		JOHN DEMPSEY HOSPITAL					
		ANNUAL REPORTING					
	FISCAL YEAR 2016						
	BEBORT	20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP					
		ND CORPORATION RELATED TO THE HOSPITAL					
(1)	(2)	(3)					
(1)	(2)	(3)					
	DESCRIPTION	AFFILIATE INFORMATION					
Α.	AFFILIATE NAME	UNIVERSITY OF CONNECTICUT HEALTH CENTER					
1	Affiliate Description	Academic Health Center					
2	Affiliate type of service	Parent Corporation					
3	Tax Status	Not for Profit					
4	Street Address	263 Farmington Avenue, Farmington, CT					
5	Town	Farmington Connecticut					
6 7	State Zip Code	06030 -					
	CEO Name	Andrew Agwunobi, M.D., M.B.A.					
9	CEO Title	C.E.O., Executive Vice President for Health Affairs					
10	CT Agent Name	George Jepsen, Attorney General					
	CT Agent Company	State of CT					
	CT Agent Company Street Address	55 Elm Street, Hartford, CT					
	CT Agent Town CT Agent State	Hartford Connecticut					
15	CT Agent Zip Code	06106 -					
10							
В.	AFFILIATE NAME	CENTRAL ADMINISTRATION AND FINANCE					
1	Affiliate Description	Statutory Entity					
2	Affiliate type of service	Affilate Support Services					
3	Tax Status	Not for Profit					
4	Street Address	263 Farmington Avenue					
5	Town	Farmington					
6	State	Connecticut					
	Zip Code CEO Name	06030 - Carolle Andrews / Jeffrey P. Geoghegan					
	CEO Title	CAO / CFO					
	CT Agent Name	George Jepsen, Attorney General					
11	CT Agent Company	State of CT					
	CT Agent Company Street Address	55 Elm Street					
	CT Agent Town	Hartford					
	CT Agent State	Connecticut 06106 -					
15	CT Agent Zip Code						
с.	AFFILIATE NAME	CORRECTIONAL MANAGED HEALTH CARE					
4	Affiliate Description	MANAGEMENT AND PROVISION OF HEALTH CARE SERVICES FOR THE DEPARTMENT OF					
1 2	Affiliate Description Affiliate type of service	CORRECTION. Managed Care					
2	Tax Status	Not for Profit					
4	Street Address	263 Farmington Avenue, Farmington, CT					
5	Town	Farmington					
6	State	Connecticut					
7	Zip Code	06030 -					
	CEO Name	Robert Trestman					
	CEO Title	Executive Director					
10	CT Agent Name CT Agent Company	George Jepsen, Attorney General State of CT					
		55 Elm Street, Hartford, CT					
11	CT Agent Company Street Address						
11 12	CT Agent Company Street Address CT Agent Town	Hartford					
11 12 13							

	JOHN DEMPSEY HOSPITAL						
	ANNUAL REPORTING						
	FISCAL YEAR 2016						
		20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP					
	AND CORPORATION RELATED TO THE HOSPITAL						
(1)							
(1)	(2)	(3)					
	DESCRIPTION	AFFILIATE INFORMATION					
D.	AFFILIATE NAME	JOHN DEMPSEY HOSPITAL					
1	Affiliate Description	Hospital Operations					
	Affiliate type of service	Hospital					
-	Tax Status	Not for Profit					
4 5	Street Address	263 Farmington Avenue					
6	Town State	Farmington Connecticut					
-	Zip Code	06030 -					
8	CEO Name	Anne Diamond					
	CEO Title	Chief Executive Officer					
	CT Agent Name	George Jepsen, Attorney General					
	CT Agent Company CT Agent Company Street Address	State of CT 55 Elm Street					
	CT Agent Town	Hartford					
14	CT Agent State	Connecticut					
15	CT Agent Zip Code	06106 -					
E.	AFFILIATE NAME	UCONN MEDICAL GROUP					
	Affiliate Description	Faculty Group Practice Physicians Services					
	Affiliate type of service Tax Status	Not for Profit					
4	Street Address	263 Farmington Avenue, Farmington, CT					
5	Town	Farmington					
6	State	Connecticut					
	Zip Code CEO Name	06030 - Denis Lafreniere, M.D.					
	CEO Name CEO Title	Medical Director, UMG Associate Dean					
	CT Agent Name	George Jepsen, Attorney General					
-	CT Agent Company	State of CT					
	CT Agent Company Street Address	55 Elm Street, Hartford, CT					
	CT Agent Town	Hartford					
	CT Agent State CT Agent Zip Code	Connecticut 06106 -					
15	CT Agent Zip Code						
F.	AFFILIATE NAME	UNIVERSITY DENTISTS					
1	Affiliate Description	FACULTY GROUP PRACTICE					
	Affiliate type of service	Physicians Services					
3	Tax Status	Not for Profit					
-	Street Address	263 Farmington Avenue, Farmington, CT					
	Town	Farmington					
	State Zip Code	Connecticut 06030 -					
	CEO Name	Dr. Steven M. Lepowsky, D.D.S.					
	CEO Title	Senior Associate Dean Education and Patient Care					
10	CT Agent Name	George Jepsen, Attorney General					
	CT Agent Company	State of CT					
	CT Agent Company Street Address	55 Elm Street, Hartford, CT					
	CT Agent Town CT Agent State	Hartford Connecticut					
	CT Agent State	06106 -					

