(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
А.	AFFILIATE NAME	BACKUS CORPORATION	
-		PARENT CORPORATION - FOR THE WILLIAM W. BACKUS HOSPITAL. ITS PURPOSE IS TO	
		PROMOTE AND FURTHER THE WELFARE, PROGRAMS AND ACTIVIITES OF THE HOSPITAL, OR	
1	Affiliate Description	OTHER AFFILIATES WHERE APPLICABLE.	
2	Affiliate type of service Tax Status	Parent Corporation Not for Profit	
4	Street Address	326 Washington Street ,	
5	Town	Norwich	
6	State	Connecticut	
7	Zip Code	06360 -	
8	CEO Name	Bimal Patel	
9	CEO Title	President & Chief Executive Officer	
	CT Agent Name	Bimal Patel	
11 12	CT Agent Company CT Agent Company Street Address	Backus Hospital 326 Washington Street	
	CT Agent Town	Norwich	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06360 -	
_			
В.	AFFILIATE NAME	BACKUS HEALTH CARE, INC HEALTH & EDUCATION SERVICES - ITS PURPOSE IS TO ASSIST THE HOSPITAL IN PROVIDING	
		VARIOUS TYPES OF MEDICAL CARE AND HEALTH RELATED EDUCATION PROGRAMS TO THE	
1	Affiliate Description	COMMUNITY ON AN OUTPATIENT BASIS.	
2	Affiliate type of service	Health Education Services	
3	Tax Status	Not for Profit	
4	Street Address	326 Washington Street	
5	Town	Norwich	
6 7	State Zip Code	Connecticut 06360 -	
8	CEO Name	Charles Johnson	
9	CEO Title	President & Chief Executive Officer	
	CT Agent Name	HARTFORD HEALTHCARE CORPORATION	
11	CT Agent Company	HARTFORD HEALTHCARE	
12	CT Agent Company Street Address	85 JEFFERSON STREET	
	CT Agent Town	HARTFORD	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06106 -	
C.	AFFILIATE NAME	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC	
	Affiliate Description	AN AIR RIGHTS CONDOMINIUM ASSOCIATION ORGANIZED TO MANAGE THE PHYSICIAN	
1	Affiliate Description Affiliate type of service	OCCUPIED PORTION OF THE HOSPITAL OWNED MEDICAL OFFICE BUILDING Real Estate	
3	Tax Status	For Profit	
4	Street Address	330 Washington Street	
5	Town	Norwich	
6	State	Connecticut	
7	Zip Code	06360 -	
8	CEO Name	Daniel E. Lohr	
9	CEO Title	President	
	CT Agent Name	HARTFORD HEALTHCARE CORPORATION	
11 12	CT Agent Company CT Agent Company Street Address	HARTFORD HEALTHCARE CORPORATION	
12	CT Agent Town	85 JEFFERSON ST HARTFORD	
14	CT Agent State	Connecticut	
-	CT Agent Zip Code	06106 -	

(1)	(2) (3)		
LINE	IE DESCRIPTION AFFILIATE INFORMATION		
D.	AFFILIATE NAME	BACKUS PHYSICIAN SERVICES, LLC	
	Affiliate Description	PROVIDE MEDICAL & SURGICAL PHYSICIAN SERVICES. IS A SUBSIDARY OF CONNCARE, INC.	
2	Affiliate type of service Tax Status	Physicians Services For Profit	
	Street Address	112 Lafayette Street	
5	Town	Norwich	
6	State	Connecticut	
-	Zip Code	06360 -	
	CEO Name	Jeffrey Flaks	
	CEO Title	Chair	
-	CT Agent Name	HARTFORD HEALTHCARE CORPORATION	
-	CT Agent Company	HARTFORD HEALTHCARE CORPORATION	
	CT Agent Company Street Address	LEGAL DPT 85 JEFFERSON ST	
	CT Agent Town	HARTFORD	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06106 -	
Ε.	AFFILIATE NAME	COMMUNITY MEDICAL PARTNERS, INC	
		PHYSICIAN SERVICES - TO PROVIDE PROFESSIONAL MEDICAL SERVICES TO THE PATIENTS OF	
		AFFILIATES OF THE BACKUS CORPORATION AND TO OTHER INDIVIDUALS IN AREAS AND	
-	Affiliate Description	COMMUNITIES SERVED BY THE CORPORATION	
	Affiliate type of service	Physicians Services	
3	Tax Status		
	Street Address	326 WASHINGTON STREET	
-	Town State	NORWICH	
-	Zip Code	Connecticut 06360 -	
-	CEO Name	JAMES G. WATKINS, JR	
-	CEO Title	CEO	
-	CT Agent Name	JAMES G. WATKINS, JR	
	CT Agent Company	BACKUS HOSPITAL	
	CT Agent Company Street Address	326 WASHINGTON STREET	
	CT Agent Town	NORWICH	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06360 -	
F.	AFFILIATE NAME	CONNCARE, INC	
		OCCUPATIONAL HEALTH & OUTPATIENT CARE - IS A SUBSIDIARY OF BACKUS HEALTH CARE,	
		INC. ITS PURPOSE IS TO PROVIDE OCCUPATIONAL HEALTH SERVICES TO EMPLOYERS AND	
	Affiliate Description	THEIR EMPLOYEES AND TO ASSIST CLIENT COMPANIES WITH THE CONSERVATION OF HUMAN	
2	Affiliate type of service	Occupational Heath	
3	Tax Status	For Profit	
	Street Address	326 Washington Street	
5	Town	Norwich	
	State	Connecticut	
	Zip Code	06360 -	
	CEO Name	Bimal Patel	
	CEO Title	President & Chief Executive Officer	
	CT Agent Name	HARTFORD HEALTHCARE CORPORATION	
	CT Agent Company	HARTFORD HEALTHCARE CORPORATION	
	CT Agent Company Street Address	85 JEFFERSON STREET	
	CT Agent Town	HARTFORD	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06106 -	

