843,266
	MEDICAID OTHER MEDICAL ASSISTANCE	\$11,593,083 \$0	17,436,349 0	\$5,843,266 \$0
	CHAMPUS / TRICARE	\$121,718	128,676	\$6,958
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$615,098	1,216,331	\$601,233
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$33,303,880 \$78,060,415	\$43,229,065 \$84,308,726	\$9,925,185 \$6,248,311
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	TOTAL ACCRUED PAYMENTS TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$00 64E 070	\$70 0 <i>44 4</i> 07	(\$12.301.433
	TOTAL NONGOVERNMENT (INCLODING SELF PAY / UNINSURED) TOTAL MEDICARE	\$90,645,870 \$88,141,859	\$78,344,437 \$82,459,348	(\$12,301,433
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$31,612,939	\$39,339,859	\$7,726,920
	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$31,612,939	\$39,339,859	\$7,726,920
	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$0 \$278,693	\$0 \$254,932	\$0 (\$23,761
	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$938,622	\$1,395,762	\$457,140
	TOTAL GOVERNMENT PAYMENTS	\$120,033,491 \$210,670,261	\$122,054,139 \$200,209,576	\$2,020,648
	TOTAL PAYMENTS	\$210,679,361	\$200,398,576	(\$10,280,785
II.	PAYER MIX			
Α.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.82%	13.32%	-0.50%
	MEDICARE	30.55%	30.37%	-0.18%

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

FISCAL YEAR 2015

(1)	(2)	(3)	(4)	(5)
		ACTUAL FY	ACTUAL FY	AMOUNT
LINE	<u>DESCRIPTION</u>	<u>2014</u>	<u>2015</u>	<u>DIFFERENCE</u>
	MEDICAID	44.400/	44.200/	0.22%
	OTHER MEDICAL ASSISTANCE	11.16% 0.00%	11.38% 0.00%	0.22%
	CHAMPUS / TRICARE	0.08%	0.10%	0.02%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.38%	0.31%	-0.07%
	TOTAL INPATIENT GOVERNMENT PAYER MIX TOTAL INPATIENT PAYER MIX	41.79% 55.61%		0.06% -0.44%
			-	
В.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.16%	17.46%	-0.70%
	MEDICARE	16.38%	16.40%	0.02%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	9.80% 9.80%	10.90% 10.90%	1.10% 1.10%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	0.06%	0.08%	0.02%
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.80% 26.23%	0.65% 27.37 %	-0.15% 1.14%
	TOTAL OUTPATIENT PAYER MIX	44.39%	44.83%	0.44%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	04 700/	10.600/	2.400/
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	21.78% 31.59%	18.60% 28.34%	-3.19% -3.25%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.50%	10.93%	1.43%
	MEDICAID OTHER MEDICAL ASSISTANCE	9.50%	10.93%	1.43%
	CHAMPUS / TRICARE	0.00% 0.07%	0.00% 0.06%	0.00% -0.01%
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.15%	0.09%	-0.06%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	41.17%		-1.83%
	TOTAL INPATIENT PAYER MIX	62.95%	57.93%	-5.02%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21.24%	20.50%	-0.74%
	MEDICARE	10.25%	12.81%	2.56%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	5.50% 5.50%	8.70% 8.70%	3.20% 3.20%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	0.06%	0.06%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT PAYER MIX	0.29% 15.81%	0.61% 21.57 %	0.31% 5.76 %
	TOTAL OUTPATIENT PAYER MIX	37.05%		5.02%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	400.009/	0.00%
	TOTAL FATER WILL BASED ON ACCROED FATWEINTS	100.00%	100.00%	0.00%
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED I	DATA		
A.	DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,089	/	(192)
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,396 3,186		
4	MEDICAID	3,186	3,324	138
	OTHER MEDICAL ASSISTANCE	0		-
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	22 113	22 101	- (12)
	TOTAL GOVERNMENT DISCHARGES	8,604	8,749	145
	TOTAL DISCHARGES	11,693	11,646	(47)
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12,344	11,296	(1,048)
	MEDICARE	30,908		(1,048)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,750	14,685	(65)
	MEDICAL ASSISTANCE	14,750	, , , , , , , , , , , , , , , , , , ,	(65)
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0 80		39
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	355	314	(41)
	TOTAL GOVERNMENT PATIENT DAYS	45,738		(1,644)
	TOTAL PATIENT DAYS	58,082	55,390	(2,692)
C.	AVERAGE LENGTH OF STAY (ALOS)			
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FISCAL YEAR 2015