	JOHN DEMPSEY HOSPITAL							
-		ANNUAL REPORTING						
	DEDORT	FISCAL YEAR 2016						
	REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP AND CORPORATION RELATED TO THE HOSPITAL							
(1)	(1) (2) (3)							
LINE	DESCRIPTION							
G.	AFFILIATE NAME	UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION						
1	Affiliate Description	STATUTORY ENTITY						
	Affiliate type of service	Affilate Support Services						
	Tax Status	Not for Profit						
4	Street Address	263 Farmington Avenue, Farmington, CT						
	Town	Farmington						
	State Zip Code	Connecticut 06030 -						
-	CEO Name	Scott Jordan						
-	CEO Title	Executive VP for Administration and CFO						
	CT Agent Name	George Jepsen, Attorney General						
	CT Agent Company	State of CT						
	CT Agent Company Street Address	55 Elm Street, Hartford, CT						
	CT Agent Town	Hartford						
	CT Agent State CT Agent Zip Code	Connecticut 06106 -						
15	CT Agent Zip Code							
Н.	AFFILIATE NAME	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE						
1	Affiliate Description	School of Dental Medicine- Academic and Research						
	Affiliate type of service	Health Education Services						
	Tax Status	Not for Profit						
	Street Address	263 Farmington Avenue, Farmington, CT						
	Town	Farmington						
6	State	Connecticut 06030 -						
	Zip Code CEO Name	R. L. MacNeil, D.D.S., M.Dent.Sc.						
	CEO Title	Dean. School of Dental Medicine						
	CT Agent Name	George Jepsen, Attorney General						
11	CT Agent Company	State of CT						
	CT Agent Company Street Address	263 Farmington Avenue, Farmington, CT						
	CT Agent Town	Farmington						
	CT Agent State CT Agent Zip Code	Connecticut 06030 -						
10								
Ι.	AFFILIATE NAME	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE						
1	Affiliate Description	SCHOOL OF MEDICINE - ACADEMIC AND RESEARCH						
	Affiliate type of service	Health Education Services						
	Tax Status	Not for Profit						
4	Street Address	263 Farmington Avenue, Farmington, CT						
	Town	Farmington						
	State Zip Code	Connecticut 06030 -						
	Zip Code CEO Name	Bruce T. Liang, M.D., F.A.C.C.						
	CEO Title	Dean, School of Medicine						
	CT Agent Name	George Jepsen, Attorney General						
11	CT Agent Company	State of CT						
	CT Agent Company Street Address	263 Farmington Avenue, Farmington, CT						
	CT Agent Town	Farmington						
	CT Agent State	Connecticut 06030 -						
P.U. B	OX IS UNACCEPTABLE WITHOUT A	STREET ADDRESS FOR EACH AGENT COMPANY						

(1)	ANNUAL R	'EAR 2016			
	REPORT 5 - HOSPITAL, AFFILIATE AND	DELATED CODDODATION NET ACCETO			
		RELATED CORPORATION NET ASSETS			
	(1) (2) (3)				
	(2)	FUND DESCRIPTION /	(4) BALANCE AS OF		
	AFFILIATE NAME	FUND PURPOSE	9/30/2016		
	JOHN DEMPSEY HOSPITAL		0040404		
1 2		Unrestricted Temporarily Restricted by Donor	\$246,164,703 \$0		
3		Temporarily Restricted by Board	\$0		
4		Permanently Restricted by Donor	\$0		
5		Intercompany Eliminations	\$0		
		Total:	\$246,164,703		
В. I	UNIVERSITY OF CONNECTICUT HEALTH CENTER				
1		Unrestricted	\$72,573,087		
2		Temporarily Restricted by Donor	\$0		
3		Temporarily Restricted by Board	\$0		
4		Permanently Restricted by Donor Intercompany Eliminations	<u>(\$875,840)</u> \$0		
		Total:	\$71,697,247		
			¢11,001,211		
C. (CENTRAL ADMINISTRATION AND FINANCE				
1		Unrestricted	(\$79,619,670)		
2		Temporarily Restricted by Donor Temporarily Restricted by Board	\$2,453 \$0		
4		Permanently Restricted by Donor	\$2,021		
5		Intercompany Eliminations	\$0		
		Total:	(\$79,615,196)		
D. (CORRECTIONAL MANAGED HEALTH CARE	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		
Ε.	JOHN DEMPSEY HOSPITAL				
1		Unrestricted	\$0		
2		Temporarily Restricted by Donor	\$0		
3		Temporarily Restricted by Board	\$0 \$0		
4		Permanently Restricted by Donor Intercompany Eliminations	\$0		
		Total:	\$0		
	UCONN MEDICAL GROUP				
1		Unrestricted	(\$57,945,869)		
23		Temporarily Restricted by Donor Temporarily Restricted by Board	\$0 \$0		
4		Permanently Restricted by Donor	\$0		
5		Intercompany Eliminations	\$0		
		Total:	(\$57,945,869)		
G. U 1	UNIVERSITY DENTISTS	Unrestricted	\$835,006		
2		Temporarily Restricted by Donor	\$035,000		
3		Temporarily Restricted by Board	\$0		
4		Permanently Restricted by Donor	\$0 \$0		
5		Intercompany Eliminations Total:	\$0 \$835,006		
			φ 0 30,006		