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
G.	AFFILIATE NAME	HARTFORD HEALTH CARE CORPORATION	
1	Affiliate Description	PARENT CORPORATION	
	Affiliate type of service	Parent Corporation	
	Tax Status	Not for Profit	
4	Street Address	One State Street, Suite 19	
5 6	Town	Hartford	
-	State Zip Code	Connecticut 06103 -	
	CEO Name	Elliot Joseph	
	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
-	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	
н.	AFFILIATE NAME	HARTFORD HEALTHCARE AT HOME, INC.	
1	Affiliate Description	PROVIDE, PLAN AND DEVELOP A CONTINUUM OF HOME CARE AND COMMUNITY HEALTH SERVICES.	
2	Affiliate type of service	Home Health/VNAs	
3	Tax Status	Not for Profit	
4	Street Address	103 Woodland Street	
5	Town	Hartford	
-	State	Connecticut	
	Zip Code	06105 -	
-	CEO Name	Michael Soccio	
	CEO Title	CEO Winshin Service Companying	
	CT Agent Name CT Agent Company	Winship Service Corporation Winship Service Corporation	
	CT Agent Company CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	
Ι.	AFFILIATE NAME	HARTFORD HEALTHCARE LABORATORIES, LLC	
1	Affiliate Description	LAB	
	Affiliate type of service	Lab	
	Tax Status	Not for Profit	
4	Street Address	129 Patricia Genova Drive	
5	Town	Newington	
	State	Connecticut	
	Zip Code	06111 -	
	CEO Name	James Fantus	
	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
-	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State CT Agent Zip Code	Connecticut 06103 - 1919	
10	Or Agent Zip Oode		

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
J.	AFFILIATE NAME	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC	
5.			
	Affiliate Description	REHABILITATION SERVICES	
	Affiliate type of service Tax Status	Rehabilitation Services For Profit	
-	Street Address	181 Patricia Genova Drive	
5	Town	Newington	
-	State	Connecticut	
7	Zip Code	06111 -	
	CEO Name	Rita Parisi	
-	CEO Title	President & CEO	
-	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza Hartford	
	CT Agent Town CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	
15	or Agent zip oode		
к.	AFFILIATE NAME	HARTFORD HOSPITAL	
	Affiliate Description	Hospital	
	Affiliate type of service Tax Status	Hospital Not for Profit	
-	Street Address	80 Seymour Street	
	Town	Hartford	
-	State	Connecticut	
	Zip Code	06103 -	
	CEO Name	Jeff Flaks	
9	CEO Title	President & CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State CT Agent Zip Code	Connecticut 06103 -	
15	CT Agent Zip Code	00103 -	
L.	AFFILIATE NAME	HHC PHYSICIANCARE INC	
4	Affiliate Description	Departing modified and provide healthcare consistent to the soul first structure that formulation	
1	Affiliate Description	Practice medicine and provide healthcare services to the public as a medical foundation	
2	Affiliate type of service	Foundation Not for Profit	
	Tax Status Street Address	1290 Silas Deane Highway	
5	Town	Wethersfield	
	State	Connecticut	
	Zip Code	06109 -	
	CEO Name	James Watkins Jr	
	CEO Title	President	
	CT Agent Name	Winship Service Corporation	
11	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	

(1)	(2) (3)		
LINE	DESCRIPTION	AFFILIATE INFORMATION	
м.	AFFILIATE NAME	INTEGRATED CARE PARTNERS, LLC	
4	Affiliate Description	Oliviani integration entity for LILIC feellities employed a busicisme and a supervisit submission	
1	Affiliate Description Affiliate type of service	Clinical integration entity for HHC facilities, employed physicians and community physician members. Managed Care	
	Tax Status	For Profit	
4	Street Address	1290 Silas Deane Highway, 2nd	
5	Town	Wethersfield	
6	State	Connecticut	
	Zip Code	06109 -	
	CEO Name	James P. Cardon, MD	
	CEO Title	President/CEO	
	CT Agent Name	Winship Service Corporation	
	CT Agent Company CT Agent Company Street Address	Winship Service Corporation One Constitution Plaza	
	CT Agent Company Street Address CT Agent Town	Une Constitution Plaza	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06103 - 1919	
	~ 1		
Ν.	AFFILIATE NAME	MEDCONN COLLECTION AGENCY, LLC	
1	Affiliate Description	Taxable Collection Agency in which the Hospital has a 25% partnership	
	Affiliate type of service	Collection Agency	
3	Tax Status	For Profit	
4	Street Address	2049 Silas Deane Highway, Ste 305	
5	Town	Rocky Hill	
6	State	Connecticut	
	Zip Code	06067 -	
	CEO Name	Frank Souto	
	CEO Title	Executive Director	
	CT Agent Name	Daniel E. Lohr, Managing member	
	CT Agent Company	WWB Corporation	
	CT Agent Company Street Address	326 Washington Street	
	CT Agent Town CT Agent State	Norwich Connecticut	
	CT Agent Zip Code	06360 -	
О.	AFFILIATE NAME	MIDSTATE MEDICAL CENTER	
1	Affiliate Description	HOSPITAL	
	Affiliate type of service	HOSPITAL	
3	Tax Status	Not for Profit	
4	Street Address	435 Lewis Ave	
5	Town	Meriden	
	State	Connecticut	
7	Zip Code	06451 -	
8	CEO Name	Lucille Janatka	
	CEO Title	President/CEO	
	CT Agent Name	Winship Service Corporation	
-	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut 06103 - 1919	
15	CT Agent Zip Code 06103 - 1919		

(1)	(2)	(3)	
LINE	DESCRIPTION	AFFILIATE INFORMATION	
Р.	AFFILIATE NAME	NATCHAUG HOSPITAL	
	Affiliate Description	MENTAL HEALTH FACILITY	
	Affiliate type of service	Mental Health Facility	
	Tax Status Street Address	Not for Profit 189 Storrs Road	
	Town	Mansfield Center	
	State	Connecticut	
-	Zip Code	06250 -	
	CEO Name	Stephen Larcen, Ph.D.	
	CEO Title	President & CEO	
10	CT Agent Name	Winship Service Corporation	
11	CT Agent Company	Winship Service Corporation	
	CT Agent Company Street Address	One Constitution Plaza	
	CT Agent Town	Hartford	
	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	
Q.	AFFILIATE NAME	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE	
	Affiliate Description	OMNI Home Health Services of Eastern Connecticut, LLC d/b/a Backus Home Health Care providing home health care services in eastern CT. Home Health/VNAs	
-	Affiliate type of service Tax Status	For Profit	
	Street Address	12 Case Street	
	Town	Norwich	
-	State	Connecticut	
	Zip Code	06360 -	
	CEO Name	Bimal Patel	
9	CEO Title	President	
	CT Agent Name	Bimal Patel	
	CT Agent Company	WWB	
	CT Agent Company Street Address	326 Washington Street	
	CT Agent Town	Norwich	
	CT Agent State	Connecticut 06360 -	
15	CT Agent Zip Code	06360 -	
R.	AFFILIATE NAME	THE HOSPITAL OF CENTRAL CONNECTICUT	
	Affiliate Description	Hospital	
	Affiliate type of service	Hospital	
	Tax Status	Not for Profit	
	Street Address	100 Grand Street	
	Town	New Britain	
	State Zip Code	Connecticut	
	CEO Name	06050 - Lucille Janatka	
	CEO Title	President/CEO	
	CT Agent Name	The Hospital of Central CT	
	CT Agent Company	Elizabeth Schlaff, Esg.	
	CT Agent Company Street Address	100 Grand Street	
	CT Agent Town	New Britain	
	CT Agent State	Connecticut	
	CT Agent Zip Code	06050 -	

