BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)		
LINE	DESCRIPTION	AFFILIATE INFORMATION		
А.	AFFILIATE NAME	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)		
A.		YALE NEW HAVEN HEALTH SERVICES CORPORATION IS THE SOLE MEMBER OF BRIDGEPORT		
		HOSPITAL AND SUBSIDIARIES, GHCS AND YALE NEW HAVEN HOSPITAL. IT PROVIDES		
1	Affiliate Description	MANAGEMENT SERVICES TO ITS SUBSIDIARIES.		
2	Affiliate type of service	Parent Corporation		
3	Tax Status	Not for Profit		
4 5	Street Address	789 Howard Avenue New Haven		
6	Town State	Connecticut		
7	Zip Code	06519 -		
8	CEO Name	MARNA BORGSTROM		
9	CEO Title	PRESIDENT & CEO		
	CT Agent Name	Rebecca A. Matthews Atty. Dir.		
11	CT Agent Company	YNHHSC		
	CT Agent Company Street Address	60 Temple Street, 5th Floor, Suite 5B		
	CT Agent Town	New Haven		
	CT Agent State	Connecticut		
15	CT Agent Zip Code	06510 -		
_		BRIDGEPORT HOSPITAL AND SUBSIDIARIES		
В.	AFFILIATE NAME	THE SOLE MEMBER, BRIDGEPORT HOSPITAL WAS ESTABLISHED AS A NOT FOR PROFIT,		
		NONSTOCK, CONNECTICUT CORPORATION TO PROMOTE AND CARRY OUT CHARITABLE AND		
1	Affiliate Description	EDUCATIONAL ACTIVITIES.		
2	Affiliate type of service	Hospital		
3	Tax Status	Not for Profit		
4	Street Address	267 Grant Street, P.O. Box 1234		
5	Town	Bridgeport		
6	State	Connecticut		
7	Zip Code	06610 -		
8		William Jennings President & CEO		
9 10	CEO Title	Dr. Michael Ivy		
	CT Agent Name CT Agent Company	Bridgeport Hospital		
	CT Agent Company CT Agent Company Street Address	267 Grant Street, P.O. Box 5000		
	CT Agent Town	Bridgeport		
	CT Agent State	Connecticut		
	CT Agent Zip Code	06610 -		
C.	AFFILIATE NAME	BRIDGEPORT HOSPITAL FOUNDATION, INC.		
		THE FOUNDATION WAS FORMED TO SOLICIT CONTRIBUTIONS FOR THE BENEFIT OF		
1	Affiliate Description	BRIDGEPORT HOSPITAL AND SUBSIDIARIES. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK CONNECTICUT CORPORATION.		
2	Affiliate type of service	Fund Raising/Management		
3	Tax Status	Not for Profit		
4	Street Address	267 GRANT STREET, PO BOX 5000		
5	Town	Bridgeport		
6	State	Connecticut		
7	Zip Code	06610 -		
8	CEO Name	Steve Jakab		
9	CEO Title	President		
	CT Agent Name	Jennifer Wilcox		
11	CT Agent Company	Bridgeport Hospital		

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)
	DESCRIPTION	AFFILIATE INFORMATION
	CT Agent Company Street Address	267 Grant Street
-	CT Agent Town	Bridgeport
	CT Agent State	Connecticut 06610 -
15	CT Agent Zip Code	06610 -
D.	AFFILIATE NAME	BRIDGEPORT RENEWAL, LLC
		Bridgeport Renewal, LLC is a 100% controlled ownership of SCHS Properties, Inc. Its purpose is holding
		titles to property and collecting income. It is not tax exempt and all of its income/loss passes straight
1	Affiliate Description	through to SCHS Properties.
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	Not for Profit
4	Street Address	267 Grant Street
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	Norman Roth
9	CEO Title	President
	CT Agent Name	Jennifer Wilcox
	CT Agent Company	Bridgeport Hospital
	CT Agent Company Street Address	267 Grant Street
	CT Agent Town	Bridgeport
14 15	CT Agent State	Connecticut 06610 -
15	CT Agent Zip Code	00010 -
E.	AFFILIATE NAME	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)
		CENTURY OPERATES AN AGENCY SPECIALIZING IN HEALTHCARE PATIENT RECEIVABLE
1	Affiliate Description	COLLECTIONS IN WHICH BRIDGEPORT HOSPITAL OWNS 47.6%.
2	Affiliate type of service	Collection Agency
3	Tax Status	For Profit
4	Street Address	23 Maiden Lane
5	Town	North Haven
6	State	Connecticut
7		00170
8	Zip Code	06473 -
	CEO Name	John Skelly
9	CEO Name CEO Title	John Skelly Chairman of the Board
9 10	CEO Name CEO Title CT Agent Name	John Skelly Chairman of the Board Steve Markesich
9 10 11	CEO Name CEO Title CT Agent Name CT Agent Company	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc.
9 10 11 12	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane
9 10 11 12 13	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven
9 10 11 12 13 14	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut
9 10 11 12 13	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven
9 10 11 12 13 14 15	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 -
9 10 11 12 13 14	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC.
9 10 11 12 13 14 15	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent Town CT Agent State CT Agent Zip Code	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR
9 10 11 12 13 14 15 F.	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND
9 10 11 12 13 14 15 F.	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT THEREOF, LESS EXPENSES, TO BRIDGEPORT HOSPITAL
9 10 11 12 13 14 15 F. 1 2	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT THEREOF, LESS EXPENSES, TO BRIDGEPORT HOSPITAL Other HealthCare Svcs(Specify)
9 10 11 12 13 14 15 F. 1 2 3	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT THEREOF, LESS EXPENSES, TO BRIDGEPORT HOSPITAL Other HealthCare Svcs(Specify) Not for Profit
9 10 11 12 13 14 15 F. 1 2 3 4	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status Street Address	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT THEREOF, LESS EXPENSES, TO BRIDGEPORT HOSPITAL Other HealthCare Svcs(Specify) Not for Profit 267 GRANT STREET, PO BOX 5000
9 10 11 12 13 14 15 F. 1 2 3	CEO Name CEO Title CT Agent Name CT Agent Company CT Agent Company Street Address CT Agent Town CT Agent State CT Agent Zip Code AFFILIATE NAME Affiliate Description Affiliate type of service Tax Status	John Skelly Chairman of the Board Steve Markesich Century Financial Serivces, Inc. 23 Malden Lane North Haven Connecticut 06473 - SCHS PROPERTIES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT THEREOF, LESS EXPENSES, TO BRIDGEPORT HOSPITAL Other HealthCare Svcs(Specify) Not for Profit