LINE AFFILIATE NAME FUND PURPOSE 9/30/20 UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION Unrestricted \$7, 1 Unrestricted \$7, 2 Temporarily Restricted by Donor \$7, 3 Temporarily Restricted by Donor \$7, 5 Intercompany Eliminations \$7, 6 Total: \$7, 7 Total: \$7, 1 Unrestricted by Donor \$1, 1. UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1. Unrestricted \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations	1			
FISCAL YEAR 2016 REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS (1) (2) (3) (4) (1) (2) (3) (4) FUND DESCRIPTION / BALANCE UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE H. CORPORATION Unrestricted \$7, 1 . Unrestricted by Donor \$7 3 . Temporarily Restricted by Donor \$7 5 . Intercompany Eliminations \$7, 1 . UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, Unrestricted \$1, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, \$1, Unrestricted \$1, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, \$1, \$1, 2 . . Temporarily Restricted by Donor \$1, 3 . . . \$1, 4 . Permanently Restricted by Donor \$1, 5 . . . \$1, 4 . <t< th=""><th></th><th>JOHN DEMPSEY HO</th><th>SPITAL</th><th></th></t<>		JOHN DEMPSEY HO	SPITAL	
REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS (1) (2) (3) (4) FUND DESCRIPTION / BALANCE LINE AFFILIATE NAME FUND DURPOSE 9/30/20 H. CORPORATION Unrestricted 9/30/20 1 University of CONNECTICUT HEALTH CENTER FINANCE FUND PURPOSE 9/30/20 1 Unrestricted \$7, \$7, 2 Temporarily Restricted by Donor \$7, 3 Temporarily Restricted by Donor \$7, 5 Intercompany Eliminations \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1. UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 2 Temporarily Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 5 Intercompany Eliminations \$1, 4		ANNUAL REPORT	FING	
(1) (2) (3) (4) FUND DESCRIPTION / BALANCE LINE AFFILIATE NAME FUND PURPOSE 9/30/20 1 UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE 9/30/20 1 Unrestricted \$7, 2 Temporarily Restricted by Donor \$7, 3 Temporarily Restricted by Donor \$7, 4 Permanently Restricted by Donor \$7, 5 Intercompany Eliminations \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 5 Intercompany Eliminations \$1, 4 Demanently Restricted by Donor \$5, <				
FUND DESCRIPTION / BALANCE LINE AFFILIATE NAME FUND PURPOSE 9/30/20 H. CORPORATION Unrestricted \$7, 1 University of CONNECTICUT HEALTH CENTER FINANCE Temporarily Restricted by Donor \$7, 2 Temporarily Restricted by Donor \$7, 3 Temporarily Restricted by Donor \$7, 5 Intercompany Eliminations \$7, 1 University OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$7, 1 University OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 University Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$1, 1 Unrestricted \$2,0		REPORT 5 - HOSPITAL, AFFILIATE AND RELA	TED CORPORATION NET ASSETS	
FUND DESCRIPTION / BALANCE LINE AFFILIATE NAME FUND PURPOSE 9/30/20 H. CORPORATION Unrestricted \$7, 1 University of CONNECTICUT HEALTH CENTER FINANCE Temporarily Restricted by Donor \$7, 2 Temporarily Restricted by Donor \$7, 3 Temporarily Restricted by Donor \$7, 5 Intercompany Eliminations \$7, 1. UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$7, 1. Unrestricted Yermanently Restricted by Donor \$1, 2 Total: \$7, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 5 Intercompany Eliminations \$1, 6				
LINE AFFILIATE NAME FUND PURPOSE 9/30/20 UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE	(1)	(2)		
UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION Unrestricted \$7, 1 Unrestricted \$7, 2 Temporarily Restricted by Donor \$7, 3 Temporarily Restricted by Board \$7, 4 Permanently Restricted by Donor \$7, 5 Intercompany Eliminations \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 Unrestricted \$1, 2 Temporarily Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 5 Intercompany Eliminations \$1, 6 Intercompany Eliminations \$1,				BALANCE AS OF
H. CORPORATION Unrestricted \$7, 1 Temporarily Restricted by Donor \$7 3 Temporarily Restricted by Board 4 4 Permanently Restricted by Donor 5 5 Intercompany Eliminations \$7, 6 Total: \$7, 7 Total: \$7, 6 Total: \$7, 7 Total: \$7, 6 Total: \$7, 7 Total: \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 Unrestricted \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Restricted by Donor \$1, 5 Intercompany Restricted by Donor \$2, 4 Permanently Restricted by Donor \$2, 5 Intercompan	LINE	AFFILIATE NAME	FUND PURPOSE	9/30/2016
1 Unrestricted \$7, 2 Temporarily Restricted by Donor 7 3 Temporarily Restricted by Donor 7 4 Permanently Restricted by Donor 7 5 Intercompany Eliminations 7 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 Unrestricted \$1, 2 Total: \$1, 2 Temporarily Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$1, 1 Unrestricted \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations		UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE		
2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations 7 Total: 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE 1 Unrestricted 2 Temporarily Restricted by Donor 3 Temporarily Restricted by Donor 4 Permanently Restricted by Donor 5 Intercompany Eliminations 5 Intercompany Eliminations 4 Permanently Restricted by Donor 5 Intercompany Eliminations 4 Permanently Restricted by Donor 5 Intercompany Eliminations 4 Permanently Restricted by Donor 3 Temporarily Restricted by Donor 3 Temporarily Restricted by Donor 4 Permanently Restricted by Donor 5 Intercompany Eliminations 5 Intercompany Eliminations 5	н.	CORPORATION		
3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations 1 Total: \$7, 1 University OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 Unrestricted \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Unrestricted (\$5,0, 2 Total (\$5,0, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Interc	1		Unrestricted	\$7,566,393
4 Permanently Restricted by Donor 5 Intercompany Eliminations 7 Total: \$7, 1 UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$1, 1 Unrestricted \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Board \$1, 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$1, 1 Unrestricted \$5,00 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Donor \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 4 Permanently Restricted by Donor \$1, 5 Intercompany Eliminations \$1, 6 Total o				\$0
5 Intercompany Eliminations 7otal: Total: 1. UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE 1 Unrestricted 2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations 4 Permanently Restricted by Donor 5 Intercompany Eliminations 4 Permanently Restricted by Donor 5 Intercompany Eliminations 1 UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE 1 Unrestricted 2 Total: 3 Total: 4 Permanently Restricted by Donor 3 Total: 4 Permanently Restricted by Donor 5 Intercompany Eliminations 6 Total of all Affiliates (before Intercompany Eliminations) 7 Fund Balance: \$185,	3			\$0
I. UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE \$7, 1 Unrestricted \$1, 2 Temporarily Restricted by Donor \$1, 3 Temporarily Restricted by Board \$1, 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$1, 1 Unrestricted \$\$5,0 2 Total: \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$1, 1 Unrestricted \$\$5,0 2 Temporarily Restricted by Donor \$\$1, 3 Total: \$\$1, 4 Permanently Restricted by Donor \$\$1, 5 Intercompany Eliminations \$\$1, 6 Total: \$\$1, 7 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$\$185, Intercompany Eliminations \$\$185, \$\$185, \$\$185,			Permanently Restricted by Donor	\$0
I. UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE 1 Unrestricted \$1, 2 Temporarily Restricted by Donor 3 3 Temporarily Restricted by Donor \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 4 Total: \$ 5 Temporarily Restricted by Donor \$ 6 University of Connecticut School of Medicine \$ 1 Unrestricted \$ 2 Temporarily Restricted by Donor \$ 3 Temporarily Restricted by Donor \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 6 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$ 1 Intercompany Eliminations \$ \$	5		Intercompany Eliminations	\$0
1 Unrestricted \$1, 2 Temporarily Restricted by Donor Temporarily Restricted by Board 3 Temporarily Restricted by Donor \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 7 Total: \$1, 7 Total: \$1, 7 UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$ 1 Unrestricted \$\$ 2 Temporarily Restricted by Donor \$\$ 3 Temporarily Restricted by Donor \$\$ 3 Temporarily Restricted by Donor \$\$ 4 Permanently Restricted by Donor \$\$ 5 Intercompany Eliminations \$ 4 Permanently Restricted by Donor \$\$ 5 Intercompany Eliminations \$ 6 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, 1 Intercompany Eliminations \$ \$			Total:	\$7,566,393
1 Unrestricted \$1, 2 Temporarily Restricted by Donor Temporarily Restricted by Board 3 Temporarily Restricted by Donor \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 7 Total: \$1, 7 Total: \$1, 7 UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$ 1 Unrestricted \$\$,0 2 Temporarily Restricted by Donor \$\$ 3 Temporarily Restricted by Donor \$\$ 3 Temporarily Restricted by Donor \$\$ 4 Permanently Restricted by Donor \$\$ 5 Intercompany Eliminations \$ 5 Intercompany Eliminations \$ 4 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations \$ \$ 5 Intercompany Eliminations \$				
1 Unrestricted \$1, 2 Temporarily Restricted by Donor Temporarily Restricted by Board 3 Temporarily Restricted by Donor \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 7 Total: \$1, 7 Total: \$1, 7 UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$ 1 Unrestricted \$\$,0 2 Temporarily Restricted by Donor \$\$ 3 Temporarily Restricted by Donor \$\$ 3 Temporarily Restricted by Donor \$\$ 4 Permanently Restricted by Donor \$\$ 5 Intercompany Eliminations \$ 5 Intercompany Eliminations \$ 4 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations \$ \$ 5 Intercompany Eliminations \$				
2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations 5 Total: 4 Temporarily Restricted by Donor 5 Intercompany Eliminations 6 Total: 7 Total: 1 Unrestricted 1 Unrestricted by Donor 3 Temporarily Restricted by Donor 5 Intercompany Eliminations 6 Total of all Affiliates (before Intercompany Eliminations) 7 Fund Balance: \$185,	١.	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE		
3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations 7 Total: 1 VNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE 1 Unrestricted 2 Temporarily Restricted by Donor 3 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Board 5 Intercompany Eliminations 6 Intercompany Eliminations	1			\$1,095,855
4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ 7otal: \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE \$ 1 Unrestricted (\$5,0 2 Temporarily Restricted by Donor \$ 3 Temporarily Restricted by Board \$ 4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations \$ Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations \$ \$				\$19,891
5 Intercompany Eliminations Total: \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE 1 Unrestricted (\$5,0 2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185,	-			\$0
Image: Second Structure Total: \$1, J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE Image: Second Structure (\$5,0 1 Unrestricted Unrestricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185,				\$463,579
J. UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE Image: Construction of the distribution of the distress of the distributicon of the distress (the distributicon of th	5			\$0
1 Unrestricted (\$5,0 2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185,			Total:	\$1,579,325
1 Unrestricted (\$5,0 2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185,				
2 Temporarily Restricted by Donor 3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185,	J.	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE		
3 Temporarily Restricted by Board 4 Permanently Restricted by Donor 5 Intercompany Eliminations Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185,	1			(\$5,037,019)
4 Permanently Restricted by Donor \$ 5 Intercompany Eliminations (\$4,5 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations				\$39,107
5 Intercompany Eliminations Total: Colspan="2">Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations \$185,	-			\$0
Total: (\$4,5 Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations \$185,				\$486,984
Total of all Affiliates (before Intercompany Eliminations) Fund Balance: \$185, Intercompany Eliminations \$185,	5			\$0
Intercompany Eliminations			Total:	(\$4,510,928)
Intercompany Eliminations				
			Fund Balance:	\$185,770,681
				\$0
Fund Balance: \$185,		Total of all Affiliates	Fund Balance:	\$185,770,681