(1)	(2)	(3)	
	DESCRIPTION	AFFILIATE INFORMATION	
S.	AFFILIATE NAME	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED	
1	Affiliate Description	Hospital	
2	Affiliate type of service	Hospital	
3	Tax Status	Not for Profit	
4	Street Address	112 Mansfield Avenue	
5	Town	Willimantic	
6	State	Connecticut	
7	Zip Code	06226 -	
8	CEO Name	Bimal Patel	
9	CEO Title	President & CEO	
10	CT Agent Name	Winship Service Corporation	
11	CT Agent Company	Winship Service Corporation	
12	CT Agent Company Street Address	One Constitution Plaza	
13	CT Agent Town	Hartford	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06103 - 1919	
_			
Т.	AFFILIATE NAME	WWB CORPORATION	
		OTHER HEALTH CARE SERVICES - ITS PURPOSE IS TO RENDER HEALTH CARE RELATED SERVICES THAT WOULD OTHERWISE BE TAXABLE AS UNRELATED TRADE OR BUSINESS	
1	Affiliate Description	ACTIVITIES IF CONDUCTED BY THE HOSPITAL, OTHER AFFILIATES OR THE PARENT	
2	Affiliate type of service	Other HealthCare Svcs(Specify)	
3	Tax Status	For Profit	
4	Street Address	326 Washington Street	
5	Town	Norwich	
6	State	Connecticut	
7	Zip Code	06360 -	
8	CEO Name	Charles Johnson	
9	CEO Title	President /Director	
10	CT Agent Name	HARTFORD HEALTHCARE CORPORATION	
11	CT Agent Company	HARTFORD HEALTHCARE CORPORATION	
12	CT Agent Company Street Address	85 JEFFERSON STREET	
	CT Agent Town	HARTFORD	
14	CT Agent State	Connecticut	
15	CT Agent Zip Code	06106 -	
	BOX IS UNACCEPTABLE WITHOUT A	STREET ADDRESS FOR EACH AGENT COMPANY	

* P.O. BOX IS UNACCEPTABLE WITHOUT A

STREET ADDRESS FOR EACH AGENT COMPANY

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2016
Α.	WILLIAM W. BACKUS HOSPITAL		
1		Unrestricted	\$403,776,321
2		Temporarily Restricted by Donor	\$4,543,173
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$8,191,210
5		Intercompany Eliminations	\$0
		Total:	\$416,510,704
В.	BACKUS CORPORATION		
1		Unrestricted	\$25,204
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	(\$15,845)
		Total:	\$9,359
	BACKUS HEALTH CARE, INC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
_			
	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC		•
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4 5		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
-			
	BACKUS PHYSICIAN SERVICES, LLC		0000 710
1		Unrestricted	\$688,748
2		Temporarily Restricted by Donor	\$0 \$0
3 4		Temporarily Restricted by Board Permanently Restricted by Donor	\$0 \$0
4 5		Intercompany Eliminations	\$0 \$0
5			
		10tai.	\$688,748
F.	COMMUNITY MEDICAL PARTNERS, INC		
<u>г</u> . 1	COMMONT I MEDICALI ANTILINO, MO	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
			φυ
G.	CONNCARE, INC		
1		Unrestricted	\$1,532,527
2		Temporarily Restricted by Donor	\$1,552,527
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
-		Total:	\$1,532,527
I			ψ1,552,521

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WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)	(3)	(4)
		FUND DESCRIPTION /	BALANCE AS OF
LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2016
Н.	HARTFORD HEALTH CARE CORPORATION		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
١.	HARTFORD HEALTHCARE AT HOME, INC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
J.	HARTFORD HEALTHCARE LABORATORIES, 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
Κ.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
L.	HARTFORD HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	HHC PHYSICIANCARE INC		**
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0 \$0
3		Temporarily Restricted by Board	\$0
4 5		Permanently Restricted by Donor Intercompany Eliminations	\$0 \$0
5		Total:	\$0 \$0
			\$0
Ν.			
	INTEGRATED CARE PARTNERS, LLC	Unrestricted	ტე
1 2		Temporarily Restricted by Donor	\$0 \$0
2		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0
4		Permanently Restricted by Donor	\$0
4 5		Intercompany Eliminations	\$0
		Total:	\$0 \$0

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS

(1)	(2)		
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2016
•			
0 . 1	MEDCONN COLLECTION AGENCY, LLC	Uprostrictod	\$0
2		Unrestricted Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
Р.	MIDSTATE MEDICAL CENTER		
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
Q.	NATCHAUG HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
R.	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE		
1		Unrestricted	(\$21,345)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	(\$21,345)
S.	THE HOSPITAL OF CENTRAL CONNECTICUT		
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 \$0
т.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0 \$0
		Total:	\$0
υ.	WWB CORPORATION		
1		Unrestricted	\$658,330
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor Intercompany Eliminations	\$0 (\$1,000)
5		Total:	\$657,330
	Tatal of all Affiliates (before later - and and all and a		
	Total of all Affiliates (before Intercompany Eliminations) Intercompany Eliminations	Fund Balance:	\$419,394,168
<u> </u>	Total of all Affiliates	Fund Delenses	(\$16,845)
	I VIAI VI AII AIIIIALES	Fund Balance:	\$419,377,323

(1)	(2)	(3)	(4)	(5)
LINE		DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Α.	BACKUS CORPORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report	0/00/0040	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
В.	BACKUS HEALTH CARE, INC			
в.	BACKUS HEALTH CARE, INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report	0,00,2010	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report Ending Unconsolidated Intercompany Balance:	0/20/204.0	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
D.	BACKUS PHYSICIAN SERVICES, LLC			
D.	BACKUS PHI SICIAN SERVICES, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report	0/00/2010	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
E.	COMMUNITY MEDICAL PARTNERS, INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report Ending Unconsolidated Intercompany Balance:	0/20/2010	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
F.	CONNCARE, INC			
г.				
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
1		Salary	09/30/2016	
2		Accounts Payable	09/30/2016	
3		Payments for Accounts Payable	09/30/2016	(\$4,702,915)
4		Payments for Payroll	09/30/2016	
5		Equity transfer	09/30/2016	
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
<u> </u>				
G.	HARTFORD HEALTH CARE CORPORATION			