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
7	Zip Code	06610 -
8	CEO Name	William Jennings
9	CEO Title	CEO
10	CT Agent Name	Jennifer Wilcox
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	267 Grant Street
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -
G.	AFFILIATE NAME	SURGERY CENTER OF FAIRFIELD COUNTY, LLC
1	Affiliate Description	SCA IS AN AMBULATORY SURGERY FACILITY IN WHICH BRIDGEPORT HOSPITAL OWNS 10%.
2	Affiliate type of service	Ambulatory/OP Surgery Center
3	Tax Status	For Profit
4	Street Address	112 QUARRY ROAD
5	Town	TRUMBULL
6	State	Connecticut
7	Zip Code	06611 -
8	CEO Name	Faith Kycia
9	CEO Title	Administrator
	CT Agent Name	CT CORPORATION SYSTEM
	CT Agent Company	SURGERY CENTER OF FAIRFIELD COUNTY
	CT Agent Company Street Address	112 QUARRY ROAD
13	CT Agent Town	TRUMBULL
	CT Agent State	Connecticut
15	CT Agent Zip Code	06611 -

* P.O. BOX IS UNACCEPTABLE WITHOUT A

STREET ADDRESS FOR EACH AGENT COMPANY

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2015
	BRIDGEPORT HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0
5			
		Total:	\$0
в.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
С.	BRIDGEPORT HOSPITAL AND SUBSIDIARIES		
1		Unrestricted	\$110,843,000
2		Temporarily Restricted by Donor	\$34,845,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$22,876,000
5		Intercompany Eliminations	\$0
		Total:	\$168,564,000
D.	BRIDGEPORT HOSPITAL FOUNDATION, INC.		
1		Unrestricted	\$34,764,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$17,035,000
4		Permanently Restricted by Donor	\$17,468,000
5		Intercompany Eliminations	(\$69,267,000)
		Total:	\$0
Ε.	BRIDGEPORT RENEWAL, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY		
	(CENTURY)		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	SCHS PROPERTIES, INC.		
		Liprostrictod	¢060.000
1		Unrestricted	\$863,000

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2015
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$863,000
Н.	SURGERY CENTER OF FAIRFIELD COUNTY, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$238,694,000
	Intercompany Eliminations		(\$69,267,000)
	Total of all Affiliates	Fund Balance:	\$169,427,000

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Α.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$24,675,395)
1		Shared Information Services	09/30/2015	(\$2,246,969)
2		Management and Business support	09/30/2015	(\$27,615,300)
3		MIS and Software	09/30/2015	(\$21,873,462)
4		Material Management	09/30/2015	(\$1,091,165)
5		Financial Services, Compliance	09/30/2015	(\$5,884,760)
6		Cash Payments	09/30/2015	\$71,306,587
7		Blood Products	09/30/2015	(\$1,585,839)
8		Legal Services	09/30/2015	(\$2,733,027)
9		Insurance	09/30/2015	(\$1,367,540)
10		Collections	09/30/2015	(\$160,090)
11		NEMG Community Practices	09/30/2015	\$2,731,680
12		Advertising	09/30/2015	(\$2,601,650)
13		HR Consulting	09/30/2015	(\$2,001,030) (\$799,925)
14		Patient Satisfaction Consulting	09/30/2015	(\$154,881)
15		rebates	09/30/2015	\$1,256,660
16		Other Charges	09/30/2015	(\$427)
10		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$17,495,503)
			9/50/2015	(\$17,495,505)
В.	BRIDGEPORT HOSPITAL AND SUBSIDIARIES			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report	0,0012011	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
~	BRIDGEPORT HOSPITAL FOUNDATION, INC.			
C.	BRIDGEFORT HOSPITAL FOUNDATION, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$1,583,228
1		Rental reimbursement to Bridgeport Hospital	09/30/2015	\$4,200
2		Audit fees reimbursed to Bridgeport Hospital	09/30/2015	\$21,617
3		Management Fees to Bridgeport Hospital	09/30/2015	\$294,952
4		Insurance expense reimbursed to Bridgeport Hospital	09/30/2015	\$15,881
5		Salary and Benefits Reimbursed to Bridgeport Hospital	09/30/2015	\$2,791,971
6		Services provided by hospital	09/30/2015	\$3,941,042
7		cash	09/30/2015	(\$6,359,661)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$2,293,230

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
				TRANSFER TO / FROM
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	HOSPITAL
D.	BRIDGEPORT RENEWAL, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0 \$0
		Nothing to Report Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$ 0
E.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report		\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
_				
F.	SCHS PROPERTIES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$126,514
1		Reimbursements/Fund Transfers	09/30/2015	\$30,279
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$156,793
G.	SURGERY CENTER OF FAIRFIELD COUNTY, LLC			
			0/00/0044	
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0 \$0
		Nothing to Report Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0 \$0
			3/30/2013	_
			Grand Total:	(\$15,045,480)

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(2)	(3)	(4)	(5)	(6)
AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS		DATE	AMOUNT
			10/04/0044	A0 445 074
		Intercompany Balance	10/01/2014	\$2,145,871
YALE NEW HAVEN HEALTH SERVICES CORPORATION INC. (YNHHSC)				
TALE NEW HAVEN HEAETH DERVICED CONFORTION, INC. (THINTOO)		Nothing to Report		\$0
		Total:	9/30/2015	\$0
BRIDGEPORT HOSPITAL AND SUBSIDIARIES				
				\$0
		Total:	9/30/2015	\$0
BRIDGEPORT HOSPITAL FOUNDATION, INC.		Nothing to Report		\$0
			9/30/2015	\$0 \$0
			0/00/2010	ţ.
BRIDGEPORT RENEWAL, LLC				
		Nothing to Report		\$0
		Total:	9/30/2015	\$0
CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		Nothing to Day art		* 0
			0/20/2015	\$0 \$0
		Total.	9/30/2013	Φ
SCHS PROPERTIES, INC.				
		Nothing to Report		\$0
		Total:	9/30/2015	\$0
SURGERY CENTER OF FAIRFIELD COUNTY, LLC				
				\$0
		Total:	9/30/2015	\$0
		Ending Unconsolidated		
		Intercompany Balance	9/30/2015	\$2,145,871
	AFFILIATE TRANSFERRING FUNDS YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC) BRIDGEPORT HOSPITAL AND SUBSIDIARIES BRIDGEPORT HOSPITAL FOUNDATION, INC.	AFFILIATE TRANSFERRING FUNDS AFFILIATE RECEIVING FUNDS YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC) BRIDGEPORT HOSPITAL AND SUBSIDIARIES BRIDGEPORT HOSPITAL FOUNDATION, INC. BRIDGEPORT HOSPITAL FOUNDATION, INC. BRIDGEPORT RENEWAL, LLC CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY) SCHS PROPERTIES, INC.	AFFILIATE TRANSFERRING FUNDS AFFILIATE RECEIVING FUNDS DESCRIPTION OF TRANSFER Beginning Unconsolidated Intercompany Balance Intercompany Balance Balance Intercompany Balance In	AFFILIATE TRANSFERRING FUNDS AFFILIATE RECEIVING FUNDS DESCRIPTION OF TRANSFER DATE Wall Beginning Unconsolidated Intercompany Balance 10/01/2014 Yale New HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC) Nothing to Report 9/30/2015 BRIDGEPORT HOSPITAL AND SUBSIDIARIES 9/30/2015 9/30/2015 BRIDGEPORT HOSPITAL FOUNDATION, INC. Nothing to Report 9/30/2015 BRIDGEPORT HOSPITAL FOUNDATION, INC. 1000 (2000) 9/30/2015 BRIDGEPORT RENEWAL, LLC 1000 (2000) 1000 (2000) BRIDGEPORT RENEWAL, LLC 1000 (2000) 1000 (2000) SCHS PROPERTIES, INC. 1000 (2000) 1000 (2000) SCHS PROPERTIES, INC. 1000 (2000) 1000 (2000) SUBGEPORT RENEWAL, LLC 1000 (2000) 1000 (2000) SCHS PROPERTIES, INC. 1000 (2000) 1000 (2000) SCHS PROPERTIES, INC. 1000 (2000) 1000 (2000) SUBGERY CENTER OF FAIRFIELD COUNTY, LLC 1000 (2000) 1000 (2000) SUBGERY CENTER OF FAIRFIELD COUNTY, LLC 1000 (2000) 1000 (2000) BRIDGEPORT FOR FAIRFIELD COUNTY, LLC 1000 (2000) 1000 (2000)