	JO	HN DEMPSEY HOSPITAL		
		ANNUAL REPORTING		
		FISCAL YEAR 2016 THE HOSPITAL AND AFFILIATES OR RELATED CORPOR	1710110	
	REPORT 6 - TRANSACTIONS BETWEEN T	HE HOSPITAL AND AFFILIATES OR RELATED CORPOR	ATIONS	
(1)	(2)	(3)	(4)	(5)
			DATE	TRANSFER TO / FROM
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	HOSPITAL
Α.	UNIVERSITY OF CONNECTICUT HEALTH CENTER			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$61,906,602
1		Purchase of Goods and Services Revenue from Services	09/30/2016 09/30/2016	\$211,529 (\$567,722)
2		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$61,550,409
		,,		•••,•••,•••
В.	CENTRAL ADMINISTRATION AND FINANCE			
1		Beginning Unconsolidated Intercompany Balance: Purchase of Goods and Services	9/30/2015 09/30/2016	\$78,660,209 \$43,435,080
1		Revenue from Services	09/30/2016	\$43,435,080 (\$9,399,234)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$112,696,055
C.	CORRECTIONAL MANAGED HEALTH CARE			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	(\$6,899,297)
1		Revenue from Services	09/30/2016	(\$11,499,355)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$18,398,652)
D.	JOHN DEMPSEY HOSPITAL			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$0
		Nothing to Report	3/30/2013	\$0 \$0
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$0
Ε.	UCONN MEDICAL GROUP			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$9,740,808
1		Purchase of Goods and Services	09/30/2016	\$3,568,514
2		Revenue from Services	09/30/2016	(\$5,392,887)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$7,916,435
F.				
F.	UNIVERSITY DENTISTS			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	(\$2,684,293)
1		Revenue from Services	09/30/2016	(\$1,248,262)
		Ending Unconsolidated Intercompany Balance:	9/30/2016	(\$3,932,555)
G.	UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION			
Ο.				
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$26,148,678
1		Purchase of Goods and Services	09/30/2016	\$8,002,468
		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$34,151,146
Н.	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$1,505,095
1		Purchase of Goods and Services	09/30/2016	\$21,734
2		Revenue from Services Ending Unconsolidated Intercompany Balance:	09/30/2016 9/30/2016	(\$20,197) \$1,506,632
-		Balance.	313012010	φ1,500,032
١.	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE			
		Beginning Unconsolidated Intercompany Balance:	9/30/2015	\$112,694,274
1		Purchase of Goods and Services Revenue from Services	09/30/2016 09/30/2016	\$22,578,716 (\$1,011,855)
-		Ending Unconsolidated Intercompany Balance:	9/30/2016	\$134,261,135
				, . ,