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
	DESCRIPTION		ACTUAL <u>FY</u> <u>2015</u>	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.	0 3.9	(0.1)
2	MEDICARE	5.	7 5.4	(0.3)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	4.		(0.2)
	OTHER MEDICAL ASSISTANCE	0.		(0.2)
	CHAMPUS / TRICARE	3.		1.8
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	3. 5.		(0.0) (0.3)
	TOTAL AVERAGE LENGTH OF STAY	5.		
D.	CASE MIX INDEX			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.2622	0 1.25770	(0.00450)
2	MEDICARE	1.5150	0 1.45920	(0.05580)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	1.0216 1.0216		
	OTHER MEDICAL ASSISTANCE	0.0000		0.00000
	CHAMPUS / TRICARE	0.8748		0.03720
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	1.0510 1.3306		(0.03880) (0.05729)
	TOTAL CASE MIX INDEX	1.3125		(0.04310)
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$269,084,624	\$263,412,870	(\$5,671,754)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$86,858,753	\$75,476,541	(\$11,382,212)
3	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$182,225,871	\$187,936,329	ΦE 740 450
	TOTAL NON-GOVERNMENT CONTRACTOAL ALLOWANCES TOTAL ACTUAL DISCOUNT PERCENTAGE	67.72%		\$5,710,458 3.63%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,767,520		\$7,746
	EMPLOYEE SELF INSURANCE ALLOWANCE UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$7,350,058 \$0		(\$128,091)
'	OHCA INPUT)	Ψ.	ΨΟ	\$0
	CHARITY CARE	\$5,644,280		(\$905,102)
	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$3,692,986 \$9,337,266		\$54,776 (\$850,326)
	TOTAL OTHER OPERATING REVENUE	\$8,214,242		(\$1,752,437)
12	TOTAL OPERATING EXPENSES	\$216,453,293	\$210,952,866	(\$5,500,427)
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,898.93580	3,643.55690	(255.37890)
2	MEDICARE	8,174.94000	7,884.05760	(290.88240)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	3,254.81760 3,254.81760	· · · · · · · · · · · · · · · · · · ·	(18.23880) (18.23880)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
	CHAMPUS / TRICARE	19.24560		0.81840
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	118.76300 11,449.0032 0		(16.53080) (308.30280)
		11,443.00320		·
	TOTAL CASE MIX ADJUSTED DISCHARGES	15,347.93900	14,784.25730	(563.68170)
В.			14,784.25730	(563.68170)
1	TOTAL CASE MIX ADJUSTED DISCHARGES OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,347.93900 4,058.6066	2 3,798.55377	(563.68170) -260.05285
1 2	TOTAL CASE MIX ADJUSTED DISCHARGES OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	15,347.93900 4,058.6066 2,892.3602	2 3,798.55377 9 2,917.23099	-260.05285 24.87070
1 2 3	TOTAL CASE MIX ADJUSTED DISCHARGES OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,347.93900 4,058.6066	2 3,798.55377 9 2,917.23099 7 3,183.55076	-260.05285 24.87070 385.68438 385.68438