(1)	(2)	(3)	(4)	(5)
LINE		DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	(\$1,460,798)
1		Salary	09/30/2016	(\$1,824,178)
2		Fringe Benefits	09/30/2016	(\$1,361,009)
3		Services provided by HCC	09/30/2016	(\$9,546,312)
4		Accounts Payable	09/30/2016	(\$32,794,872)
5		Payments for Accounts Payable	09/30/2016	\$32,036,592
6		Payments for Payroll	09/30/2016	\$1,839,685
7		Payments fringes	09/30/2016	\$1,255,945
8		Payments - Fees	09/30/2016	\$9,307,592
9		Equity transfer	09/30/2016	(\$2,588,198)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$5,135,553)
Н.	HARTFORD HEALTHCARE AT HOME, INC.			
				• · · · · · ·
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$42,747
1		Accounts Payable	09/30/2016	\$111,820
2		Payments for Accounts Payable	09/30/2016	(\$153,164)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$1,403
-				
I.	HARTFORD HEALTHCARE LABORATORIES, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report	- /	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
J.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	(\$28,135)
1		Salary	09/30/2016	(\$111.673)
2		Payments for Payroll	09/30/2016	\$131,864
2		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$7,944)
		Enang enconcentration intercompany Bulance.	0/00/2010	(+1,011)
К.	HARTFORD HOSPITAL			
Ν.				
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	(\$103,732)
1		Salary	09/30/2015	(\$1,941,228)
2		Accounts Payable	09/30/2016	(\$339,949)
3		Payments for Payroll	09/30/2016	(3339,949) \$1,941,228
4		Payments for Accounts Payable	09/30/2016	\$263,615
-		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$180,066)
		g onconcentation intercompany bulance.	5/50/2010	(#100,000)

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
L.	HHC PHYSICIANCARE INC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	(\$5,960)
1		Salary	09/30/2016	
2		Accounts Payable	09/30/2016	\$24,765
3		Payments for Payroll	09/30/2016	. ,
		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$69,143)
М.	INTEGRATED CARE PARTNERS, LLC			
		Beginning Unconsolidated Intercompany Balance: Nothing to Report	9/30/2015	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
N.	MEDCONN COLLECTION AGENCY, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
0.	MIDSTATE MEDICAL CENTER			
		Beginning Unconsolidated Intercompany Balance: Nothing to Report	9/30/2015	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0 \$0

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
Ρ.	NATCHAUG HOSPITAL			
				•··· = ·-
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$11,747
1		Salary	09/30/2016	(\$301,940)
2		Accounts Payable	09/30/2016	\$58,616
3		Payments for Payroll	09/30/2016	\$368,132
4		Payments for Accounts Payable	09/30/2016	(\$150,962)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$14,407)
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A			
Q.	BACKUS HOME HEALTH CARE			
		De site in the same little to the term of the Delayer	0/00/0045	* 2
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report	0/00/0010	\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
R.	THE HOSPITAL OF CENTRAL CONNECTICUT			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$93,718
1		Accounts Payable	09/30/2016	\$1,962
2		Payments for Accounts Payable	09/30/2016	(\$95,680)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
S.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$2,780
1		Salary	09/30/2016	(\$10,657)
2		Accounts Payable	09/30/2016	\$84,019
3		Payments for Accounts Pay & Payroll	09/30/2016	(\$67,011)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$9,131
Т.	WWB CORPORATION			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$1,825,083
1		Accounts Payable	09/30/2016	\$262,317
2		Payments for Accounts Payable	09/30/2016	(\$1,200,944)
3		Payments for Payroll	09/30/2016	(\$886,456)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
			Grand Total:	(\$5,396,579)

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Beginning Unconsolidated		
			Intercompany Balance	10/01/2015	\$4,022,259
Α.	BACKUS CORPORATION				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
В.	BACKUS HEALTH CARE, INC				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
С.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
D.	BACKUS PHYSICIAN SERVICES, LLC				•
1		CONNCARE, INC	Accounts Payable	09/30/2016	\$25,682
2		HARTFORD HEALTH CARE CORPORATION HARTFORD HEALTH CARE CORPORATION	Services provided by HCC	09/30/2016	(\$628,308)
3		HARTFORD HEALTH CARE CORPORATION	Payments - Fees	09/30/2016	\$591,693
			Total:	9/30/2016	(\$10,933)
E.	COMMUNITY MEDICAL PARTNERS, INC				
E .			Nothing to Report		\$0
			Total:	9/30/2016	\$0 \$0
			Total.	9/30/2010	φU
F.	CONNCARE, INC				
1		HARTFORD HEALTH CARE CORPORATION	Services provided by JHC	09/30/2016	(\$436,291)
2		HARTFORD HEALTH CARE CORPORATION	Payments - Fees	09/30/2016	\$416,947
			Total:	9/30/2016	(\$19,344)
					(+)•)
G.	HARTFORD HEALTH CARE CORPORATION				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
Н.	HARTFORD HEALTHCARE AT HOME, INC.				
1		WWB CORPORATION	Payments for Accounts Payable	09/30/2016	(\$199,996)
		OMNI HOME HEALTH SERVICES OF EASTERN			, ,
		CONNECTICUT, LLC, D/B/A BACKUS HOME			
2		HEALTH CARE	Payments for Payroll	09/30/2016	(\$1,977,165)
			Total:	9/30/2016	(\$2,177,161)
Ι.	HARTFORD HEALTHCARE LABORATORIES, LLC				

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
J.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
К.	HARTFORD HOSPITAL		Nothing to Depart		* 0
			Nothing to Report	0/20/2040	\$0 \$0
			Total:	9/30/2016	<u>۵</u> ۵
L.	HHC PHYSICIANCARE INC				
L .			Nothing to Report		\$0
			Total:	9/30/2016	\$0 \$0
			Total	0/00/2010	ΨŬ
м.	INTEGRATED CARE PARTNERS, LLC				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
Ν.	MEDCONN COLLECTION AGENCY, LLC				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
0.	MIDSTATE MEDICAL CENTER				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
Ρ.	NATCHAUG HOSPITAL				•
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A				
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE				
Q .		WWB CORPORATION	Accounts Payable	09/30/2016	\$150,001
		WWD CORPORATION	Accounts Payable	09/30/2016	ຈາວບ,001
2		WWB CORPORATION	Payments for Accounts Payable	09/30/2016	(\$994,548)
3		WWB CORPORATION	Payments for Payroll	09/30/2016	(\$888,257)
4		WWB CORPORATION	Equity transfer	09/30/2016	(\$145,316)
			Total:	9/30/2016	(\$1,878,120)
R.	THE HOSPITAL OF CENTRAL CONNECTICUT				