	JOHN DEMPSEY HOSPITAL ANNUAL REPORTING						
		FISCAL YEAR 2016					
	REPORT 6A - TRANSACTIONS BE	TWEEN HOSPITAL AFFILIATES OR RELATED CO	ORPORATIONS				
(1)	(2)	(3)	(4)	(5)	(6)		
(1)	(2)	(3)	(4)	(3)	(0)		
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT		
			Beginning Unconsolidated				
Α.	UNIVERSITY OF CONNECTICUT HEALTH CENTER		Intercompany Balance	10/01/2015	\$146,661,653		
А.	UNIVERSITT OF CONNECTICUT REALTH CENTER	UNIVERSITY OF CONNECTICUT HEALTH					
1		CENTER FINANCE CORPORATION	Rent	09/30/2016	\$573,535		
		UNIVERSITY OF CONNECTICUT SCHOOL OF	Purchase of Goods and				
2		MEDICINE	Services	09/30/2016	\$674,763		
3		CENTRAL ADMINISTRATION AND FINANCE	Purchae of Goods and Services	09/30/2016	\$6,632,766		
			Total:	9/30/2016	\$7,881,064		
В.	CENTRAL ADMINISTRATION AND FINANCE	UNIVERSITY OF CONNECTICUT HEALTH					
1		CENTER FINANCE CORPORATION	Rent	09/30/2016	\$4,128,156		
			Total:	9/30/2016	\$4,128,156		
C.	CORRECTIONAL MANAGED HEALTH CARE		Burghood of Canada and				
1		UCONN MEDICAL GROUP	Purchase of Goods and Services	09/30/2016	\$911,796		
2		CENTRAL ADMINISTRATION AND FINANCE	Rent	09/30/2016	\$205,354		
			Purchase of Goods and				
3		CENTRAL ADMINISTRATION AND FINANCE	Services Total:	09/30/2016 9/30/2016	\$402,611		
			i otal:	9/30/2016	\$1,519,761		
D.	JOHN DEMPSEY HOSPITAL						
			Nothing to Report		\$0		
			Total:	9/30/2016	\$0		
-							
E.	UCONN MEDICAL GROUP	UNIVERSITY OF CONNECTICUT HEALTH					
1		CENTER FINANCE CORPORATION	Rent	09/30/2016	\$6,961,280		
			Purchase of Goods and				
2		CENTRAL ADMINISTRATION AND FINANCE	Services	09/30/2016	\$1,433,148		
			Total:	9/30/2016	\$8,394,428		
F.	UNIVERSITY DENTISTS						
		UNIVERSITY OF CONNECTICUT HEALTH					
1		CENTER FINANCE CORPORATION	Rent	09/30/2016	\$634,336		
2		CENTRAL ADMINISTRATION AND FINANCE	Purchase of Goods and Services	09/30/2016	\$173,807		
-			Total:	9/30/2016	\$808,143		
G.	UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION		Purchase of Goods and				
1		CENTRAL ADMINISTRATION AND FINANCE	Services	09/30/2016	\$489		
			Total:	9/30/2016	\$489		
Н.	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE		Purchase of Goods and				
1		CENTRAL ADMINISTRATION AND FINANCE	Services	09/30/2016	\$2,226,554		
			Total:	9/30/2016	\$2,226,554		
I.	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE			00/00/2212			
1		CENTRAL ADMINISTRATION AND FINANCE UNIVERSITY OF CONNECTICUT HEALTH	Rent Purchase of Goods and	09/30/2016	\$104,210		
2		CENTER	Services	09/30/2016	\$8,507,617		
			Purchase of Goods and				
3		CENTRAL ADMINISTRATION AND FINANCE	Services	09/30/2016	\$1,027,459		
			Total:	9/30/2016	\$9,639,286		
			Ending Unconsolidated				
			Intercompany Balance	9/30/2016	\$181,259,534		
		1	1				

	JOHN DEMPSEY HOSPI	ΓAL	
	ANNUAL REPORTING		
	FISCAL YEAR 2016		
	REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORA	TIONS FOR THE BENEFIT OF THE HOSPI	ITAL
(4)	(0)		(1)
(1)	(2) AFFILIATE NAME &	(3)	(4)
LINE	DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
Α.	UNIVERSITY OF CONNECTICUT HEALTH CENTER		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
В.	CENTRAL ADMINISTRATION AND FINANCE		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
C.	CORRECTIONAL MANAGED HEALTH CARE		
0	Nothing to Report Total:	\$0 \$0	9/30/2016
	i otai.	\$0	9/30/2016
D.	JOHN DEMPSEY HOSPITAL		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
E.	UCONN MEDICAL GROUP		
0	Nothing to Report Total:	\$0 \$0	9/30/2016
	Total.	4 0	3/30/2010
F.	UNIVERSITY DENTISTS		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
G .	UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION	**	
0	Nothing to Report Total:	\$0 \$0	9/30/2016
			3/30/2010
н.	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2016
<u>І.</u> 0	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE Nothing to Report	**	
0	Nothing to Report Total:	\$0 \$0	9/30/2016
			5/50/2010
	Grand Total:	\$0	9/30/2016

	JOHN DEMPSEY HOSPITAL		
	ANNUAL REPORTING		
	FISCAL YEAR 2016		
	REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT	OF AFFILIATES / RELATED CORPORA	TIONS
(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
LINE	DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERMIN FEARS
Α.	UNIVERSITY OF CONNECTICUT HEALTH CENTER		
0	Nothing to Report	\$0	0
	Total:	\$0	
В.	CENTRAL ADMINISTRATION AND FINANCE		
0	Nothing to Report	\$0	0
	Total:	\$0	
_			
C .	CORRECTIONAL MANAGED HEALTH CARE Nothing to Report	\$0	0
0	Nothing to Report Total:	⇒0 \$0	0
	i otai.	40	
D.	JOHN DEMPSEY HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
Ε.	UCONN MEDICAL GROUP		
0	Nothing to Report	\$0	0
	Total:	\$0	
F. 0	UNIVERSITY DENTISTS Nothing to Report	\$0	0
0	Total:	\$0 \$0	0
	i otai.	40	
G.	UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE CORPORATION		
0	Nothing to Report	\$0	0
	Total:	\$0	
H.	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE		
0	Nothing to Report	\$0	0
	Total:	\$0	
I. 0	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE Nothing to Report	\$0	0
U	Nothing to Report	50 \$0	0
		40	
	Grand Total:	\$0	
1	erand retain	ţ.	