1 2 3 4 5	TOTAL CASE MIX ADJUSTED DISCHARGES OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE	15,347.93900 4,058.6066 2,892.3602 2,797.8663 2,797.8663 0.0000	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000	-260.05285 24.87070 385.68438 385.68438 0.00000
1 2 3 4 5 6	TOTAL CASE MIX ADJUSTED DISCHARGES OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	15,347.93900 4,058.6066 2,892.3602 2,797.8663 2,797.8663	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 7 17.32366	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959
1 2 3 4 5 6	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	15,347.93900 4,058.6066 2,892.3602 2,797.8663 2,797.8663 0.0000 16.1740 238.5373 5,706.4007	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 7 17.32366 4 208.80743 3 6,118.10540	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959 -29.72991 411.70468
1 2 3 4 5 6 7	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICALID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES	15,347.93900 4,058.6066 2,892.3602 2,797.8663 2,797.8663 0.0000 16,1740 238.5373	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 7 17.32366 4 208.80743 3 6,118.10540	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959 -29.72991 411.70468
1 2 3 4 5 6 7	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	15,347.93900 4,058.6066 2,892.3602 2,797.8663 2,797.8663 0.0000 16.1740 238.5373 5,706.4007 9,765.0073	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 7 17.32366 4 208.80743 3 6,118.10540 5 9,916.65918	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959 -29.72991 411.70468 151.65182
1 2 3 4 5 6 7	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICALD OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,347.93900 4,058.6066 2,892.3602 2,797.8663 0,0000 16,1740 238.5373 5,706.4007 9,765.0073	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 7 17.32366 4 208.80743 3 6,118.10540 5 9,916.65918	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959 -29.72991 411.70468 151.65182
1 2 3 4 5 6 7 C.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	15,347.93900 4,058.6066 2,892.3602 2,797.8663 2,797.8663 0.0000 16.1740 238.5373 5,706.4007 9,765.0073	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 17.32366 4 208.80743 3 6,118.10540 5 9,916.65918 \$10,227.58 \$7,203.82	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959 -29.72991 411.70468 151.65182
1 2 3 4 5 6 7 C.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICALD OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	15,347.93900 4,058.6066 2,892.3602 2,797.8663 0,0000 16.1740 238.5373 5,706.4007 9,765.0073 \$11,769.71 \$8,141.07	2 3,798.55377 9 2,917.23099 7 3,183.55076 7 3,183.55076 0 0.00000 7 17.32366 4 208.80743 3 6,118.10540 5 9,916.65918 \$10,227.58 \$7,203.82 4 \$6,767.49	-260.05285 24.87070 385.68438 385.68438 0.00000 1.14959 -29.72991 411.70468 151.65182