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
S.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
Т.	WWB CORPORATION				
			Nothing to Report		\$0
			Total:	9/30/2016	\$0
			Ending Unconsolidated		(****
			Intercompany Balance	9/30/2016	(\$63,299)

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

(1)	(2)		(3)	(4)
	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE		AMOUNT	DATE
	DESCRIPTION OF EXPENDITORE		AMOONT	DATE
Α.	BACKUS CORPORATION			
0	Nothing to Report	Tatal	\$0	
		Total:	\$0	9/30/2016
В.	BACKUS HEALTH CARE, INC			
0	Nothing to Report	Tatal	\$0	
		Total:	\$0	9/30/2016
C.	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2016
D.	BACKUS PHYSICIAN SERVICES, LLC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2016
Е.	COMMUNITY MEDICAL PARTNERS, INC			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2016
E	CONNCARE, INC			
F .	Nothing to Report		\$0	
_		Total:	\$0	9/30/2016
G . 0	HARTFORD HEALTH CARE CORPORATION Nothing to Report		\$0	
		Total:	\$0	9/30/2016
Н. 0	HARTFORD HEALTHCARE AT HOME, INC. Nothing to Report		\$0	
0	Nothing to Report	Total:	\$0 \$0	9/30/2016
I. 0	HARTFORD HEALTHCARE LABORATORIES, LLC Nothing to Report		0.2	
0	Nothing to report	Total:	\$0 \$0	9/30/2016
J. 0	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC Nothing to Report		0.2	
0	Nothing to Report	Total:	\$0 \$0	9/30/2016
К.	HARTFORD HOSPITAL		<u>^</u>	
0	Nothing to Report	Total:	\$0 \$0	9/30/2016
			•	
L.	HHC PHYSICIANCARE INC			
0	Nothing to Report	Total:	\$0 \$0	9/30/2016
				5/50/2010
М.	INTEGRATED CARE PARTNERS, LLC			
0	Nothing to Report	Total:	\$0 \$0	9/30/2016
			\$0	9/30/2016
Ν.	MEDCONN COLLECTION AGENCY, LLC			
0	Nothing to Report	Tatali	\$0	0 10 0 16 0 1 0
		Total:	\$0	9/30/2016
0.	MIDSTATE MEDICAL CENTER			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2016
Р.	NATCHAUG HOSPITAL			
0	Nothing to Report		\$0	
		Total:	\$0	9/30/2016

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

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A		
Q.	BACKUS HOME HEALTH CARE		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
R.	THE HOSPITAL OF CENTRAL CONNECTICUT		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
-			
S.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
т.	WWB CORPORATION		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
	Grand Total:	\$0	9/30/2016

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
•	BACKUS CORPORATION		
A. 0	Nothing to Report	\$0	0
	Total:		
В.	BACKUS HEALTH CARE, INC		
0	Nothing to Report	\$0	
	Total:	\$0	
C .	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC	¢0.	
0	Nothing to Report Total:	\$0 \$0	0
		\$0	
D.	BACKUS PHYSICIAN SERVICES, LLC		
0. 0	Nothing to Report	\$0	0
-	Total:	\$0	
E.	COMMUNITY MEDICAL PARTNERS, INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
F.	CONNCARE, INC		
0	Nothing to Report	\$0	0
	Total:	\$0	
G .	HARTFORD HEALTH CARE CORPORATION Nothing to Report	\$0	0
0	Total:	\$0 \$0	
Н.	HARTFORD HEALTHCARE AT HOME, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
I.	HARTFORD HEALTHCARE LABORATORIES, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	
J. 0	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		
U	Nothing to Report Total:	\$0 \$0	
		\$0	

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
	HARTFORD HOSPITAL		
0	Nothing to Report	\$0	
	Total:	\$0	
L. 0	HHC PHYSICIANCARE INC	\$0	0
0	Nothing to Report Total:	\$0 \$0	
	l Vidi.	\$0	
М.			
<u>м</u> . 0	INTEGRATED CARE PARTNERS, LLC Nothing to Report	\$0	0
0	Total:	\$0 \$0	
	Totai.	\$0	
N.	MEDCONN COLLECTION AGENCY, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
		· · ·	
Ο.	MIDSTATE MEDICAL CENTER		
0	Nothing to Report	\$0	0
	Total:	\$0	
		· ·	
Ρ.	NATCHAUG HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT, LLC, D/B/A BACKUS HOME HEALTH CARE		
0	Nothing to Report	\$0	
	Total:	\$0	
R.	THE HOSPITAL OF CENTRAL CONNECTICUT		
0	Nothing to Report	\$0	
	Total:	\$0	
	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
0	Nothing to Report	\$0	
	Total:	\$0	
Т.	WWB CORPORATION		
0	Nothing to Report	\$0	
	Total:	\$0	
	Grand Total:	\$0	

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR INDIGENT CARE AND FREE BEDS

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016		
LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
Α.	Indigent Care				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
Β.	Free Beds				
	Beginning Balance	\$764,814.00	\$743,943.00	(\$20,871.00)	-3%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$13,991.00	\$6,570.00	(\$7,421.00)	-53%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	(\$34,862.00)	\$72,030.00		-307%
	Ending Balance	\$743,943.00	\$822,543.00	\$78,600.00	11%
5	Projected Interest Income	\$6,500.00	\$6,500.00	\$0.00	0%
С.	Other				
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00		0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00		0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

ANNUAL REPORTING

	WILLIAM W. BACKUS HOSPITAL	
	ANNUAL REPORTING	
	FISCAL YEAR 2016	
REPORT 17	'A - HOSPITAL BED FUNDS HELD OR ADMINISTERE	D BY THE HOSPITAL
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applications for He	ospital Bed Funds	0
	Grand Total	\$0.00