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL

(4)	(0)		(2)	(4)
(1)	(2) AFFILIATE NAME &		(3)	(4)
	DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
			AMOONT	DATE
Α.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)			
0	Nothing to Report		\$0	
		otal:	\$0	9/30/2015
В.	BRIDGEPORT HOSPITAL AND SUBSIDIARIES			
0	Nothing to Report		\$0	
	T	otal:	\$0	9/30/2015
C.	BRIDGEPORT HOSPITAL FOUNDATION, INC.			
0	Nothing to Report		\$0	
	÷ .	otal:	\$0	9/30/2015
D.	BRIDGEPORT RENEWAL, LLC			
0	Nothing to Report		\$0	
		otal:	\$0 \$0	9/30/2015
	·		**	0/00/2010
Ε.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)			
<u> </u>	Nothing to Report	-	¢0.	
0		otal:	\$0 \$0	9/30/2015
		otal.	\$U	9/30/2013
_				
F .	SCHS PROPERTIES, INC.			
0	Nothing to Report		\$0	
	T	otal:	\$0	9/30/2015
G.	SURGERY CENTER OF FAIRFIELD COUNTY, LLC			
0	Nothing to Report		\$0	
	T	otal:	\$0	9/30/2015
	Grand T	otal:	\$0	9/30/2015

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
Α.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)		
1	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC) YNHH Series E debt service related to Series E Obligated Group (YNHH and BH) debt	\$69,319,722	23
	Total:	\$69,319,722	
В.	BRIDGEPORT HOSPITAL AND SUBSIDIARIES		
0	Nothing to Report	\$0	0
	Total:	\$0	
C.	BRIDGEPORT HOSPITAL FOUNDATION, INC.	¢0	0
0	Nothing to Report Total:	\$0 \$0	0
	i otai.	\$0	
D.	BRIDGEPORT RENEWAL, LLC		
<u> </u>	Nothing to Report	\$0	0
-	Total:	\$0	-
		· · · · · ·	
Ε.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		
0	Nothing to Report	\$0	0
	Total:	\$0	
F .	SCHS PROPERTIES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
G .	SURGERY CENTER OF FAIRFIELD COUNTY, LLC Nothing to Report	\$0	0
0	Total:	\$0 \$0	0
		\$0	
	Grand Total:	\$69,319,722	

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR INDIGENT CARE AND FREE BEDS

A. Indi Beg 1 Don	SCRIPTION	FY 2014 ACTUAL	FY 2015		
A. Indi Beg 1 Don	SCRIPTION	ACTUAL			
1 Don			ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1 Don					
1 Don	ligent Care				
	ginning Balance	\$0.00	\$0.00		0%
-	nations	\$0.00	\$0.00	\$0.00	0%
2 Inco	ome	\$0.00	\$0.00	\$0.00	0%
3 Exp	penditures	\$0.00	\$0.00	\$0.00	0%
4 Unr	realized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
End	ding Balance	\$0.00	\$0.00	\$0.00	0%
5 Proj	jected Interest Income	\$0.00	\$0.00	\$0.00	0%
B. Free	ee Beds				
Beg	ginning Balance	\$13,648,865.36	\$14,503,862.59	\$854,997.23	6%
1 Don	nations	\$13,487.75	\$10,000.00		-26%
2 Inco		\$173,817.51	\$119,365.14	(\$54,452.37)	-31%
	penditures	\$687,500.00	\$750,000.00	\$62,500.00	9%
4 Unr	realized Gains and Losses	\$1,355,191.97	\$387,984.34	(\$967,207.63)	-71%
	ding Balance	\$14,503,862.59	\$14,271,212.07	(\$232,650.52)	-2%
5 Proj	jected Interest Income	\$600,000.00	\$600,000.00	\$0.00	0%
C. Oth	ner				
Beg	ginning Balance	\$0.00	\$0.00	\$0.00	0%
	nations	\$0.00	\$0.00	\$0.00	0%
2 Inco	ome	\$0.00	\$0.00	\$0.00	0%
	penditures	\$0.00	\$0.00	\$0.00	0%
4 Unr	realized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
End	ding Balance	\$0.00	\$0.00	\$0.00	0%
5 Proj	jected Interest Income	\$0.00	\$0.00	\$0.00	0%