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015

REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

(4)	(0)	(2)	///	(F)
(1)	(2)	(3)	(4)	(5)
		ACTUAL FY	ACTUAL FY	AMOUNT
LINE	DESCRIPTION	<u>2014</u>	<u>2015</u>	DIFFERENCE
		***	^ 1 12	/*****
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,724.11 \$7.575.30	\$1,755.13	(\$968.98)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,640.83	\$7,075.41 \$7,852.26	(\$499.88) (\$788.57)
	TOTAL INITATILAT I ATMILIAT I LIK CASE MIN ADSOSTED DISCHARGE	ψ0,040.03	Ψ1,032.20	(\$7.00.07)
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
	MONE COVERNMENT (INCLUDING OFFE DAY (TININGUED)	\$44.007.50	640.044.55	(0040.04)
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$11,027.56 \$7.464.17	\$10,814.55 \$8,797.40	(\$213.01) \$1,333.22
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,143.54	\$5,477.01	\$1,333.47
	MEDICAID	\$4,143.54	\$5,477.01	\$1,333.47
	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
	CHAMPUS / TRICARE	\$7,525.50	\$7,427.76	(\$97.74)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$2,578.62	\$5,825.13	\$3,246.51
	TOTAL GOVERNMENT OUTPATIENT PATMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$5,836.23	\$7,065.76	\$1,229.53
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,993.89	\$8,501.73	\$507.83
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
	MEDICAID	#0.000.c==	M40 570 040	Φ4 070 005
	MEDICAID OTHER MEDICAL ASSISTANCE	\$9,290,677 \$0	\$10,570,612 \$0	\$1,279,935 \$0
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,808,720	\$1,177,662	(\$631,058)
0	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$11,099,397	\$11,748,274	\$648,876
		VIII,000,00 1	*** .,,	\$0.0,0.0
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	OGY)		
		A 005 475 400	**********	A40 700 000
1	TOTAL COVERNMENT DEDUCTIONS	\$905,475,426	\$916,257,718	\$10,782,292
3	TOTAL GOVERNMENT DEDUCTIONS UNCOMPENSATED CARE	\$495,882,869 \$9,337,266	\$512,213,909 \$8,486,940	\$16,331,040 (\$850,326)
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$182,225,871	\$187,936,329	\$5,710,458
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,350,058	\$7,221,967	(\$128,091)
6	TOTAL ADJUSTMENTS	\$694,796,064	\$715,859,145	\$21,063,081
	TOTAL ACCRUED PAYMENTS	\$210,679,362	\$200,398,573	(\$10,280,789)
	UCP DSH PAYMENTS (OHCA INPUT) NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$0 \$210,679,362	\$0 \$200,398,573	\$0 (\$10,280,789)
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2326726446	0.2187141991	(0.0139584455)
11	COST OF UNCOMPENSATED CARE	\$2,172,526	\$1,856,214	(\$316,312)
	MEDICAL ASSISTANCE UNDERPAYMENT	\$12,532,746	\$5,306,488	(\$7,226,259)
	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$14,705,273	\$7,162,702	(\$7,542,571)
		ψ11,700,270	ψ1,102,102	(ψ1,012,011)
VII.	RATIOS			
	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.67%	30.54%	-6.13%
	MEDICARE	24.06% 19.82%		-3.65% 1.19%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	19.82%		1.19%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	22.12%		-7.78%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	9.40%	6.25%	-3.15%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	TOTAL DATIO OF INDATIFAT DAVMENTO TO INDATIFAT OLIADOFO	22.92%		-2.36%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	26.34%	22.97%	-3.37%
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	27.22%	25.68%	-1.54%
	MEDICARE	14.56%		2.52%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13.07%		4.39%
	MEDICAID OTHER MEDICAL ASSISTANCE	13.07%	17.46% 0.00%	4.39% 0.00%
	CHAMPUS / TRICARE	23.33%		-4.77%
_	UNINSURED (INCLUDED IN NON-GOVERNMENT)	8.47%	20.50%	12.04%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
		14.02%		3.21%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	19.42%	20.52%	1.10%
VIII	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIA'	TIONS		
۷ 111،	MET REVENUE, GROSS REVENUE AND UNCONFENSATED CARE RECONCILIA	110110	1	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENT	S .		
۸.	RESOLUTION OF SHOW DEFINED HET REFEROE TO HOST HAE ASSITED FIN. STATEMENT	Ĭ		
1	TOTAL ACCRUED PAYMENTS	\$210,679,361	\$200,398,576	(\$10,280,785)

WATERBURY 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) FY ACTUAL ACTUAL FΥ **AMOUNT** INE DESCRIPTION <u> 201</u>4 **DIFFERENCE 2015** PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA \$0 INPUT) OHCA DEFINED NET REVENUE \$210,679,361 \$200,398,576 (\$10,280,785) PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE (\$5,641,985 4 CALCULATED NET REVENUE \$214,737,104 \$192,703,886 (\$22,033,218) NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$208,626,652 \$192,703,886 5 (\$15,922,766) REPORTING) 6 VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) \$6,110,452 \$0 (\$6,110,452 В. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED GROSS REVENUE \$905,475,426 \$916,257,718 \$10,782,292 PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE \$79,932,300 \$80,287,239 \$354,939 CALCULATED GROSS REVENUE \$985,407,726 \$996,544,957 \$11,137,231 GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL \$985,407,726 \$996,544,955 \$11,137,229 3 REPORTING) VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500) 4 \$0 \$2 \$2 С RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE \$9,337,266 \$8,486,940 \$195,462 \$583,860 \$388,398 CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) \$9,532,728 \$9,070,800 (\$461.928 3 UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING) \$9,532,729 \$9,070,799 (\$461,930