		WILLIAM W. BACKU			
		ANNUAL REPO	-		
		FISCAL YEAF			
	REPORT 17B - HOSPITA	AL BED FUNDS HELD (JR ADMINISTERED BY	THE HOSPITAL	
B. BE	ED FUND ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
(3)	Fair Market Value of the Principal of each	individual Hospital Br	ed Fund or the Princir	nal attributable to ea	ch Hospital Bed
(5)	Tan market value of the Trincipal of each	i individual nospital D			ch hospital bed
(4)	Total Actual Earnings for each Hospital E	Red Fund or the Earnin	as attributable to each	Hospital Bod Fund	
(-)	Total Actual Earnings for each hospital E		gs all ibulable to each	r nospital beu i unu.	
(5)	Actual Dollar Amount of Earnings reinves	stad as Principal if an	.,		
(0)					
	.	sted as i filicipal, il ali	y.		
(6)		•	y.		
(6)	Actual Dollar Amount of Earnings availab	•	y.		
(6)		•	y. \$42,196.00	\$0.00	\$141,038.00
(6)	Actual Dollar Amount of Earnings availab	ble for Patient Care.		\$0.00 \$0.00	
(6)	Actual Dollar Amount of Earnings availab	ble for Patient Care.	\$42,196.00	1.1.1	\$31,129.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS	ble for Patient Care. \$300,000.00 \$66,833.00	\$42,196.00 \$7,385.00	\$0.00	\$31,129.00 \$3,818.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND	ble for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00	\$42,196.00 \$7,385.00 \$905.00	\$0.00 \$0.00	\$31,129.00 \$3,818.00 \$12,994.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND	ble for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00	\$42,196.00 \$7,385.00 \$905.00 \$3,083.00	\$0.00 \$0.00 \$0.00	\$31,129.00 \$3,818.00 \$12,994.00 \$12,603.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND G. SHEDD	ble for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00	\$42,196.00 \$7,385.00 \$905.00 \$3,083.00 \$2,990.00	\$0.00 \$0.00 \$0.00 \$0.00	\$31,129.00 \$3,818.00 \$12,994.00 \$12,603.00 \$781.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND G. SHEDD HUNTINGTON MEMORIAL	ble for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00 \$23,393.00	\$42,196.00 \$7,385.00 \$905.00 \$3,083.00 \$2,990.00 \$185.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$31,129.00 \$3,818.00 \$12,994.00 \$12,603.00 \$781.00 \$49,118.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND G. SHEDD HUNTINGTON MEMORIAL L. SMITH	ble for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00 \$23,393.00 \$15,000.00	\$42,196.00 \$7,385.00 \$905.00 \$3,083.00 \$2,990.00 \$185.00 \$11,653.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$31,129.00 \$3,818.00 \$12,994.00 \$12,603.00 \$781.00 \$49,118.00 \$14,436.00
(6)	Actual Dollar Amount of Earnings availat IRVING WOOD ANNIE ROGERS AVERILL CHILDRENS FUND BRIGGS/PEABODY FUND G. SHEDD HUNTINGTON MEMORIAL L. SMITH LAMB FUND	ble for Patient Care. \$300,000.00 \$66,833.00 \$5,000.00 \$7,500.00 \$4,246.00 \$23,393.00 \$15,000.00 \$10,000.00	\$42,196.00 \$7,385.00 \$905.00 \$3,083.00 \$2,990.00 \$185.00 \$11,653.00 \$3,425.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	\$141,038.00 \$31,129.00 \$3,818.00 \$12,994.00 \$12,603.00 \$781.00 \$49,118.00 \$14,436.00 \$15,826.00 \$12,740.00

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I.	GENERAL COLLECTION PROCESSES AND PROCEDURES	
Α.	Hospital's processes and policies for assigning a debt to a Collection Agent	A series of 4 statements & a final notice letter are sent to patients owing balances to the Hospital. After appropriate series of requests for payment are made with no response, the account is then considered for Bad Debt and referred to a collection agency
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	The Hospital pays the collection agency various fees calculated as a percent of the amount collected. The percentages vary based on the type of account - self pay, workers compensation, or if the collection agency required legal assistance to generate the collection.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	31.87%
II.	SPECIFIC COLLECTION AGENT INFORMATION	
A	Collection Agent	
2	Collection Agent Name	MEDCONN COLLECTION AGENCY
3	Collection Agent Type Related / Not Related Entity	Collection Agency Related
4	If the Hospital follows the same processes and policies described	Related
4	in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	A series of 4 statements & a final notice letter are sent to patients owing balances to the Hospital. After appropriate series of requests for payment are made with no response, the account is then considered for Bad Debt and referred to a collection agency
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	The Hospital pays the collection agency various fees calculated as a percent of the amount collected. The percentages vary based on the type of account - self pay, workers compensation, or if the collection agency required legal assistance to generate the collection.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	31.87%

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL EMPLOYEES

LINE	POSITION TITLE	EMPLOYEE NAME	SALARY	FRINGE BENEFITS	TOTAL
				• • • • • •	
1.	Backus Physician Services, Physician	CASILLAS, SERGIO	\$649,565	\$106,786	\$756,351
2.	Hospitalist Physician	LIU, ZHENXIANG	¢510.001	¢04.464	\$606,362
۷.	Tiospitalist Enysician	LIO, ZHENAIANG	\$512,201	\$94,161	φ000,302
3.	E.R. Physician	HORGAN, WILLIAM	\$409,313	\$78,899	\$488,212
4.	Backus Physician Services, Physician	STAHL, BRANDON	\$412,037	\$75,998	\$488,035
5.	E.R. Physician	BAHADORY, NADER	\$408,344	\$76,724	\$485,068
6.	E.R. Physician	GOULDING, RICHARD	\$402,769	\$77,618	\$480,387
7.	Hospitalist Physician	LIBROJO JR, MARIANO	\$370,054	\$69,924	\$439,978
8.	Rhuematology Physician	VARMA, SANDEEP	\$371,327	\$68,622	\$439,949
9.	E.R. Physician	MCCANN, DAVID	\$361,196	\$71,957	\$433,153
10.	E.R. Physician	YOUNG, GREGORY	\$359,244	\$69,543	\$428,787
		Grand Total:	\$4,256,050	\$790,232	\$5,046,282