BRIDGEPORT HOSPITAL

ANNUAL REPORTING **FISCAL YEAR 2015 REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL** A. Patient Activity (2) (3) (1) Name of Hospital Bed Fund (FULL NAME) Patient Amount Number of Applications for Hospital Bed Funds 190 1. Number of Patients receiving Hospital Bed Fund Grants 2. A. 190 2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed Funds: \$750,000.15 Caroline Betts Fund \$736.00 Cook Fund \$831.00 Ruth Gilbert Fund \$829.00 Carol Godfrey Fund \$829.00 Edward Godfrey Fund \$829.00 Eliz. Lockwood Fund \$1,659.00 6 McCord Fund \$4.146.00 Clarence Miller Fund \$4,855.39 8 Rogers Fund \$2,650.00 10 Florence Seeley Fund \$874.23 Terry Fund \$829.00 11 12 Woodruff Fund \$1,145.00 \$1,608.24 13 Susan Betts Fund 14 Susan Betts Fund \$1,588.36 15 Susan Betts Fund \$784.00 16 Rowland Fund \$3,967.00 \$1.366.00 17 Lane Fund 18 Lane Fund \$1,276.69 19 Lane Fund \$1,255.00 20 Lane Fund \$1,221.61 21 Lane Fund \$1,218.69 22 Lane Fund \$1,216.00 Lane Fund \$1.215.69 23 24 Lane Fund \$723.49 25 Mary Hawley Fund \$1,811.00 26 Mary Hawley Fund \$1,675.00 Mary Hawley Fund \$942.48 27 28 Mary Hawley Fund \$937.30 29 Mary Hawley Fund \$897.00 30 Mary Hawley Fund \$837.69 31 Mary Hawley Fund \$693.69 32 Mary Hawley Fund \$690.49 Mary Hawley Fund 33 \$624.69 Mary Hawley Fund 34 \$623.49 Mary Hawley Fund 35 \$618.49 Mary Hawley Fund 36 \$560.49 37 Mary Hawley Fund \$500.00 Mary Hawley Fund 38 \$387.73 Mary Hawley Fund 39 \$367.49 40 Mary Hawley Fund \$273.00 41 Mary Hawley Fund \$75.69 42 Nettleton Fund \$3,878.30 Margaret Mallet Fund \$1,554.00 43 Fable Fund 44 \$500.00 45 Fable Fund \$161.00 46 Fable Fund \$3,366.63 47 Mary Godfrey Fund \$1.413.16 48 Mary Godfrey Fund \$1,420.20 49 Mary Godfrey Fund \$753.00 50 Jacob Klein Fund \$1,681.00 Jacob Klein Fund \$1.405.00 51 52 Jacob Klein Fund \$617.00 \$1,726.92 53 Francis Leigh Fund 54 Francis Leigh Fund \$1,098.00 55 Francis Leigh Fund \$3,112.00 56 Francis Leigh Fund \$2,071.00 Francis Leigh Fund \$591.12 57 58 Francis Leigh Fund \$471.20 59 Francis Leigh Fund \$2,614.52 60 Francis Leigh Fund \$550.00 61 Francis Leigh Fund \$147.00 62 Mallet Fund \$1,413.16 63 Mallet Fund \$1,420.20 64 Mallet Fund \$848.00

BRIDGEPORT HOSPITAL

ANNUAL REPORTING **FISCAL YEAR 2015 REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL** A. Patient Activity (2) (3) (1) Name of Hospital Bed Fund (FULL NAME) Patient Amount Number of Applications for Hospital Bed Funds 190 1. 2. A. Number of Patients receiving Hospital Bed Fund Grants 2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed Funds: 190 \$750,000.15 65 Mallet Fund \$98.70 66 Mallet Fund \$141.00 67 Marsh fund \$6,118.74 68 Marsh fund \$560.00 69 Marsh fund \$39.63 70 **Richardson Fund** \$4,176.40 71 Richardson Fund \$559.00 Mrs. C.B.Seeley Fund \$2,477.00 72 73 Mrs. C.B.Seeley Fund \$2,306.00 74 Mrs. C.B.Seeley Fund \$1,341.00 75 Alice Setzer Fund \$5,076.71 Hobart Wheeler Fund \$26,830.00 76 Blind Fund \$20,513.26 77 Marietta Crowley Fund \$38,473.19 78 79 Pettingill Fund \$52.45 80 Pettingill Fund \$147.00 81 Pettingill Fund \$270.35 Pettingill Fund \$109.29 82 83 Pettingill Fund \$1,662.30 84 Pettingill Fund \$412.95 85 Archer Wheeler Fund \$75.00 Archer Wheeler Fund 86 \$258.16 87 Archer Wheeler Fund \$124.60 88 Archer Wheeler Fund \$1,426.00 89 Archer Wheeler Fund \$1,638.45 Archer Wheeler Fund 90 \$543.72 91 Archer Wheeler Fund \$100.00 \$150.00 92 Archer Wheeler Fund 93 Archer Wheeler Fund \$27,183.34 94 **Charles Ferry Fund** \$35,688.01 95 Charles Ferry Fund \$35,274.12 96 **Charles Ferry Fund** \$32,538.05 97 Mary Ferry Fund \$2,827.44 98 Mary Ferry Fund \$27,889.47 99 Mary Ferry Fund \$27,652.99 \$27,525.51 100 Mary Ferry Fund 101 Mary Ferry Fund \$27,425.22 \$27,321.16 102 Mary Ferry Fund 103 Mary Ferry Fund \$26,766.58 \$26,650.98 Mary Ferry Fund 104 105 Mary Ferry Fund \$25,788.16 106 Mary Ferry Fund \$24,479.76 107 Oliver Jennings Fund \$1,624.08 \$5,000.00 108 **Oliver Jennings Fund** 109 Marguand Fund \$41.78 Marguand Fund 110 \$36.67 111 Marguand Fund \$14.01 112 Marguand Fund \$45.99 113 Marguand Fund \$1,285.98 Marguand Fund 114 \$20.47 115 Marquand Fund \$112.32 Marquand Fund 116 \$200.00 117 Marguand Fund \$48.35 118 Marguand Fund \$81.96 119 Marguand Fund \$43.42 120 Marguand Fund \$499.56 121 Marquand Fund \$2,773.00 122 Marguand Fund \$35.00 123 Marguand Fund \$65.00 124 Marguand Fund \$1,559.04 125 Marguand Fund \$275.00 126 Marguand Fund \$65.00 127 Marquand Fund \$150.00 128 Marguand Fund \$863.47

BRIDGEPORT HOSPITAL

ANNUAL REPORTING **FISCAL YEAR 2015 REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL** A. Patient Activity (2) (3) (1) Name of Hospital Bed Fund (FULL NAME) Patient Amount Number of Applications for Hospital Bed Funds 190 1. 2. A. Number of Patients receiving Hospital Bed Fund Grants 2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed Funds: 190 \$750,000.15 129 Marguand Fund \$100.00 130 Marguand Fund \$100.00 131 Wakeman Fund \$1,426.00 132 Wakeman Fund \$11,100.37 133 Wakeman Fund \$200.00 134 Alice Setzer Fund \$5,076.71 135 Alice Setzer Fund \$21,789.44 136 Helen Wordin Fund \$35.28 137 Helen Wordin Fund \$71.91 138 Helen Wordin Fund \$75.00 139 Helen Wordin Fund \$1,120.89 140 Helen Wordin Fund \$1,000.00 141 Helen Wordin Fund \$75.00 142 Helen Wordin Fund \$150.00 143 Helen Wordin Fund \$1,150.00 144 Helen Wordin Fund \$75.00 145 Helen Wordin Fund \$4,046.86 146 Helen Wordin Fund \$18.00 147 Helen Wordin Fund \$200.00 148 Helen Wordin Fund \$500.00 149 Helen Wordin Fund \$200.00 150 Helen Wordin Fund \$500.00 151 Helen Wordin Fund \$270.70 152 Helen Wordin Fund \$500.00 153 Helen Wordin Fund \$1,864.64 154 Helen Wordin Fund \$500.00 155 Crosby Fund \$1,873.34 **Crosby Fund** \$1,872.00 156 157 Crosby Fund \$1,869.34 158 Crosby Fund \$1,869.34 \$1,869.34 159 Crosby Fund 160 Crosby Fund \$1.866.92 161 Crosby Fund \$1,866.92 162 **Crosby Fund** \$1,866.92 163 Crosby Fund \$1,866.92 164 Crosby Fund \$1,866.92 165 Crosby Fund \$1,866.92 Crosby Fund 166 \$1.865.47 167 Crosby Fund \$1,844.00 168 Leavenworth/Sherman Fund \$22.026.30 169 Sterling Free Bed Fund \$22,412.68 \$13,521.00 Gould Fund 170 Fannie Wording Fund 171 \$500.00 Fannie Wording Fund 172 \$25.00 173 Fannie Wording Fund \$45.00 Fannie Wording Fund 174 \$69.49 175 Fannie Wording Fund \$622.95 Fannie Wording Fund 176 \$150.00 177 Fannie Wording Fund \$500.00 Fannie Wording Fund 178 \$150.00 179 Fannie Wording Fund \$1,500.00 Fannie Wording Fund \$1,500.00 180 181 Fannie Wording Fund \$250.00 Fannie Wording Fund 182 \$500.00 183 Fannie Wording Fund \$689.89 184 Burnham Fund \$3,017.86 185 Burnham Fund \$3,000.52 186 Burnham Fund \$2,995.00 187 Burnham Fund \$2,995.00 188 Burnham Fund \$2,993.00 189 Burnham Fund \$2,984.00 190 Burnnam Fund \$2,629.00 Grand Total \$750,000.15