\$1

\$2

VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)

	WATERBURY HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2015 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
	DAGILINI ONDERN ANNI AONI NO CELEBRA	
(1)	(2)	(3)
		ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	FY 2015
I.	ACCRUED CHARGES AND PAYMENTS	
	INDATIFALT ACCOUNTS OUT DOES	
	INPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$122,009,934
2	MEDICARE	278,300,873
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	104,268,326
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	104,268,326
6	CHAMPUS / TRICARE	880,448
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,869,380
	TOTAL INPATIENT GOVERNMENT CHARGES	\$383,449,647
	TOTAL INPATIENT CHARGES	\$505,459,581
В.	OUTPATIENT ACCRUED CHARGES	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$159,979,736
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	150,262,434 99,862,668
4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	99,862,668
5	OTHER MEDICAL ASSISTANCE	0
	CHAMPUS / TRICARE	693,299
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT CHARGES	5,932,157 \$250,818,401
	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$410,798,137
		, , , , ,
	TOTAL ACCRUED CHARGES	\$004.000.070
2	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED) TOTAL GOVERNMENT ACCRUED CHARGES	\$281,989,670 634,268,048
	TOTAL ACCRUED CHARGES	\$916,257,718
D.	INPATIENT ACCRUED PAYMENTS	
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$37,264,776
2	MEDICARE	56,795,308
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	21,903,510 21,903,510
5	OTHER MEDICAL ASSISTANCE	21,903,310
	CHAMPUS / TRICARE	126,256
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	179,431
	TOTAL INPATIENT GOVERNMENT PAYMENTS TOTAL INPATIENT PAYMENTS	\$78,825,074 \$116,089,850
	TOTAL INFATIENT FATMENTS	\$110,009,030
E.	OUTPATIENT ACCRUED PAYMENTS	Ф44.0 7 0.004
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$41,079,661 25,664,040
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,436,349
4	MEDICAID	17,436,349
	OTHER MEDICAL ASSISTANCE	0
6 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	128,676 1,216,331
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$43,229,065
	TOTAL OUTPATIENT PAYMENTS	\$84,308,726
-	TOTAL ACCRUED PAYMENTS	
F.	TOTAL ACCRUED PAYMENTS TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$78,344,437
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	122,054,139
	TOTAL ACCRUED PAYMENTS	\$200,398,576
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRITED DISCHARGES	
A.	ACCRUED DISCHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,897
2	MEDICARE	5,403
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,324
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	3,324
6	CHAMPUS / TRICARE	22

	WATERBURY HOSPITAL	1
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2015 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
	DECORIDEION	ACTUAL
LINE	DESCRIPTION	FY 2015
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10
	TOTAL GOVERNMENT DISCHARGES TOTAL DISCHARGES	8,749 11,640
	TOTAL DISCHARGES	11,040
В.	CASE MIX INDEX NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.0577
2	MEDICARE	1.25770 1.45920
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.97370
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	0.97370
6	CHAMPUS / TRICARE	0.91200
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	1.01220 1.27337
	TOTAL CASE MIX INDEX	1.26947
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$263,412,870
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$75,476,541
3	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$187,936,329
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	71.35%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,775,266
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$7,221,967
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
	· · · · · · · · · · · · · · · · · · ·	
<u>8</u> 9	CHARITY CARE BAD DEBTS	\$4,739,178 \$3,747,762
10	TOTAL UNCOMPENSATED CARE	\$8,486,940
44	TOTAL OTHER OPERATING DEVENUE	#0.404.00F
11 12	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$6,461,805 \$210,952,866
	NET DEVENUE ORGAN DEVENUE AND UNION DENGATED OADE DEGONOU IATIONS	
1111.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
	TOTAL ACCOUNT DAYMENTO	0000 000 570
2	TOTAL ACCRUED PAYMENTS PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$200,398,576 \$0
	OHCA DEFINED NET REVENUE	\$200,398,576
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$7,694,690)
	CALCULATED NET REVENUE	\$192,703,886
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$192,703,886
		. , ,
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$916,257,718
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE CALCULATED GROSS REVENUE	\$80,287,239 \$996,544,957
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$996,544,955
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$2
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$8,486,940
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$583,860
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$9,070,800