					1
		JOHN DEMPSEY H			
		ANNUAL REPO			
		FISCAL YEAR			
	REPORT		FUNDS RESTRICTED FOR		
		INDIGENT CARE AND			
(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%
В.	Free Beds				
	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%
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	\$0.00	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%

	JOHN DEMPSEY HOSPITAL						
	ANNUAL REPORTING						
	FISCAL YEAR 2016						
REPOF	REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL						
A. Patient Activity							
(1)	(1) (2) (3)						
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount					
1. Number of Applications to	r Hospital Bed Funds	0					
	Grand Total	\$0.00					

		JOHN DEMPSEY			
		ANNUAL REPO	RTING		
		FISCAL YEAR	2016		
	REPORT 17B - HOSPI	TAL BED FUNDS HELD (OR ADMINISTERED B	Y THE HOSPITAL	
B. BE	D FUND ACTIVITY				
(1)	(2)	(3)	(4)	(5)	(6)
		FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
Line	Name of Hospital Bed Fund				
(3)	(3) Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each Hospital Bed Fu				
(4)	Total Actual Earnings for each Hospital	Bed Fund or the Earning	is attributable to each	n Hospital Bed Fund.	
(5)	(5) Actual Dollar Amount of Earnings reinvested as Principal, if any.				
(6)	Actual Dollar Amount of Earnings available for Patient Care.				
	Total Bed Funds :	\$0.00	\$0.00	\$0.00	\$0.00

	JOHN DEM	MPSEY HOSPITAL					
	ANNUA	L REPORTING					
	FISCA	AL YEAR 2016					
	REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION						
(1)	(2)	(3)					
	DESCRIPTION						
L	GENERAL COLLECTION PROCESSES AND PROCEDURES						
	Hospital's processes and policies for assigning a debt to a						
	Collection Agent	JDH sends patient an initial dunning letter to verify address & generate payment. Staff performs asset and employment verification on balances> \$2K If no response is received in 90 days, the account is turned over to self. It may be referred to collection agency or AG Office.					
	Hospital's processes and policies for compensating a Collection Agent for services rendered	The agencies submitted a bid thru an RFP to perform collection services. They are paid on a commission based payment schedule. The Hospital also has an arrangement w the State of CT AG Office for Collection.					
	Total Recovery Rate on accounts assigned (excluding Medicare						
	accounts) to Collection Agents	21.40%					
	SPECIFIC COLLECTION AGENT INFORMATION						
	Collection Agent						
	Collection Agent Name	Nair & Levin					
	Collection Agent Type	Attorney					
	Related / Not Related Entity If the Hospital follows the same processes and policies described	Not Related					
i	in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	JDH sends patient an initial dunning letter to verify address & generate payment. Staff performs asset and employment verification on balances> \$2K If no response is received in 90 days, the account is turned over to self. It may be referred to collection agency or AG Office.					
	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 agencies submitted a bid thru an RFP to perform collection services. They are paid on a commission based payment schedule. The Hospital also has an arrangement w the State of CT AG Office for Collection.					
	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	21.22%					
	Collection Agent						
1	Collection Agent Name	American Adjustment Bureau					
2	Collection Agent Type	Collection Agency					
	Related / Not Related Entity	Not Related					
i	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.	JDH sends patient an initial dunning letter to verify address & generate payment. Staff performs asset and employment verification on balances> \$2K If no response is received in 90 days, the account is turned over to self. It may be referred to collection agency or AG Office.					
	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 agencies submitted a bid thru an RFP to perform collection services. They are paid on a commission based payment schedule. The Hospital also has an arrangement w the State of CT AG Office for Collection.					
	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	21.60%					

	•	JOHN DEMPSEY HOSPITAL	-	•					
	ANNUAL REPORTING								
	FISCAL YEAR 2016								
	REPORT 19 - SALARIES	AND FRINGE BENEFITS OF THE TEN HI	GHEST PAID HOSPITAL	EMPLOYEES					
LINE	POSITION TITLE	EMPLOYEE NAME	SALARY	FRINGE BENEFITS	TOTAL				
	POSITION TITLE		SALAR I	FRINGE DENEFTI 5	TUTAL				
1.	E.R. Physician / Site Coord. of Emergency	Sara Blomstrom, M.D.	\$329,303	\$183,847	\$513,150				
		Cara Distriction, mp.	<i>4020,000</i>	\$100,041	\$0.0,000				
2.	CEO	Anne Marie H. Diamond	\$348,654	\$67,149	\$415,803				
3.	E.R. Physician / Assist. Prof of Trauma & Emerg	Khalilah O. Hunter-Anderson, M.D.	\$295,473	\$64,866	\$360,339				
			A	A (A -)	0054 000				
4.	E.R. Physician / Assist. Prof of Trauma & Emerg	Robert P. Fuller, M.D.	\$301,228	\$49,774	\$351,002				
5.	CNO / VP Quality and Patient Care Services	Ann Marie Capo	\$278.923	\$46.664	\$325,587				
0.	one , in addity and r atom our our of these		ψ270,525	φ+0,00+	\$020,001				
6.	E.R. Physician / Assist. Prof of Trauma & Emerg	Matthew W. Barr, M.D.	\$258,531	\$65,186	\$323,717				
	· · · ·								
7.	E.R. Physician / Assist. Prof of Trauma & Emerg	Douglas E. Boccuzzi, Ph.D.	\$196,827	\$53,079	\$249,906				
			* ***	A (A - A)					
8.	Medical Physicist - Radiation Oncology	Paul J. Kaloudis, M.D.	\$202,542	\$43,739	\$246,281				
9.	Prof Clin Pathology and Lab Medicine	Sidney M. Hopfer, Ph.D.	\$192,476	\$44,935	\$237,411				
	The own autology and Lab Medicine	olanoy in: Hopfor, Th.D.	ψ1 3 2,470	\$ 44 ,555	ψ257,411				
10.	Medical Physicist - Radiology	Christopher D. James, Ph.D.	\$188,300	\$44,634	\$232,934				
		• • •							
		Grand Total:	\$2,592,257	\$663,873	\$3,256,130				