(1) Line	REPORT 17B - HOSPITA D FUND ACTIVITY (2)	FISCAL YEAR L BED FUNDS HELD C		Y THE HOSPITAL	
(1) Line					
(1) Line					
		(3)	(4)	(5)	(6)
	Name of Hospital Rod Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	• • •
(3) F	Name of Hospital Bed Fund				
	Fair Market Value of the Principal of each	individual Hospital Be	d Fund, or the Princi	pal attributable to eac	h Hospital Bed
(4) 1	Total Actual Earnings for each Hospital Be	ed Fund or the Earning	gs attributable to eac	h Hospital Bed Fund.	
(5)	Actual Dollar Amount of Earnings reinves	ted as Principal, if any	•		
(6)	Actual Dollar Amount of Earnings availabl	le for Patient Care.			
		<u></u>			
	Sarah Beardsley Fund	\$10,000.00	\$83.21	\$0.00	\$83.2
	Caroline Betts Fund	\$11,073.52	\$93.89	\$0.00	\$93.8
	Conlin Fund	\$13,775.00	\$114.62	\$0.00	\$114.
	Cook Fund	\$12,485.47	\$105.87	\$0.00	\$105.
	Couch Fund	\$6,658.47	\$53.45	\$0.00	\$53.
	Crane Value Fund	\$10,000.00	\$83.16	\$0.00	\$83.
	Fray Fund	\$6,721.68	\$52.87	\$0.00	\$52
	Ruth Gilbert Fund	\$12,481.83	\$105.83	\$0.00	\$105.
	Alice Godfrey Fund	\$1,953.00	\$16.24	\$0.00	\$16.
	Carol Godfrey Fund	\$12,481.83	\$105.83	\$0.00	\$105.
	Edward Godfrey Fund	\$12,481.83	\$105.83	\$0.00	\$105.
	Crissy Harral Fund	\$20,000.00	\$166.41	\$0.00	\$166.
	Hunt Fund	\$6,658.47	\$53.45	\$0.00	\$53.
	ves Fund	\$6,658.47	\$53.45	\$0.00	\$53.
	Jacoby Fund	\$2,824.30	\$22.47	\$0.00	\$22.
	Anna Jennings Fund	\$25,000.00	\$208.11	\$0.00	\$208.
	O. G. Jennings Fund	\$6,658.47	\$53.45	\$0.00	\$53.
	Abraham Klein Fund	\$8,327.34	\$66.85	\$0.00	\$66.
	Henry C. Knight Fund	\$10,000.00	\$83.21	\$0.00	\$83.
	Lacy Fund	\$15,732.00	\$130.82	\$0.00	\$130.
l	Leavenworth Fund	\$7,963.47	\$63.10	\$0.00	\$63.
F	Francis Leigh Fund	\$10,000.00	\$83.16	\$0.00	\$83
	Lewis Fund	\$6,658.47	\$53.45	\$0.00	\$53.
	Eliz. Lockwood Fund	\$11,645.43	\$104.74	\$0.00	\$104
	Maria Lockwood Fund	\$6,658.47	\$53.45	\$0.00	\$53.
	Lounsbury Fund	\$26,222.00	\$218.05	\$0.00	\$218.
	Lyon Fund	\$13,110.00	\$109.02	\$0.00	\$109.
	McCord Fund	\$29,113.86	\$261.84	\$0.00	\$261.
	Clarence Miller Fund	\$134,889.36	\$1,115.81	\$0.00	\$1,115
	Francis Perry Fund	\$10,000.00	\$83.16	\$0.00	\$83
	William Perry Fund	\$7,290.86	\$58.53	\$0.00	\$58
	Pflomm Fund	\$23,332.00	\$194.11	\$0.00	\$194
	DW Plumb Fund	\$7,290.86	\$58.53	\$0.00	\$58.
	Pomeroy Fund	\$18,500.00	\$153.90	\$0.00	\$153
	Rogers Fund	\$11,557.43	\$110.75	\$0.00	\$110
	Florence Seeley Fund	\$12,614.00	\$107.19	\$0.00	\$107.
	Stephens Fund	\$15,000.00	\$124.78	\$0.00	\$124
	Stoddard Fund	\$7,989.33	\$64.14	\$0.00	\$64
	Terry Fund	\$12,481.83	\$105.83	\$0.00	\$105
	David Trubee Fund	\$7,290.86	\$58.53	\$0.00	\$58
	Mary Trubee Fund	\$5,000.00	\$41.58	\$0.00	\$41.
	Warner Fund	\$10,000.00	\$83.21	\$0.00	\$83.
	Williams Fund	\$8,105.70	\$65.07	\$0.00	\$65.
١	Wood Fund	\$10,000.00	\$83.21	\$0.00	\$83.