BACKUS CORPORATION ANNUAL REPORTING FISCAL YEAR 2016 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.	CHIEF EXECUTIVE OFFICER	Elliot T. Joseph, Hartford HealthCare Corporation	\$2,231,208	\$423,862	\$2,655,070
2.	PRESIDENT & COO	Jeffrey Flaks, Hartford HealthCare Corporation	\$1,599,700	\$258,433	\$1,858,133
3.	HHC VP PRESIDENT CLP	James E. Fantus, Hartford HealthCare Corporation	\$1,247,582	\$84,560	\$1,332,142
4.	CHAIR DEPT OF CARDIAC SURGERY	Robert Hagberg, HHC Physicians Care, Inc.	\$1,040,878	\$108,649	\$1,149,527
5.	PLASTIC SURGEON	Charles Castiglione, HHC Physicians Care, Inc.	\$1,018,135	\$107,945	\$1,126,080
6.	SR VP CHIEF MEDICAL OFFICER	Rocco Orlando, Hartford HealthCare Corporation	\$923,028	\$180,529	\$1,103,557
7.	NEUROSURGEON	Brendan Killory, HHC Physicians Care, Inc.	\$960,747	\$99,781	\$1,060,528
8.	CARDIOTHORACOC SURGEON	Robert Gallagher, HHC Physicians Care, Inc.	\$967,408	\$49,065	\$1,016,473
9.	Cardiothoracic Surgeon	Jonathan A. Hammond, HHC Physicians Care, Inc.	\$895,265	\$101,076	\$996,341
10.	COLORECTAL SURGEON	Paul Vignati, HHC Physicians Care, Inc.	\$878,926	\$94,956	\$973,882
		Grand Total:	\$11,762,877	\$1,508,856	\$13,271,733

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 19C - FINANCIAL GAINS REALIZED FROM A TRANSFER OF OWNERSHIP CON

LINE	NAME	POSITION TYPE	SALARY	SEVERANCE PAYMENT	STOCK OFFERING VALUE	OTHER FINANCIAL GAIN	TOTAL
1.	N/A		\$0	\$0	\$0	\$0	\$0
2.			\$0	\$0			\$0
3.			\$0	\$0	\$0	\$0	\$0
4.			\$0	\$0			\$0
5.			\$0	\$0			\$0
6.			\$0	\$0	\$0		\$0
7.			\$0	\$0	-		\$0
8.			\$0	\$0			\$0
9.			\$0	\$0			\$0
10.			\$0	\$0			\$0
11.			\$0	\$0			\$0
12.			\$0	\$0	\$0		\$0
13.			\$0	\$0	\$0		\$0
14.			\$0	\$0			\$0
15.			\$0	\$0			\$0 \$0
16.			\$0	\$0			\$0
17.			\$0	\$0			\$0
18.			\$0	\$0			\$0
19.			\$0	\$0			\$0
20.			\$0	\$0			\$0
21.			\$0	\$0			\$0 \$0 \$0 \$0
22.			\$0	\$0			\$0
23.			\$0	\$0			\$0
24.			\$0	\$0			\$0 \$0
25.			\$0	\$0			\$0
26.			\$0	\$0			\$0
27.			\$0	\$0			\$0
28.			\$0	\$0			\$0
29.			\$0	\$0			\$0
30.			\$0	\$0			\$0 \$0
31.			\$0	\$0	\$0		\$0
32.			\$0	\$0			\$0
33.			\$0	\$0	\$0	\$0	\$0

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WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 19C - FINANCIAL GAINS REALIZED FROM A TRANSFER OF OWNERSHIP CON

LINE	NAME	POSITION TYPE	SALARY	SEVERANCE PAYMENT	STOCK OFFERING VALUE	OTHER FINANCIAL GAIN	TOTAL
		FOSITION TIPE	JALAR I	FATMENT	VALUE	GAIN	TOTAL
34.	-		\$0	\$0	\$0	\$0	\$0
35.			\$0	\$0	\$0	\$0	\$0
36.			\$0	\$0	\$0	\$0	\$0 \$0
37.			\$0	\$0	\$0	\$0	\$0
38.			\$0	\$0	\$0	\$0	\$0
39.			\$0	\$0	\$0	\$0	\$0
40.			\$0	\$0	\$0	\$0	\$0
41.			\$0	\$0	\$0	\$0	\$0
42.			\$0	\$0	\$0	\$0	\$0 \$0
43.			\$0	\$0	\$0	\$0	\$0
44.			\$0	\$0	\$0	\$0	\$0
45.			\$0	\$0	\$0	\$0	\$0
46.			\$0	\$0	\$0	\$0	\$0 \$0
47.			\$0	\$0	\$0	\$0	\$0
48.			\$0	\$0	\$0	\$0	\$0
49.			\$0	\$0	\$0	\$0	\$0 \$0
50.			\$0	\$0	\$0	\$0	
		Grand Total:	\$0	\$0	\$0	\$0	\$0

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
		SALARIES (Directly or	FRINGE BENEFITS ^A (Directly	
LINE	DESCRIPTION	Indirectly) ^C	or Indirectly) ^C	TOTAL
Α.	BACKUS CORPORATION	l I		
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.	BACKUS HEALTH CARE, INC	l .		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
C. 1	BACKUS MEDICAL CENTER CONDOMINIUM ASSOCIATION, INC Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
		L		
D. 1	BACKUS PHYSICIAN SERVICES, LLC Paid by the Entity Listed Above to Hospital Employees(B)	\$509,045	\$0	\$509,045
2	Paid by the Hospital to Employees of the Entity Listed Above	\$309,045	\$0	\$0 \$0
				¥ ¥
Ε.	COMMUNITY MEDICAL PARTNERS, INC		<u>۴</u> ۵	¢0
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
		ψυ	ψυ	Ψ
F.	CONNCARE, INC			
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$283,619 \$360	\$0 \$0	\$283,619 \$360
2		\$30U	φυ	φουυ
G .	HARTFORD HEALTH CARE CORPORATION			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Н.	HARTFORD HEALTHCARE AT HOME, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
١.	HARTFORD HEALTHCARE LABORATORIES, 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
J. 1	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC 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	\$96,927	\$0 \$0	\$0 \$96,927
Κ.	HARTFORD HOSPITAL			¢0
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
		+ -	· · · ·	•
L.	HHC PHYSICIANCARE INC	* 2	<u> </u>	# 0
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$191,819	\$0 \$0	\$0 \$191,819
		<i><i>w</i>101,010</i>		<i><i><i>ϕ</i>¹⁰¹,010</i></i>
Μ.	INTEGRATED CARE PARTNERS, LLC	* -	<u> </u>	* -
1 2	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
		ΦΟ	ψυ	ψυ
Ν.	MEDCONN COLLECTION AGENCY, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B) Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0 \$0	\$0 \$0
2			φU	φU
0.	MIDSTATE MEDICAL CENTER			
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
Ρ.	NATCHAUG HOSPITAL			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$72,281	\$19,494	\$91,775
2	Paid by the Hospital to Employees of the Entity Listed Above	\$420,964	\$0	\$420,964