-	WATERBURY HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2015	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
		ACTUAL
LINE	DESCRIPTION	FY 2015
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$9,070,799
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015

REPORT 650 - HOSPITAL UNCOMPENSATED CARE

(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2014	FY 2015	DIFFERENCE	<u>DIFFERENCE</u>
	11 1/10 1/10 1/10 1/10 1/10 1/10 1/10 1				
Α.	Hospital Charity Care (from HRS Report 500)			()	
1	Number of Applicants	4,484	3,859	(625)	-14%
2	Number of Approved Applicants	4,474	3,859	(615)	-14%
3	Total Charges (A)	\$5,644,280	\$4,739,178	(\$905,102)	-16%
4	Average Charges	\$1,262	\$1,228	(\$33)	-3%
			. ,	(,	
5	Ratio of Cost to Charges (RCC)	0.245937	0.236900	(0.009037)	-4%
6	Total Cost	\$1,388,137	\$1,122,711	(\$265,426)	-19%
7	Average Cost	\$310	\$291	(\$19)	-6%
		Ţ		(+ /	
8	Charity Care - Inpatient Charges	\$1,800,428	\$1,598,286	(\$202,142)	-11%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	837,567	958,688	121,121	14%
10	Charity Care - Emergency Department Charges	3,006,285	2,182,204	(824,081)	-27%
11	Total Charges (A)	\$5,644,280	\$4,739,178	(\$905,102)	-16%
	Total Gilai goo (7.)	ψο,οττ,200	Ψ-1,100,110	(ψοσο, 1ο2)	1070
12	Charity Care - Number of Patient Days	212	183	(29)	-14%
13	Charity Care - Number of Discharges	63	60	(3)	-5%
14	Charity Care - Number of Outpatient ED Visits	1,929	1,356	(573)	-30%
	Charity Care - Number of Outpatient Visits (Excludes ED				
15	Visits)	955	499	(456)	-48%
В.	Hospital Bad Debts (from HRS Report 500)				
	Bad Debts - Inpatient Services	¢4 205 604	¢4 550 476	¢272 F75	21%
2		\$1,285,601	\$1,558,176 910,620	\$272,575 128,902	
3	Bad Debts - Outpatient Services (Excludes ED Bad Debts) Bad Debts - Emergency Department	781,718 1,625,667	1,278,966	(346,701)	16% -21%
4	Total Bad Debts (A)	\$3,692,986	\$3,747,762	\$54,776	-∠1% 1%
-4	Total Bau Debts (A)	\$3,092,900	Φ3,747,762	\$34,77 0	1 70
C.	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$5,644,280	\$4,739,178	(\$905,102)	-16%
2	Bad Debts (A)	3,692,986	3,747,762	54,776	1%
3	Total Uncompensated Care (A)	\$9,337,266	\$8,486,940	(\$850,326)	-9%
	Total Chochiperioanca Caro (17)	ψο,σοι,μοσ	ψο, 100,010	(4000,020)	.
4	Uncompensated Care - Inpatient Services	\$3,086,029	\$3,156,462	\$70,433	2%
	Uncompensated Care - Outpatient Services (Excludes ED				
5	Unc. Care)	1,619,285	1,869,308	250,023	15%
6	Uncompensated Care - Emergency Department	4,631,952	3,461,170	(1,170,782)	-25%
7	Total Uncompensated Care (A)	\$9,337,266	\$8,486,940	(\$850,326)	-9%