	UNIVERSITY OF CONNECTICUT HEALTH CENTER ANNUAL REPORTING								
	ANNUAL REPORTING FISCAL YEAR 2016								
	FISTAL TEAK 2010 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.	MOHS SURGEON/SURGERY CHEIF OF PEDS DERMATOLOGY	Hanspauk Makkar, M.D. Sch of Medicine/UMG	\$1,099,478	\$65,128	\$1,164,606				
2.	ORTHOPAEDIC SURGEON/ASST PROF DIV OF ORTHOPAEDICS	Isaac Moss, M.D. Sch of Medicine/UMG	\$754,673	\$73,845	\$828,518				
3.	SURGEON/ CHAIR OF DEPT OF ORTHOPAEDIC SURGERY	Roy D. Beebe, M.D. Sch of Med/UMG	\$614,455	\$179,838	\$794,293				
4.	SURGEON/ASST PROF OF ORTHOPAEDIC SURGERY	Augustus D. Mazzocca, M.D. Sch of Medicine/UMG	\$700,721	\$79,735	\$780,456				
5.	SURGEON CEO CICATS/ DIR INST FOR REGENERATIVE ENG	Cato T. Laurencin, M.D., Ph.D Sch of Medicine/UMG	\$600,455	\$71,441	\$671,896				
6.	SURGEON IN CHIEF/ CHAIR DEPT OF SURGERY	Robert A. Aerciero, M.D. Sch of MEdicine/UMG/Hospital	\$593,201	\$71,339	\$664,540				
7.	ORTHOPAEDIC SURGEON/ CHIEF SPORTS MEDICINE	David W. McFadden, M.D. Sch of Medicine/UMG/Hospital	\$597,472	\$61,851	\$659,323				
8.	EXECUTIVE VICE PRESIDENT HEALTH AFFAIRS	Andrew C Agwunobi, M.D. Sch of Medicine/UMG/Hospital	\$517,380	\$61,417	\$578,797				
9.	CHAIR OBSTETRICS AND GYNECOLOGY/ PROF OB/GYN	Molly A Brewer, M.D. Sch of Medicine/UMG	\$503,353	\$65,037	\$568,390				
10.	SURGEON/ CHIEF AND PROGRAM DIRECTOR UROLOGY/ PROF	Peter C. Albertsen, M.D. Sch of Medicine/UMG/Hospital	\$464,241	\$84,770	\$549,011				
		Grand Total:	\$6,445,429	\$814,401	\$7,259,830				

			HN DEMPSEY HOSP						
	ANNUAL REPORTING								
FISCAL YEAR 2016									
	REPORT 19C - FINANCIAL GAINS REALIZED FROM A TRANSFER OF OWNERSHIP CON								
				SEVERANCE	STOCK OFFERING	OTHER FINANCIAL			
LINE	NAME	POSITION TYPE	SALARY	PAYMENT	VALUE	GAIN	TOTAL		
	Not Applicable		\$0	\$0	\$0		\$0		
2.			\$0	\$0	\$0		\$0		
3. 4.			\$0 \$0	\$0 \$0	\$0 \$0		\$0 \$0		
4. 5.			\$0 \$0		\$0		\$0		
6.		1	\$0	\$0	\$0		\$0		
7.		1	\$0	\$0	\$0		\$0		
8.			\$0		\$0		\$0		
9.			\$0	\$0	\$0	\$0	\$0		
10.			\$0	\$0	\$0		\$0		
11.			\$0	\$0	\$0		\$0		
12. 13.			\$0	\$0	\$0		\$0		
13.			\$0	\$0 \$0	\$0 \$0		\$0 \$0		
14.			\$0 \$0	\$0	\$0		\$0		
16.			\$0		\$0		\$0		
17.			\$0	\$0	\$0		\$0		
18.			\$0	\$0	\$0		\$0		
19.			\$0	\$0			\$0		
20.			\$0	\$0	\$0		\$0		
21.			\$0	\$0	\$0		\$0		
22. 23.			\$0 \$0	\$0 \$0	\$0 \$0		\$0 \$0		
23.			\$0 \$0		\$0		\$0 \$0		
25.			\$0		\$0		\$0		
26.			\$0		\$0		\$0		
27.			\$0	\$0	\$0		\$0		
28.			\$0		\$0		\$0		
29.			\$0		\$0		\$0		
30.			\$0	\$0	\$0		\$0		
31. 32.			\$0	\$0	\$0 \$0		\$0 \$0		
32. 33.		+	\$0 \$0	\$0 \$0	\$0		\$U ¢∩		
34.		1	\$0	\$0	\$0		\$0 \$0		
35.		1	\$0	\$0	\$0		\$0		
36.			\$0	\$0	\$0	\$0	\$0		
37.			\$0	\$0	\$0	\$0	\$0		
38.			\$0		\$0		\$0		
39.			\$0		\$0		\$0		
40. 41.			\$0	\$0	\$0		\$0 \$0		
41.		+	\$0 \$0	\$0 \$0	\$0 \$0		\$0 \$0		
42.		1	\$0		\$0		\$0		
44.		1	\$0		\$0		\$0		
45.			\$0		\$0		\$0		
46.			\$0	\$0	\$0	\$0	\$0		
47.			\$0		\$0		\$0		
48.			\$0		\$0		\$0		
49.			\$0		\$0		\$0 \$0		
50.			\$0		\$0				
		Grand Total:	\$0	\$0	\$0	\$0	\$0		