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS

PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
		SALARIES	FRINGE	
		(Directly or	BENEFITS ^A (Directly	
LINE	DESCRIPTION	Indirectly) ^C	or Indirectly) ^c	TOTAL
		27		
	OMNI HOME HEALTH SERVICES OF EASTERN CONNECTICUT,			
Q.	LLC, D/B/A BACKUS HOME HEALTH CARE			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
R .	THE HOSPITAL OF CENTRAL CONNECTICUT			
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
S .	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$11,028	\$4,191	\$15,219
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Т.	WWB CORPORATION			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0

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

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

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

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

REPORT 21

WILLIAM W. BACKUS HOSPITAL ANNUAL REPORTING FISCAL YEAR 2016 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 2016
А	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

		ACKUS HOSPITAL	•		
		AL YEAR 2016			
	REPORT 23 - CHARITY CARE AND REDUCED		PROVIDED BY	THE HOSPITAL	
		COOL CENTICES		THE HOOTHAL	
(1)	(2)	(3)	(4)	(5)	(6)
(1)	(-)	FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENC
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial S	Statement Notes)			
1.	Number of Applicants	1,731	1,629	(102)	-6
2.	Number of Approved Applicants	1,575	1,522	(53)	-:
3.	Total Charges (A)	\$4,309,525	\$4,770,268	\$460,743	1 <i>*</i>
	Average Charges	\$2,736	\$3,134	\$398	1
4.	Ratio of Cost to Charges (RCC)	0.355594	0.337039	(0.018555)	-5
	Total Cost	\$1,532,441	\$1,607,766	\$75,325	
	Average Cost	\$973	\$1,056	\$83	9
F	Charity Care - Inpatient Charges	¢4 400 700	¢4 000 450	¢206.259	44
5.	Charity Care - Inpatient Charges Charity Care - Outpatient Emergency Department	\$1,132,798	\$1,339,156	\$206,358	18
6.	Charges	1,281,768	1,159,719	(122,049)	-1(
0.	Charity Care - Outpatient Charges (Excludes ED	1,201,700	1,159,719	(122,049)	- 10
7.	Charges)	1,894,959	2,271,393	376,434	20
1.	Total Charges (A)	\$4,309,525	\$4,770,268	\$460,743	<u> </u>
		\$ 1,000,020	<i><i><i>ϕ</i></i> 1,110,200</i>	¢ 100,1 10	•
8.	Charity Care - Number of Patient Days	1,713	1,454	(259)	-15
9.	Charity Care - Number of Discharges	352	329	(23)	-
10.	Charity Care - Number of Outpatient ED Visits	1,642	1,653	11	
-	Charity Care - Number of Outpatient Visits (Excludes ED	,-	1		
11.	Visits)	4,576	4,698	122	:
	e total amount must agree with the total amount listed in		lited Finencial C	Statement Notes.	
A) IN	e tetal allount muet agree with the tetal allount herea i	the Hospital Aud	lited Financial S		
			inted Financial 3		
<u>A) In</u>	Hospital Bed Funds (see Hospital Reporting System - I				
	Hospital Bed Funds (see Hospital Reporting System - I			-	
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - I			-	(
<u>B.</u> 1.	Hospital Bed Funds (see Hospital Reporting System - I	Report 17)	-	-	
<u>B.</u> 1.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants Total Charges (B)	Report 17)	-	- - \$0	
<u>B.</u> 1. 2.	Hospital Bed Funds (see Hospital Reporting System - I Number of Applicants Number of Approved Applicants	Report 17) - -	-	-	
<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	Report 17) - - - \$0 \$0	- - \$0 \$0	- - \$0 \$0	
<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) - - - - - - - - - - - - - - - - - - -	- - \$0 \$0 0	- - \$0 \$0 0.000000	
<u>B.</u> 1. 2. 3.	Hospital Bed Funds (see Hospital Reporting System - Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost	Report 17) - - - - - - - - - - - - - - - - - - -	- - \$0 \$0 \$0 \$0	- - - \$0 \$0 0.000000 \$0	
<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) - - - - - - - - - - - - - - - - - - -	- - \$0 \$0 0	- - \$0 \$0 0.000000	
<u>B.</u> 1. 2. 3. 4.	Hospital Bed Funds (see Hospital Reporting System - Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost	Report 17) - <	- - \$0 \$0 \$0 \$0 \$0 \$0	- - \$0 \$0 0.000000 \$0 \$0 \$0	
<u>B.</u> 1. 2. 3.	Hospital Bed Funds (see Hospital Reporting System - Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost	Report 17) - - - - - - - - - - - - - - - - - - -	- - \$0 \$0 \$0 \$0	- - - \$0 \$0 0.000000 \$0	
<u>B.</u> 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) - - - - - - - - - - - - - - - - - - -	- - \$0 \$0 \$0 \$0 \$0 \$0 \$0	- - \$0 \$0 0.000000 \$0 \$0 \$0 \$0	
B. 1. 2. 3. 4.	Hospital Bed Funds (see Hospital Reporting System - Number of Applicants Number of Approved Applicants Total Charges (B) Average Charges Ratio of Cost to Charges (RCC) Total Cost Average Cost	Report 17) - - - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	- - \$0 \$0 \$0 \$0 \$0 \$0	- - \$0 \$0 0.000000 \$0 \$0 \$0	
B . 1. 2. 3. 4. 5. 6.	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	Report 17) - <	- - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 0 0	- - \$0 \$0 0.000000 \$0 \$0 \$0 \$0 0 0	
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) - <	- - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	- - \$0 \$0 0.000000 \$0 \$0 \$0 \$0	
B . 1. 2. 3. 4. 5. 6.	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) - <	- - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 0 0	- - - \$0 \$0 0.000000 \$0 \$0 \$0 \$0 \$0 0 0	
B . 1. 2. 3. 4. 5. 6.	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) - <	- - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	- - - \$0 \$0 0.000000 \$0 \$0 \$0 \$0 \$0 0 0	
<u>B.</u> 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)	Report 17)	- - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	- - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	
B. 1. 2. 3. 4. 5. 6. 7. 8.	Hospital Bed Funds (see Hospital Reporting System - 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) - <	- - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	- - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	
B. 1. 2. 3. 4. 5. 6. 7. 8. 9.	Hospital Bed Funds (see Hospital Reporting System - 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) - - - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 0 0 0 0 0 0 0 0 0 0 0 0	- - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		
<u>B.</u> 1. 2. 3. 4. 5. 6. 7. 8. 9.	Hospital Bed Funds (see Hospital Reporting System - 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 Outpatient ED Visits	Report 17) - - - - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 0 0 0 0 0 0 0 0 0 0 0 0	- - \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0		