Statewide Hospital Solvency Ratios Fiscal Years 2014 - 2016																
Affiliated Health System Hospital or Non-Affiliated (Individual) Hospital Name	Equit	Equity Financing Ratio			Cash Flow to Total Debt Ratio				Long-Term Debt to Capitalization Ratio				Debt Service Coverage Ratio			
(as of 9/30/2016) <sup>1</sup>	FY 2014	FY 2015	FY 2016		FY 2014	FY 2015	FY 2016		FY 2014	FY 2015	FY 2016		FY 2014	FY 2015	FY 2016	
ASCENSION HEALTH																
SAINT VINCENT'S	81	81	68		64	9	46		9	10	23		27.7	4.3	10.6	
EASTERN CONNECTICUT HEALTH NETWORK																
MANCHESTER <sup>2,3</sup>	15	10	(4)		11	17	(17)		67	77	375		1.8	2.0	(0.1)	
ROCKVILLE <sup>3</sup>	38	29	31		17	(3)	(51)		45	54	4		4.1	(0.2)	(0.3)	
HARTFORD HEALTHCARE CORPORATION	-					1										
BACKUS	69	69	71		68	53	82		16	16	14	_	14.1	15.5	22.7	
HARTFORD	38	36	25		24	19	17		39	47	56	_	1.1	8.5	8.5	
HOSPITAL OF CENTRAL CT	46	48	42		79	14	41		0	21	23		11.7	6.1	11.9	
MIDSTATE	39	33	32		31	22	37		45	49	49		7.9	5.9	8.5	
WINDHAM <sup>2,3</sup>	(46)	(74)	(103)		(1)	(2)	(19)		(1903)	(172)	(95)		0.1	0.1	(3.4)	
REGIONALCARE HOSPITAL PARTNERS, INC.		T	I.			I										
SHARON <sup>3,4</sup>	75	76	58		61	(298)	(278)		12	0	0		489.8	(850.7)	(404.3)	
TRINITY HEALTH-NEW ENGLAND, INC.		1	<b></b>				1-1		-		- 13 - 1					
JOHNSON <sup>2,4</sup>	18	8	(11)		12	(5)	(8)		0	52	(347)		3.2	(1.1)	(1.1)	
	23	17	18		15	6	17		58	65	64		3.1	1.6	4.8	
SAINT MARY'S <sup>4</sup>	25	25	38		63	59	113		28	19	0		9.5	4.7	14.3	
WESTERN CONNECTICUT HEALTH NETWORK												_		~ .		
DANBURY	58	57	55		25	12	21		33	34	35		11.7	0.4	8.8	
NORWALK	51	55	65		26	31	35		28	24	20		8.4	7.5	7.2	
YALE-NEW HAVEN HEALTH SERVICES CORPORATION		22	24		20	20	24		20		47		44 7	44.6	7.6	
BRIDGEPORT	33	32 71	31		39	38	31 62		39	44 7	47	_	11.7	11.6	7.6	
GREENWICH	71		67		68	60	-		8	-	-	_	21.6	17.5	19.5	
L&M YALE-NEW HAVEN	42	35 39	32 40		20 23	24 18	16 22		39 43	44 41	46 38		5.3 0.6	6.3 8.8	4.1	
															-	
Affiliated Health System Hospital Average	40	36	31		36	4	9		(77)	24	20	_	35.2	(41.7)	(15.0)	
Affiliated Health System Hospital Median	39	35	35		26	18	22		30	37	23	_	8.1	5.3	8.0	
INDIVIDUAL HOSPITAL SYSTEMS												_				
BRISTOL	25	20	15		17	18	11		47	53	59	_	3.9	3.8	2.4	
CT CHILDREN'S	51	52	55		8	33	42		23	21	17		3.9 1.8	5.0	6.1	
DAY KIMBALL <sup>2</sup>	5	(12)	(16)		14	10	25		86	162	230		4.2	4.5	5.0	
DEMPSEY <sup>3,4</sup>	55	(24)	49		1	83	549		0	0	0	-	0.0	0.0	0.0	
GRIFFIN <sup>2</sup>	(14)	(24)	(26)		18	13	29		165	355	477	-	3.1	2.7	4.9	
HUNGERFORD	63	53	39		62	47	5		0	0	18		2.8	0.0	(4.7)	
MIDDLESEX	59	56	59		48	33	58		16	17	15		10.1	6.6	10.9	
MILFORD <sup>3</sup>	(2)	(50)	(76)		(18)	(9)	15		121	(60)	(40)		(166.5)	(24.3)	46.5	
STAMFORD	27	34	35		13	14	13		63	54	52		6.1	6.8	6.3	
WATERBURY <sup>3</sup>	45	32	12		17	(4)	(20)		26	38	13		5.0	(0.6)	(0.3)	
Individual Hospital Systems Average	31	14	15		18	24	73		55	64	84		(13.0)	0.5	7.7	
Individual Hospital Systems Median	36	26	25		16	16	20		37	29	18		3.5	3.2	5.0	
															0.0	
Statewide Total Average	44	41	40		25	20	29		34	37	36		1.7	3.6	5.9	
Statewide Total Median	39	34	34		21	18	22		30	36	21		4.6	4.4	6.2	