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

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	'	WATERBURY HOSPI	TAL		
		TWELVE MONTHS ACTUA	L FILING		
		FISCAL YEAR 201	5		
	REPORT 685 - HOSPITAL N	ON-GOVERNMENT GROSS RE	EVENUE, CONTRACTUAL A	ALLOWANCES,	
	ACCI	RUED PAYMENTS AND DISCO	UNT PERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
(')	(2)	FY 2014	FY 2015	(0)	(%)
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
					
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$269,084,624	\$263,412,870	(\$5,671,754)	-2
2	Total Contractual Allowances	\$182,225,871	\$187,936,329	\$5,710,458	3
	Total Accrued Payments (A)	\$86,858,753	\$75,476,541	(\$11,382,212)	-13
	Total Discount Percentage	67.72%	71.35%	3.63%	5
(A) A	ccrued Payments associated with Non-Govern	ment Contractual Allowances r	must exclude any reduction	n for Uncompensated	d Care.

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
Α.	Gross and Net Revenue			
1	Inpatient Gross Revenue	\$477,310,641	\$503,526,979	\$505,459,581
2	Outpatient Gross Revenue	\$380,425,810	\$401,948,447	\$410,798,137
3	Total Gross Patient Revenue	\$857,736,451	\$905,475,426	\$916,257,718
4	Net Patient Revenue	\$207,698,016	\$208,626,652	\$192,703,886
В.	Total Operating Expenses			
1	Total Operating Expense	\$213,170,829	\$216,453,293	\$210,952,866
C.	<u>Utilization Statistics</u>			
1	Patient Days	55,099	58,082	55,390
2	Discharges	11,847	11,693	11,646
3	Average Length of Stay	4.7	5.0	4.8
4	Equivalent (Adjusted) Patient Days (EPD)	99,014	104,447	100,407
0	Equivalent (Adjusted) Discharges (ED)	21,289	21,027	21,111
D.	Case Mix Statistics			
1	Case Mix Index	1.31687	1.31257	1.26947
2	Case Mix Adjusted Patient Days (CMAPD)	72,558	76,237	70,316
3	Case Mix Adjusted Discharges (CMAD)	15,601	15,348	14,784
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	130,389	137,094	127,463
5	Case Mix Adjusted Equivalent Discharges (CMAED)	28,035	27,600	26,800
E.	Gross Revenue Per Statistic			
1	Total Gross Revenue per Patient Day	\$15,567	\$15,590	\$16,542
2	Total Gross Revenue per Discharge	\$72,401	\$77,437	\$78,676
3	Total Gross Revenue per EPD	\$8,663	\$8,669	\$9,125
4	Total Gross Revenue per ED	\$40,290	\$43,062	\$43,402
5	Total Gross Revenue per CMAEPD	\$6,578	\$6,605	\$7,188
6	Total Gross Revenue per CMAED	\$30,595	\$32,807	\$34,189
7	Inpatient Gross Revenue per EPD	\$4,821	\$4,821	\$5,034
8	Inpatient Gross Revenue per ED	\$22,420	\$23,947	\$23,943