FICE	OF HEALTH CARE ACCESS	ANNUAL REF	PORTING		BRIDGEPORT H				
		BRIDGEPORT H							
		ANNUAL REPO							
		FISCAL YEAR							
	REPORT 17B - HOSPIT	AL BED FUNDS HELD (OR ADMINISTERED B	Y THE HOSPITAL					
BED FUND ACTIVITY									
(1)	(2)	(3)	(4)	(5)	(6)				
ine	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Availa				
	Susan Betts Fund	\$8,950.65	\$90.42	\$0.00	\$90				
	Rowland Fund	\$8,936.18	\$88.50	\$0.00	\$88				
	Lane Fund	\$29,419.64	\$300.56	\$0.00	\$300				
	Mary Hawley Fund	\$62,419.72	\$585.98	\$0.00	\$585.				
	Nettleton Fund	\$13,848.18	\$137.47	\$0.00	\$137				
	Margaret Mallet Fund	\$9,650.64	\$85.31	\$0.00	\$85				
	Fable Fund	\$7,025.02	\$83.71	\$0.00	\$83				
	Mary Godfrey Fund	\$8,559.27	\$93.03	\$0.00	\$93				
	Jacob Klein Fund	\$13,673.73	\$134.89	\$0.00	\$134				
	Francis Leigh Fund	\$17,286.61	\$222.75	\$0.00	\$222				
	Mallett Fund	\$8,890.80	\$97.97	\$0.00	\$97.				
	Marsh Fund	\$16,666.83	\$179.36	\$0.00	\$179				
	Richardson Fund	\$8,890.95	\$103.49	\$0.00	\$103				
	Mrs. C.B. Seeley Fund	\$13,576.70	\$150.53	\$0.00	\$150				
	Alice Setzer Fund	\$253,912.68	\$2,072.82	\$0.00	\$2,072				
	Strong Fund	\$27,193.94	\$218.31	\$0.00	\$218				
	Hobart Wheeler Fund	\$287,811.09	\$2,492.49	\$0.00	\$2,492				
	Blind Fund	\$38,613.88	\$449.11	\$0.00	\$449				
	Marietta Crowley Fund	\$120,120.95	\$1,225.25	\$0.00	\$1,225				
	Thompson Fund	\$14,472.23	\$116.18	\$0.00	\$116				
	Mary Beardsley Fund	\$43,167.97	\$346.55	\$0.00	\$346				
	Cowd Fund	\$253,653.59	\$2,036.31	\$0.00	\$2,036				
	Brothwell Fund	\$303,050.78	\$2,432.87	\$0.00	\$2,432				
	E. Harral Fund	\$290,749.34	\$2,334.11	\$0.00	\$2,334				
	Pettingill Fund	\$44,821.65	\$377.82	\$0.00	\$377.				
	Archer Wheeler Fund	\$1,340,607.78	\$10,975.92	\$0.00	\$10,975				
	Charles Ferry Fund	\$1,115,835.67	\$9,659.78	\$0.00	\$9,659				
	Mary Ferry Fund	\$2,692,616.93	\$23,273.15	\$0.00	\$23,273				
	Oliver Jennings Fund	\$57,280.48	\$504.77	\$0.00	\$504.				
	Marquand Fund	\$453,345.73	\$3,696.50	\$0.00	\$3,696.				
	Wakeman Fund	\$281,468.06	\$2,345.91	\$0.00	\$2,345.				
	Annie Jennings Fund	\$40,578.98	\$325.76	\$0.00	\$325.				
	Sterling Free Bed Fund	\$418,329.17	\$3,507.70	\$0.00	\$3,507				
	Beach Fund	\$425,683.83	\$3,569.36	\$0.00	\$3,569.				
	Leavenworth Sherman	\$624,907.98	\$5,016.71	\$0.00	\$5,016				
	Barnum Fund	\$6,658.47	\$53.45	\$0.00	\$53.				
	Alice Setzer Fund	\$312,445.44	\$2,508.29	\$0.00	\$2,508.				
			AA AA A A						

REPORT 17B FUND ACTIVITY

Anne Drew Miller Fund

Helen Wordin Fund

Fannie Wording Fund

F. Weather Beardsley Fund

Armstrong Fund

Burnham Fund

Bartram Fund

Loomis Fund

Alice C. Watson

Stiles Hall Fund

Total Bed Funds :

Soules Fund

Crosby Fund

Atwater Fund

Gould Fund

Cole Fund

\$408,699.57

\$67,371.67

\$25,077.40

\$144,654.09

\$545,951.84

\$624,907.98

\$406,369.06

\$6,658.47

\$43,741.00

\$15,550.74

\$9,662.12

\$14,271,212.29

\$44,932.00

\$18,416.80

\$487,499.50

\$1,108,484.74

\$3,463.21

\$8,898.83

\$3,997.39

\$1,161.27

\$4,426.96

\$5,016.71

\$3,402.13

\$53.45

\$0.00

\$124.84

\$77.57

\$119,365.10

\$540.85

\$365.88

\$239.55

\$373.64

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

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\$0.00

\$3,463.21

\$8,898.83

\$3,997.39

\$1,161.27

\$4,426.96

\$5,016.71

\$3,402.13

\$53.45

\$0.00

\$124.84

\$77.57

\$119,365.10

\$540.85

\$365.88

\$239.55

\$373.64

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I.	GENERAL COLLECTION PROCESSES AND PROCEDURES	
A.	Hospital's processes and policies for assigning a debt to a Collection Agent	
		See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
В.	Hospital's processes and policies for compensating a Collection Agent for services rendered	Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	13.90%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
A	Collection Agent	
1	Collection Agent Name	Century Attorney Turnover
2	Collection Agent Type	Attorney
	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	160.00%
В	Collection Agent	
1	Collection Agent Name	Tobin, Carberry, OMallery, Riley, Selinger, P.C.
2	Collection Agent Type	Attorney

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. 6 Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent. 7 Collection Agent 1 Collection Agent Name 2 Collection Agent Type 3 Related / Not Related Entity 4 If the Hospital follows the same processes and Policies described in Section I, for assigning debt with this Collection Agent?	(1)	(2)	(3)
4 If the Hospital follows the same processes and policies described in Section 1, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section 1, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 6 Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent. 12.80% 1 Collection Agent 12.80% 2 Collection Agent Type Collection Agent Query Financial Services 3 Related I Not Related Entity Related 4 If the Hospital follows the same processes and policies described in Section 1, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section 1, for compensating this Collection Agent? indicate "Same as General Processes and Policies described in Section 1, for compensating this Collection Agent? indicate "Same as General Proceses and Policies" Otherwise Provide Details.	LINE	DESCRIPTION	COLLECTION INFORMATION
in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. 5 If the Hospital follows the same processes and Policies" Otherwise Provide Details. 6 Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent. 1 Collection Agent Name 2 Collection Agent Name 2 Collection Agent Type 3 Related / Not Related Entity 4 If the Hospital follows the same processes and Policies "Otherwise Provide Details. 5 If the Hospital follows the same processes and Policies Collection Agent Name 2 Collection Agent Name 3 Related / Not Related Entity 4 If the Hospital follows the same processes and Policies described in Section I, for assigning debt with this Collection Agent? 5 If the Hospital follows the same processes and Policies described in Section I, for assigning debt with this Collection Agent? 6 Recovery Rate on Accounts files as part or Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for assigning the Collection Agent? 9 Forvide Details. 6 Reco	3	Related / Not Related Entity	Not Related
in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent. 12.80% C Collection Agent 12.80% 1 Collection Agent Name Century Financial Services 2 Collection Agent Type Collection Agency 3 Related / Not Related Entity Related 4 If the Hospital follows the same processes and Policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Each collection agency is reimbursed for services rendered based on separately </th <th></th> <th>in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.</th> <th>See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).</th>		in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
accounts) to Collection Agent. 12.80% C Collection Agent Name Century Financial Services 2 Collection Agent Type Collection Agency 3 Related / Not Related Entity Related 4 If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Formance related contracts.		in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	
1 Collection Agent Name Century Financial Services 2 Collection Agent Type Collection Agency 3 Related / Not Related Entity Related 4 If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Related	6		12.80%
1 Collection Agent Name Century Financial Services 2 Collection Agent Type Collection Agency 3 Related / Not Related Entity Related 4 If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Provide performance related contracts.			
2 Collection Agent Type Collection Agency 3 Related / Not Related Entity Related 4 If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Provide Details			
3 Related / Not Related Entity Related 4 If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Provide Details			
4 If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22). 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts. 6 Recovery Rate on Accounts Assigned (excluding Medicare Provide Details			
in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. 5 If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. 6 Recovery Rate on Accounts Assigned (excluding Medicare			Related
in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details. Each collection agency is reimbursed for services rendered based on separately negotiated performance related contracts.		in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
		in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide	
	6		12.80%