Notes:

## <sup>1</sup>All Hospital affiliations displayed as of 9/30/16.

<sup>2</sup>Negative unrestricted net assets balances are the cause of hospitals' equity financing ratios being negative. Some cash flow to total debt and long term debt to capitalization ratios were also adversely affected by hospitals that reported negative unrestricted net assets creating irregular results for several hospitals. In FY 2016, negative unrestricted net assets affected the equity financing ratio for *Day Kimball, Griffin, Johnson Memorial, Manchester Memorial, Milford* and *Windham Community Memorial Hospitals*.

<sup>3</sup>Large losses in total margin were the primary cause behind cash flow to total debt and debt service coverage ratios resulting in negative or no values for some hospitals. In FY 2016, large losses in total margin affected the cash flow to total debt and debt service coverage ratios of *Charlotte Hungerford, Johnson Memorial , Manchester Memorial, Rockville General , Sharon, Waterbury* and *Windham Community Memorial Hospitals*. In FY 2016, large gains in total margin as well as no principal payments or long term debt (*John Dempsey Hospital*) alternatively resulted in a value of zero for this ratio.

<sup>4</sup>Zero principal payments uniformally results in a Long-Term Debt to Capitalization ratio of 0. This happens when a hospital has no long term debt recorded on its FY 2016 Audited Financial Statements as in the case of *John Dempsey Hospital, St. Mary's Hospital* and *Sharon Hospital*. Negative Unrestricted Net Assets balances, if high enough, will result in a negative value for this ratio as in the case of *Johnson Memorial*, *Milford* and *Windham Community Memorial Hospitals* because of the diminishing of capital on a hospital's balance sheet.

## **Definitions:**

**Equity Financing Ratio:** the ratio related to capital structure that indicates the percentage of net assets to total assets. A higher ratio is preferred, since it indicates utilization of a higher proportion of equity and a lower proportion of debt financing in the acquisition of the hospital's resources. Formula: Net Assets / Total Assets

**Cash Flow to Total Debt Ratio:** an indicator of potential future debt repayment difficulty or insolvency. It is calculated by dividing excess of revenues over expenses plus depreciation by current liabilities plus long term debt. A decrease in the value of the ratio may indicate a future debt repayment problem. *Formula: (Excess Revenue Over Expense + Depreciation) / (Current Liability + Long Term Debt)* 

Long-Term Debt to Capitalization Ratio: the measure of the proportion of Long-Term Debt in a hospital's capital structure. A lower proportion or percentage is desirable because it allows for obtaining of more favorable terms. (i.e., lower interest rates) and the capacity to take on more debt if the need exists. Formula: Long Term Debt / (Long Term Debt + Net Assets)

**Debt Service Coverage Ratio:** this ratio measures the hospital's capacity to take on more debt. A higher ratio is more favorable because it improves a hospital's chances of meeting its current bond covenants and obligations and also improves its chances to be issued additional debt for future capital improvements. *Formula: (Excess Revenues over Expenses + Interest + Depreciation and Amortization) / (Debt Principal Payments + Interest Expense)*