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE

	T.			
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
LINL	DESCRIPTION	<u>F1 2013</u>	<u>F1 2014</u>	<u>F1 2013</u>
F.	Net Revenue Per Statistic			
1	Net Patient Revenue per Patient Day	\$3,770	\$3,592	\$3,479
2	Net Patient Revenue per Discharge	\$17,532	\$17,842	\$16,547
3	Net Patient Revenue per EPD	\$2,098	\$1,997	\$1,919
4	Net Patient Revenue per ED	\$9,756	\$9,922	\$9,128
5	Net Patient Revenue per CMAEPD	\$1,593	\$1,522	\$1,512
6	Net Patient Revenue per CMAED	\$7,408	\$7,559	\$7,191
G.	Operating Expense Per Statistic			
1	Total Operating Expense per Patient Day	\$3,869	\$3,727	\$3,809
2	Total Operating Expense per Discharge	\$17,994	\$18,511	\$18,114
3	Total Operating Expense per EPD	\$2,153	\$2,072	\$2,101
4	Total Operating Expense per ED	\$10,013	\$10,294	\$9,993
5	Total Operating Expense per CMAEPD	\$1,635	\$1,579	\$1,655
6	Total Operating Expense per CMAED	\$7,604	\$7,843	\$7,871
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Н.	Nursing Salary and Fringe Benefits Expense			
1	Nursing Salary Expense	\$31,551,418	\$32,573,504	\$31,988,923
2	Nursing Fringe Benefits Expense	\$9,453,373	\$9,167,076	\$10,356,276
3	Total Nursing Salary and Fringe Benefits Expense	\$41,004,791	\$41,740,580	\$42,345,199
I.	Physician Salary and Fringe Expense			
1	Physician Salary Expense	\$5,383,409	\$3,568,677	\$5,125,182
2	Physician Fringe Benefits Expense	\$1,612,966	\$1,004,323	\$1,659,256
3	Total Physician Salary and Fringe Benefits Expense	\$6,996,375	\$4,573,000	\$6,784,438
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense			
1	Non-Nursing, Non-Physician Salary Expense	\$47,560,322	\$47,766,756	\$43,729,677
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$14,249,929	\$13,442,873	\$14,157,295
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$61,810,251	\$61,209,629	\$57,886,972

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2015

REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE

(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	ACTUAL FY 2015
K.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$84,495,149	\$83,908,937	\$80,843,782
2	Total Fringe Benefits Expense	\$25,316,268	\$23,614,272	\$26,172,827
3	Total Salary and Fringe Benefits Expense	\$109,811,417	\$107,523,209	\$107,016,609
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	335.5	343.2	331.9
2	Total Physician FTEs	62.9	33.0	53.9
3	Total Non-Nursing, Non-Physician FTEs	810.7	775.3	734.9
4	Total Full Time Equivalent Employees (FTEs)	1,209.1	1,151.5	1,120.7
М.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$94,043	\$94,911	\$96,381
2	Nursing Fringe Benefits Expense per FTE	\$28,177	\$26,711	\$31,203
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$122,220	\$121,622	\$127,584
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$85,587	\$108,142	\$95,087
2	Physician Fringe Benefits Expense per FTE	\$25,643	\$30,434	\$30,784
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$111,230	\$138,576	\$125,871
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expens	e per FTE		
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$58,666	\$61,611	\$59,504
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$17,577	\$17,339	\$19,264
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$76,243	\$78,950	\$78,769
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$69,883	\$72,869	\$72,137
2	Total Fringe Benefits Expense per FTE	\$20,938	\$20,507	\$23,354
3	Total Salary and Fringe Benefits Expense per FTE	\$90,821	\$93,377	\$95,491
Q.	Total Salary and Fringe Ben. Expense per Statistic			

WATERBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2015 **REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE** (2) (1) (3) (4) (5) **ACTUAL** ACTUAL ACTUAL LINE DESCRIPTION FY 2013 FY 2014 FY 2015 1 Total Salary and Fringe Benefits Expense per Patient Day \$1,993 \$1,851 \$1,932 2 Total Salary and Fringe Benefits Expense per Discharge \$9,269 \$9,196 \$9,189 3 Total Salary and Fringe Benefits Expense per EPD \$1,109 \$1,029 \$1,066 \$5,158 4 Total Salary and Fringe Benefits Expense per ED \$5,114 \$5,069 5 Total Salary and Fringe Benefits Expense per CMAEPD \$842 \$784 \$840 Total Salary and Fringe Benefits Expense per CMAED \$3,896 \$3,993 \$3,917 6