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL EMPLOYEES

LINE	POSITION TITLE	EMPLOYEE NAME	SALARY	FRINGE BENEFITS	TOTAL
1.	Sr. VP/Medical Affairs	Michael Ivy	\$544,228	\$42,752	\$586,980
2.	Chairman of ED	Rockman ferrigno	\$483,316	\$33,618	\$516,934
3.	ER Physician	Jonathan Maisel	\$429,675	\$44,782	\$474,457
4.	VP, Performance & Risk Management	Ryan OConnell	\$383,300	\$53,102	\$436,402
5.	St. VP Patient Care Operations	Mary Ellen Kosturko	\$379,280	\$36,712	\$415,992
6.	ER Physician	Guilermo Katigbak	\$361,761	\$40,129	\$401,890
7.	ER Physician	Francisco Garrido	\$372,352	\$28,107	\$400,459
8.	ER Physician	Thomas Lamonte	\$352,934	\$44,750	\$397,684
9.	ER Physician	Michele Irving	\$338,310	\$27,259	\$365,569
10.	President, Foundation	Stephen Jakab	\$325,629	\$39,283	\$364,912
		Grand Total:	\$3,970,785	\$390,494	\$4,361,279

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC) ANNUAL REPORTING FISCAL YEAR 2015

REPORT 19B - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HEALTH SYSTEM EMPLOYEES

LINE	POSITION TITLE	EMPLOYEE NAME AND COMPANY	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO	Marna Borgstrom - Yale-New Haven Health Services Corp & Yale-New Haven Hospital	\$2,749,681	\$860,669	\$3,610,350
2.	Exec VP, YNHHSC; President, GH; & COO, BH	Norman Roth - Yale-New Haven Health Services Corp, Greenwich Hospital & Bridgeport Hospital	\$2,716,866	\$136,478	\$2,853,344
3.	Exec VP, YNHHSC; & President, YNHH	Richard DAquila - Yale-New Haven Health Services Corp & Yale-New Haven Hospital	\$1,800,904	\$447,095	\$2,247,999
4	VP, Corporate Business Office	David Wurcel - Yale-New Haven Health Services Corp	\$2,037,031	\$108,962	\$2,145,993
			φ <u>2</u> ,001,001	\$100,00Z	+- , : :0,000
5.	Exec VP, Corporate & Financial Services	James Staten - Yale-New Haven Health Services Corp & Yale-New Haven Hospital	\$1,402,979	\$412,372	\$1,815,351
6.	Exec VP, COO	Christopher OConnor - Yale-New Haven Health Services Corp	\$1,193,994	\$405,048	\$1,599,042
7.	Exec VP, YNHHSC & President, BH	William Jennings - Yale-New Haven Health Services Corp & Bridgeport Hospital	\$1,067,175	\$337,633	\$1,404,808
8.	Exec VP, Strategy & System Development	Gayle Capozzalo - Yale-New Haven Health Services Corp	\$1,184,276	\$83,476	\$1,267,752
9.	Sr VP, Information Systems & CIO	Daniel Barchi - Yale-New Haven Health Services Corp	\$864,218	\$301,075	\$1,165,293
10.	Sr VP, General Counsel	William Aseltyne - Yale-New Haven Health Services Corp & Yale-New Haven Hospital	\$850,187	\$312,124	\$1,162,311
		Grand Total:	\$15,867,311	\$3,404,932	\$19,272,243

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) ^C	FRINGE BENEFITS ^A (Directl y or Indirectly) ^C	TOTAL
	DESCRIPTION	indirectly)	y or indirectly)	TOTAL
Α.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)	7		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
В.	BRIDGEPORT HOSPITAL AND SUBSIDIARIES			A .
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0 \$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
C .	BRIDGEPORT HOSPITAL FOUNDATION, INC.	-		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0 \$0
2		ψυ	ψυ	ψυ
D .	BRIDGEPORT RENEWAL, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Ε.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
		_		
F.	SCHS PROPERTIES, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	<u>\$0</u>
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
G.				
	SURGERY CENTER OF FAIRFIELD COUNTY, LLC Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
1	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0 \$0
2		ψυ	ψυ	ψυ

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

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

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

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

BRIDGEPORT HOSPITAL ANNUAL REPORTING FISCAL YEAR 2015 REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2015
Α	Transfer of Assets or Operations	
	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of	
1.	Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