	JOHN DEMPSEY HOSP			
	ANNUAL REPORTIN			
	FISCAL YEAR 2016		•	
	REPORT 21- HOSPITAL SALARIES AND	FRINGE BENEFIT	5	
	PAID BY JOINT VENTURES, AFFILIATES AND I	RELATED CORPOR	ATIONS	
(1)	(2)	(3)	(4)	(5)
. /		SALARIES	FRINGE	X-7
			BENEFITS ^A (Directl	
		(Directly or		
LINE	DESCRIPTION	Indirectly) ^C	y or Indirectly) ^C	TOTAL
Α.	UNIVERSITY OF CONNECTICUT HEALTH CENTER	T		
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0	<u>\$0</u> \$0
2		ψυ	ΨΟ	ΨΟ
Β.	CENTRAL ADMINISTRATION AND FINANCE	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
		· ·	· · ·	
С.	CORRECTIONAL MANAGED 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
		-		
D.	JOHN DEMPSEY HOSPITAL			
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
_		T		
Ε.	UCONN MEDICAL GROUP	<u> </u>	* 0	* 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
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
F.	UNIVERSITY DENTISTS	1		
<u>г.</u> 1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0 \$0	\$0	<u>\$0</u> \$0
2		ψυ	ΨΟ	ψυ
	UNIVERSITY OF CONNECTICUT HEALTH CENTER FINANCE	I		
G.	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
			· · ·	
Η.	UNIVERSITY OF CONNECTICUT SCHOOL OF DENTAL MEDICINE			
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.	UNIVERSITY OF CONNECTICUT SCHOOL OF MEDICINE			
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 antity listed on Papart 20, complete Papart 21			
	For each entity listed on Report 20, complete Report 21.			
	A - Fringe benefits shall represent the value of all forms of compensatior	as described in Se	ction 102-642 206 (b)(21)	including the
	fair market value where appropriate.	i as described in Se	uuun 19a-043-200-(D)(21)	, menualing the
	B - A hospital employee is anyone who provides a service which incurs a	an avnanca far tha h	ospital	
			υσριται.	
	C - Indirect payments include but are not limited to payments made to re	เลเฮน ยาแแยร.		

	JOHN DEMPSEY HOSPITAL			
	ANNUAL REPORTING			
	FISCAL YEAR 2016			
	REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR			
	CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT EN	ΓΙΤΥ		
(1)	(2)	(3)		
LINE	DESCRIPTION	ACTUAL FY 2016		
Α	Transfer of Assets or Operations			
	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of			
	Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or			
1.	Functions.	N/A		
	Description of each Transfer of Assets or Operations or Change of Control involving Hospital			
2.	Clinical or Nonclinical Services or Functions.	N/A		
	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved			
3.	in a change of control.	N/A		
	Detailed and Transform (Association Operations on Observe of Operated in the Unit of			
	Date that each Transfer of Assets or Operations or Change of Control involving Hospital	N1/A		
4.	Clinical or Nonclinical Services or Functions occurred.	N/A		
	Amount of each Transfer of Acapta or Operations or Change of Control involving Licenited			
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0		
ວ.		\$0		

(1)			PROVIDED BY	THE HOSPITAL	
(1)	REPORT 23 - CHARITY CARE AND REDUCED	COST SERVICES	PROVIDED BY	THE HOSPITAL	
(1)			PROVIDED BY	THE HOSPITAL	
(1)	(2)				
(1)	(2)	(3)	(4)	(5)	(6)
		(3) FY 2015	(4) FY 2016	AMOUNT	(0) %
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE
		<u>/</u>	<u>/</u>		
<u>A.</u>	Hospital Charity Care (see Hospital Audited Financial S	tatement Notes)			
				(2.1)	
	Number of Applicants Number of Approved Applicants	140	109	(31)	-22%
2.		91	98	7	8%
3.	Total Charges (A)	\$379,861	\$368,086	(\$11,775)	-3%
	Average Charges	\$4,174	\$3,756	(\$418)	-10%
4.	Ratio of Cost to Charges (RCC)	0.47377	0.432928	(0.040842)	-9%
	Total Cost	\$179,967	\$159,355	(\$20,612)	-11%
	Average Cost	\$1,978	\$1,626	(\$352)	-18%
E	Charity Care - Inpatient Charges	\$99.312	\$69,559	(\$29,753)	-30%
	Charity Care - Inpatient Charges Charity Care - Outpatient Emergency Department	\$99,31Z	909,559	(⊅∠9,753)	-30%
	Charges	123,526	135,521	11,995	10%
	Charity Care - Outpatient Charges (Excludes ED	120,020	100,021	11,000	1076
	Charges)	157,023	163,006	5,983	4%
	Total Charges (A)	\$379,861	\$368,086	(\$11,775)	-3%
	Charity Care - Number of Patient Days	17	14	(3)	-18%
	Charity Care - Number of Discharges	9	6	(3)	-33%
	Charity Care - Number of Outpatient ED Visits Charity Care - Number of Outpatient Visits (Excludes ED	83	64	(19)	-23%
	Visits)	273	184	(89)	-33%
	(1513)	215	104	(03)	-5578
(A) The	total amount must agree with the total amount listed in	the Hospital Aud	lited Financial S	tatement Notes.	
_	Hannital Dad Funda (and Hannital Damonting Operations				
<u>B.</u>	Hospital Bed Funds (see Hospital Reporting System - R	eport 17)			
1.	Number of Applicants	-	-	_	0%
	Number of Approved Applicants	-	-	-	<u> </u>
3.	Total Charges (B)	\$0	\$0	\$0	0%
	Average Charges	\$0	\$0	\$0	0%
	Ratio of Cost to Charges (RCC)	0	0	0.000000	0%
	Total Cost	\$0	\$0 \$0	\$0 \$0	0%
	Average Cost	\$0	۵ ۵	۵ ۵	0%
5.	Bed Funds - Inpatient Charges	\$0	\$0	\$0	0%
5.		Uψ	ψυ	ΨŪ	078
6.	Bed Funds - Outpatient Emergency Department Charges	0	0	0	0%
	Bed Funds - Outpatient Charges (Excludes ED Charges)	0	0	0	0%
	Total Charges (B)	\$0	\$0	\$0	0%
0	Ded Europe Number of Definit Devic				
	Bed Funds - Number of Patient Days	0	0	0	0%
	Bed Funds - Number of Discharges Bed Funds - Number of Outpatient ED Visits	0	0	0	<u>0%</u> 0%
	Bed Funds - Number of Outpatient Visits	U	0	0	0 %
	Visits)	0	0	0	0%
		-			
(B) The	total amount must agree with the total amount listed or	n Hospital Report	ing System - Re	port 17.	