ANNUAL REPORTING

		RT HOSPITAL REPORTING			
		AL YEAR 2015			
	REPORT 23 - CHARITY CARE AND REDUCED	COST SERVICES	PROVIDED BY	THE HOSPITAL	
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2014	FY 2015	AMOUNT	%
<u>LINE</u>	DESCRIPTION	AMOUNT	<u>AMOUNT</u>	DIFFERENCE	DIFFERENCE
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial S	Statement Notes)			
1.	Number of Applicants	1,972	2,985	1,013	51%
2.	Number of Approved Applicants	1,763	1,970	207	12%
		• • • • • • • •			
3.	Total Charges (A)	\$48,550,500	\$34,712,000	(\$13,838,500)	-29%
	Average Charges	\$27,539	\$17,620	(\$9,918)	-36%
		0.000704	0.054400	(0.040500)	
4.	Ratio of Cost to Charges (RCC)	0.269721	0.251129	(0.018592)	-7%
	Total Cost	\$13,095,089	\$8,717,190	(\$4,377,900)	-33%
	Average Cost	\$7,428	\$4,425	(\$3,003)	-40%
		.	* 0.000.040		10
5.	Charity Care - Inpatient Charges	\$10,088,444	\$9,690,310	(\$398,134)	-4%
•	Charity Care - Outpatient Emergency Department	~~~~~~~~~	10 017 507		000
6.	Charges	22,807,786	13,817,587	(8,990,199)	-39%
-	Charity Care - Outpatient Charges (Excludes ED	45 05 4 070	44.004.400		000
7.	Charges)	15,654,270	11,204,103	(4,450,167)	-28%
	Total Charges (A)	\$48,550,500	\$34,712,000	(\$13,838,500)	-29%
	Oberity Corres Number of Detionst Dour	0.004	0.050	(000)	000
8.	Charity Care - Number of Patient Days	3,334	2,652	(682)	-20%
9.	Charity Care - Number of Discharges	511	643	132	26%
10.	Charity Care - Number of Outpatient ED Visits	8,044	9,508	1,464	18%
	Charity Care - Number of Outpatient Visits (Excludes ED	5 000	0.040	0.004	F7 0
11.	Visits)	5,222	8,213	2,991	57%
	e total amount must agree with the total amount listed in	the Hospital Au	dited Financial S		
	e total amount must agree with the total amount listed ir	the Hospital Aud	dited Financial S		
	e total amount must agree with the total amount listed ir Hospital Bed Funds (see Hospital Reporting System - I	-	dited Financial S		
(A) The <u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - I	Report 17)		itatement Notes.	
(A) The <u>B.</u> 1.	Hospital Bed Funds (see Hospital Reporting System - I	Report 17) 248	190	tatement Notes.	-23%
(A) The <u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - I	Report 17)		itatement Notes.	-23%
(A) The <u>B.</u> 1. 2.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants	Report 17) 248 248	190 190	tatement Notes. (58) (58)	-23% -23%
(A) The <u>B.</u> 1.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B)	Report 17) 248 248 \$687,500	190 190 \$750,000	(58) (58) (58) (58)	-23% -23% -23% 9%
(A) The <u>B.</u> 1. 2.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants	Report 17) 248 248	190 190	tatement Notes. (58) (58)	-23% -23% -23% 9%
(A) The <u>B.</u> 1. 2. 3.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges	248 248 248 \$687,500 \$2,772	<u>190</u> 190 \$750,000 \$3,947	(58) (58) (58) (58) (58) (58) (58) (58)	-23% -23% -23% 9% 42%
(A) The <u>B.</u> 1. 2.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC)	Report 17) 248 248 \$687,500 \$2,772 0.269721	190 190 \$750,000 \$3,947 0.251129	(58) (58) (58) (58) (58) (58) (58) (58)	-23% -23% -23% 9% 42% -7%
(A) The <u>B.</u> 1. 2. 3.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost	248 248 248 \$687,500 \$2,772	<u>190</u> 190 \$750,000 \$3,947	(58) (58) (58) (58) (58) (58) (58) (58)	-23% -23% -23% 9% 42%
(A) The <u>B.</u> 1. 2. 3.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC)	Report 17) 248 248 248 \$687,500 \$2,772 0.269721 \$185,433	190 190 \$750,000 \$3,947 0.251129 \$188,347	(58) (58) (58) (58) (58) (58) (58) (58)	-23% -23% -23% 9% 42% -7% 2%
(A) The <u>B.</u> 1. 2. 3.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost	Report 17) 248 248 248 \$687,500 \$2,772 0.269721 \$185,433	190 190 \$750,000 \$3,947 0.251129 \$188,347	(58) (58) (58) (58) (58) (58) (58) (58)	-23% -23% -23% -23% -23% -23% -23% -23%
(A) The B. 1. 2. 3. 4.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges	Report 17) 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066	tatement Notes. (58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 99 429 -79 29 339 -329
(A) The B. 1. 2. 3. 4. 5. 6.	Image: Colspital Bed Funds (see Hospital Reporting System - Image: Colspital Bed Funds (see Hospital Reporting System - Image: Colspital Reporting System - Image: Colspital Report Applicants Number of Applicants Image: Colspital Colsp	Report 17) 248 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906	(58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 99 429 -79 29 339 -329 59
(A) The B. 1. 2. 3. 4. 5.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges)	Report 17) 248 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139 215,980	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906 292,028	(58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 99 429 -79 29 339 -329 59 359
(A) The <u>B.</u> 1. 2. 3. 4. 5. 6.	Image: Colspital Bed Funds (see Hospital Reporting System - Image: Colspital Bed Funds (see Hospital Reporting System - Image: Colspital Reporting System - Image: Colspital Report Applicants Number of Applicants Image: Colspital Colsp	Report 17) 248 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906	(58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 -239 -29 429 -79 29 339 -329 -329 59 359
(A) The B. 1. 2. 3. 4. 5. 6. 7.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B)	Report 17) 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139 215,980 \$687,500	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906 292,028 \$750,000	(58) (58) (58) (58) (58) (0.018592) (0.018592) (0.018592) (\$2,914 (\$33,315) (\$33,315) 19,767 76,048 (\$62,500	-239 -239 -239 99 429 -79 29 339 -329 59 359 99
(A) The B. 1. 2. 3. 4. 5. 6. 7. 8.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days	Report 17) 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139 215,980 \$687,500 84	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906 292,028 \$750,000 57	(58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 99 429 -79 29 339 -329 59 359 99 -329
(A) The B. 1. 2. 3. 4. 5. 6. 7. 8. 9.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges	Report 17) 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139 215,980 \$687,500 84 12	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906 292,028 \$750,000 57 14	(58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 99 429 -79 29 339 -329 59 359 99 -329 179
(A) The B. 1. 2. 3. 4. 5. 6. 7. 8.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits	Report 17) 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139 215,980 \$687,500 84	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906 292,028 \$750,000 57	(58) (58) (58) (58) (58) (58) (58) (58)	-239 -239 -239 99 429 -79 29 339 -329 59 359 99 -329 179
(A) The B. 1. 2. 3. 3. 4. 5. 6. 7. 7. 8. 9.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost Bed Funds - Inpatient Charges Bed Funds - Outpatient Emergency Department Charges Bed Funds - Outpatient Charges (Excludes ED Charges) Total Charges (B) Bed Funds - Number of Patient Days Bed Funds - Number of Discharges	Report 17) 248 248 248 248 248 248 248 \$687,500 \$2,772 0.269721 \$185,433 \$748 \$105,381 366,139 215,980 \$687,500 84 12	190 190 \$750,000 \$3,947 0.251129 \$188,347 \$991 \$72,066 385,906 292,028 \$750,000 57 14	(58) (58) (58) (58) (58) (58) (58) (58)	-23% -23% -23% 9% 42% -7% 2%

ANNUAL REPORTING

	BRIDGEPORT HOSPITAL								
	ANNUAL	REPORTING							
		AL YEAR 2015							
	REPORT 23 - CHARITY CARE AND REDUCED	COST SERVICE	S PROVIDED BY	THE HOSPITAL					
(1)	(2)	(3)	(4)	(5)	(6)				
	FY 2014 FY 2015 AMOUNT %								
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE				