	Hospitals, Hospital Systems, and Group Practices with 30 or more physicians Written Report due by December 31st annually						
Date	Deta of Filing						
	ate of Filing> ull Legal Name of Entity Reporting> Saint Francis Hospital						
	of Provider Reporting (see options below)>	Hospital	-				
	ital, Hospital System, Group Practice)	Tiospital	1				
(1)	(2)	(3)	(4)				
Line	Name of Group Practice being reported	Description of the nature of the relationship of the Hospital or Hospital System to the Group Practice	Is the Group Practice reported owned or affiliated by the Hospital or Hospital System?				
1	Saint Francis Behavioral Health Group (SFBHG)	Professional group practice	Owned by the Hospital				
2	Saint Francis Emergency Medical Group (SFEMG)	Hospital	Affiliated				
3	Saint Francis Medical Group (SFMG) Saint Francis Clinic Medical Group (SFCMG)	Professional group practice Hospital	Owned by the Hospital Affiliated				
5			Annialeu				
6							
7							
8							
9 10							
11							
12							
13							
14 15							
15							
17							
18							
19							
20 21							
22							
23							
24							
25 26							
27							
28							
29							
<u>30</u> 31							
31							
33							
34							
35 36							
30							
38							
39							
40							
41 42							
42							
44							
45							
46 47							
47							
49							
50							

	-			
Date	of Filing>			
Full L	egal Name of Entity Reporting	Saint Francis Hospital		
Туре	of Provider Reporting (see options below)	> Hospital		
	(Hospital, Hospital System, Group Practice)			
<i>If more</i> 1 2 3 4 5	e than one Group Practice is being reported, please follow the in Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" Click inside the "create a copy" box Click "OK"	structions below to add additional tabs.		
	Name of Group Practice>	Saint Francis Behavioral Health Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
1 2	Chu,Anita Cohen, Eric	Psychiatry Development		
3	Correa, Paulo	Psychiatry Psychiatry		
4	Dove, Laura	Psychiatry		
5	Enciso-Chaves, Carlos	Psychiatry		
6	Frenkel, Yana	Psychiatry		
7	Gill, Neelu	Psychiatry		
8	Gonzalez, Alberto	Psychiatry		
9 10	Gonzalez, Luis Roberto Gonzalez Restrepo, Alejandro	Psychiatry Psychiatry		
11	Gottlieb, Jeffrey	Psychiatry		
12	Greenberg, Jonathan	Psychiatry		
13	Hamdheydari, Ladan	Psychiatry		
14	Jacob, Daisy	Psychiatry		
	Jacobs, Nina	Psychiatry		
	Jermin, Ernest Langenauer, Bernard	Psychiatry Psychiatry		
	Malik, Nayyara	Psychiatry		
	Motamed, Mehran	Psychiatry		
	Munawar, Muhammad	Psychiatry		
	Raza, Mahreen	Psychiatry		
	Rothschild,Bruce	Psychiatry		
	Shamsi, Mohammad Ali	Psychiatry		
	Sosa,Juan	Psychiatry Psychiatry		
25 26	Taylor, Laine Yelunina,Larisa	Psychiatry		
27	Yotova, Malina	Psychiatry		
28				
29				
30				
31				
32 33				
33				
35				
36				
37				
38				
39				
40				
41 42				
42				
43				

	-			
Date o	f Filing>			
Full Le	egal Name of Entity Reporting>	Saint Francis Hospital		
Туре с	of Provider Reporting (see options below)>	Hospital		
	(Hospital, Hospital System, Group Practice)			
<i>If more</i> 1 2 3 4	than one Group Practice is being reported, please follow the instruct Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" Click inside the "create a copy" box Click "OK"	ctions below to add additional tabs.		
	Name of Group Practice>	Saint Francis Behavioral Health Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
45				
46 47				
47				
49				
50				
51				
52				
53				
54 55				
56				
57				
58				
59				
60 61				
62				
63				
64				
65				
66				
67				
68 69				
69 70				
71				
72				
73				
74				
75				

	/ -			
	of Filing>			
Full Legal Name of Entity Reporting>		Saint Francis Hospital		
Туре	of Provider Reporting (see options below)>	Hospital		
	(Hospital, Hospital System, Group Practice)			
 If more than one Group Practice is being reported, please follow the instructions below to add additional tabs. 1 Right click on the the "PhysicianName" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "Business Entity" 4 Click inside the "create a copy" box 5 Click "OK" 				
	Name of Group Practice>	Saint Francis Emergency Medical Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
Line				
		When user clicks into a cell below, a dropdown box appears allowing the user to enter		
		multiple services. Users must select one service at a time when entering services.		
1	Wolf, Steven	Emergency medicine		
2	Turbiak, Thomas	Emergency medicine		
	Brunell, Thomas	Emergency medicine		
	McAdoo, Douglass	Emergency medicine		
	Sanders, William	Emergency medicine		
	Moorman, Jeffrey	Emergency medicine		
7	Abbatiello, Carol	Emergency medicine		
8	Claybourne, Johvonne	Emergency medicine		
9	Mathews, Joby	Emergency medicine		
10	Lakshmipathy, Jitendranath	Emergency medicine		
11	LaPolla, Gary	Emergency medicine		
	Carolan, Beverely	Emergency medicine		
	Cinti, Paula	Emergency medicine		
	Schiller, Elizabeth	Emergency medicine		
	Pettini, John	Emergency medicine		
	Dansky, Perry	Emergency medicine		
	Ibrahim, Danyal	Emergency medicine		
	Fojtik, John Bankwalla, Arnaz	Emergency medicine		
-	Gutman, Michael	Emergency medicine		
	Markuszka, Karl	Emergency medicine		
	Ryan, Emily	Emergency medicine		
	Smith, Jilliam	Emergency medicine		
-	Parekh, Sachin	Emergency medicine		
	Brody, Richard	Emergency medicine		
	Dugan, Jennifer	Emergency medicine		
	Gelin, Joan	Emergency medicine		
	Martin, Jennifer	Emergency medicine		
	Apollon, Rebecca	Emergency medicine		
	Gilmore, Thomas	Emergency medicine		
	Quinby, Peter	Emergency medicine		
	Bernard, Hannah	Emergency medicine		
	Grant, Robert	Emergency medicine		
	Leavens, John	Emergency medicine		
	Neulander, Matthew	Emergency medicine		
	Ward, Che Damon	Emergency medicine		
	Fialkovich, John	Emergency medicine		
	Lee, Kie Zueker, Amada	Emergency medicine		
39 40	Zucker, Amada	Emergency medicine		
40				
41				
42				
43		1		

Date of	of Filing>	
Full L	egal Name of Entity Reporting>	Saint Francis Hospital
	of Provider Reporting (see options below)>	Hospital
	(Hospital, Hospital System, Group Practice)	
1 2 3 4	e than one Group Practice is being reported, please follow the instruct Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" Click inside the "create a copy" box Click "OK"	ctions below to add additional tabs.
	Name of Group Practice>	Saint Francis Emergency Medical Group
(1)	(2)	(3)
Line	Physician Name (Last, First)	Physician Specialty(s)
		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
45		
46		
47		
48		
49 50		
51		
52		
53		
54		
55		
56		
57		
58		
59 60		
61		
62		
63		
64		
65		
66		
67		
68		
69		
70		
71 72		
72		
74		
75		

	of Filing>			
Full L	egal Name of Entity Reporting>	Saint Francis Hospital		
Туре	of Provider Reporting (see options below)>	Hospital		
	(Hospital, Hospital System, Group Practice)			
If more	e than one Group Practice is being reported, please follow the instr	uctions below to add additional tabs.		
1	Right click on the the "PhysicianName" tab below			
	Click the "Move or Copy" option			
	Under the heading "Before Sheet:," click on "Business Entity"			
	Click inside the "create a copy" box			
5	Click "OK"			
	Name of Group Practice>	Saint Francis Medical Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter		
		multiple services. Users must select one service at a time when entering services.		
1	Sabeena, Arora	Cardiology		
2	Bernard, Clark	Cardiology		
3	Daniel, Diver	Cardiology		
4	Anita, Kelsey	Cardiology		
5	Richard , Soucier	Cardiology		
6	Michael, Therrien	Cardiology		
7	Donald, Soucier	Cardiology		
8	Jason, Cornelio	Cardiology		
	Katrina, Monahan	Cardiology		
	Candice, Rountree	Cardiology		
	Payal, Amin	Cardiology		
	Kaylee, Bodnar	Cardiology		
	Kaitlyn, Flynn	Cardiology		
	Audrey, Bakanauskas	Cardiology		
	Toni, Brienza	Cardiology		
	Richard, Buckberg	Cardiology		
	Johanna, Cahill Richard, Garibaldi	Cardiology		
	Michelle, Glidden	Cardiology Cardiology		
	Melissa, LaBrosse	Cardiology		
	Ashley, LaChappelle	Cardiology		
	Lynn, Larochelle	Cardiology		
	Natalie, LeBlanc	Cardiology		
	Richard, Marcus	Cardiology		
	Shannon, Marsh	Cardiology		
	Eliza, Martel	Cardiology		
27	Andrea, Meyer	Cardiology		
28	Daniel, Miller	Cardiology		
29	Karlyn, Mott	Cardiology		
30	Jason, Nall	Cardiology		
	Sarah, Nguyen	Cardiology		
	Sierra, Pacholski	Cardiology		
	Gary, Pastizzo	Cardiology		
	Debra, Sceppa	Cardiology		
	Gabriella, Smith	Cardiology		
	Chizoro, Taylor	Cardiology		
	Allison, Taylor	Cardiology		
	Bianca, Thibault	Cardiology		
	Julie, Tonioni	Cardiology		
	Allison, Valley	Cardiology		
	Erin, Vincent	Cardiology		
	Michelle, Zywica	Cardiology		
	Christopher, DelGross	Cardiology		
44	Uttam, Banik	Cardiology		

Date	of Filing>			
Full Legal Name of Entity Reporting		Saint Francis Hospital		
		Hospital		
Type	(Hospital, Hospital System, Group Practice)	- Hospital		
	(Hospital, Hospital System, Group Practice)			
<i>If more</i> 1 2 3 4 5	e than one Group Practice is being reported, please follow the instru- Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" Click inside the "create a copy" box Click "OK"	uctions below to add additional tabs.		
	Name of Group Practice>	Saint Francis Medical Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
Line		Filysician Specially(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
45	Lois, Alimonti	Cardiology		
46	Sandeep, Gupta	Cardiotogy		
47	Gregory , Marakovits	Cardiovascular Surgery		
48	Deborah , Aziz-Chmielorz	Cardiovascular Surgery		
49	Jordin , Marousis	Cardiovascular Surgery		
50	Marc , Benjamin	Cardiovascular Surgery		
51	Stephanie , Maguire	Cardiovascular Surgery		
52	Frank , Biello	Cardiovascular Surgery		
53	Patrick , Cosgrove	Cardiovascular Surgery		
54	Ashley , French	Cardiovascular Surgery		
55	Michael, Lillpopp	Cardiovascular Surgery		
56	Kevin , Martin	Cardiovascular Surgery		
57	John , Pike	Cardiovascular Surgery		
58	Lisa , Rinaldi	Cardiovascular Surgery		
59	Kelly , Rousseauci	Cardiovascular Surgery		
60	James , Roy	Cardiovascular Surgery		
61	Joanne , Tischer	Cardiovascular Surgery		
62	Ellen , Duell	Critical Care Medicine		
63	Ritika , Chandra	Dentistry		
64	Edward , Kelly	Dentistry		
65	Joseph , Krajc	Dentistry		
66	Paul , Mitchell	Dentistry		
67	William , Rieger	Dentistry		
68	Mark , Schmidt	Dentistry		
69	David , Spinelli	Dentistry		
70	Sally, Cote	Dermatology		
71	Elaine , Gayeski	Dermatology		
72	Kara, Cashman	Dietician		
73	Racha , Dermesropian	Endocrinology Diabetes and Metabolism		
74	Latha , Dulipsingh	Endocrinology Diabetes and Metabolism		
75	Kamal , Shoukri	Endocrinology Diabetes and Metabolism		

		,, ,, ,		
Date	of Filing>			
	egal Name of Entity Reporting>	Saint Francis Hospital		
	of Provider Reporting (see options below)>	Hospital		
	(Hospital, Hospital System, Group Practice)	·		
	e than one Group Practice is being reported, please follow the instru	ictions below to add additional tabs.		
1 2	Right click on the the "PhysicianName" tab below Click the "Move or Copy" option			
3	Under the heading "Before Sheet:," click on "Business Entity"			
	Click inside the "create a copy" box			
5	Click "OK"			
	Name of Group Practice>	Saint Francis Clinic Medical Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter		
1	Frank , Bauer	multiple services. Users must select one service at a time when entering services. Pathology		
	Christopher , Chapman	Pathology		
	Matthew , Curran	Pathology		
4	Anna , Jovanovic	Pathology		
	Pamela , Kowalczyk	Pathology		
	Thalia , Mesologites	Pathology		
	Aileen , Ong-Bacay	Pathology Data la su		
8 9	Edyta , Rotundo John , Scholes	Pathology Pathology		
10	Jihong , Tang	Pathology		
11		i anology		
12				
13				
14				
15 16				
17				
18				
19				
20				
21				
22 23				
23				
25				
26				
27				
28				
29 30				
30				
32				
33				
34				
35				
36 37				
37				
39				
40				
41				
42				
43				
44				

Date of	of Filing>			
	egal Name of Entity Reporting>	Saint Francis Hospital		
	of Provider Reporting (see options below)>	Hospital		
. , , , , , , , , , , , , , , , , , , ,	(Hospital, Hospital System, Group Practice)			
	(hospital, hospital dystern, droup hadded)			
1 2 3 4	e than one Group Practice is being reported, please follow the instru Right click on the the "PhysicianName" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "Business Entity" Click inside the "create a copy" box Click "OK"	uctions below to add additional tabs.		
	Name of Group Practice>	Saint Francis Clinic Medical Group		
(1)	(2)	(3)		
Line	Physician Name (Last, First)	Physician Specialty(s)		
		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
45				
46				
47				
48 49				
49 50				
51				
52				
53				
54				
55				
56				
57				
58				
59 60				
61				
62				
63				
64				
65				
66				
67				
68				
69				
70				
71				
72				
73 74				
74				
	1			

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing ---Full Legal Name of Entity Reporting --Saint Francis Hospital Type of Provider Reporting (see options below) -Hospital (Hospital, Hospital System, Group Practice) f more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below 1 Click the "Move or Copy" option 2 Under the heading "Before Sheet:," click on "(move to end)" 3 Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (4) (5) (6) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Line Name and address of Group Practice Location Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 06001 06002 06019 06040 06051 06053 06082 06095 06105 114 Woodland Street, 7th Floor Saint Francis Behavioral Health Group Hartford, CT 06106 Hartford, CT 06105 06108 06109 06110 06112 06117 06118 06120 06146 Psychiatry

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing ---Full Legal Name of Entity Reporting ---Saint Francis Hospital Type of Provider Reporting (see options below) Hospital (Hospital, Hospital System, Group Practice) more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below 1 Click the "Move or Copy" option 2 Under the heading "Before Sheet:," click on "(move to end)" 3 Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (4) (6) (5) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Line Name and address of Group Practice Location Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 06001 06002 06033 06040 06042 06051 06066 06074 06082 06095 06105 Saint Francis Behavioral Health Group Hartford, CT 06106 06107 06108 06109 06110 06111 06112 06114 06117 06118 06119 675 Tower Avenue, Suite 301 06120 Hartford, CT 06112 Psychiatry 06105 06106 06107 06110 Saint Francis Behavioral Health Group 06112 Hartford, CT 06114 06117 06119 1000 Asylum Avenue 1st Floor (Suite 1026) 06120 Hartford, CT 06105 Psychiatry

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually						
Full Le Type o	of Filing egal Name of Entity Reporting of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis Hospital> Hospital			
1 2 3 4	2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)"					
(1)	(2)	(3)	(4)	(5)	(6)	
Line	Name and address of Group Practice	Location	Primary Service Area as defined in Section 1 of PA 14-168	(11) Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location	
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.	
4	Saint Francis Behavioral Health Group	Hartford, CT	06002 06105 06106 06108 06112 06114 06120	1075 Asylum Avenue Hartford, CT 06105	Psychiatry	
5	Saint Francis Behavioral Health Group	Simsbury, CT	06001 06002 06019 06026 06027 06035 06057 06060 06070 06081 06092 06790	30 Dorset Crossing, Suite 400 Simsbury, CT 06105	Psychiatry	
6	Saint Francis Behavioral Health Group	Enfield,CT	06016 06029 06066 06071 06076 06078 06082 06082 06095 06096	151 Hazard Avenue, Suite 4 Enfield, CT 06082	Psychiatry	

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing ---Full Legal Name of Entity Reporting ---Saint Francis Hospital Type of Provider Reporting (see options below) Hospital (Hospital, Hospital System, Group Practice) f more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below 1 Click the "Move or Copy" option 2 Under the heading "Before Sheet:," click on "(move to end)" 3 Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (4) (6) (5) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Line Name and address of Group Practice Location Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 06010 06033 06040 06042 06043 06066 06067 06073 06074 06108 06109 Saint Francis Behavioral Health Group Stafford Springs, CT 06111 06117 06118 06238 06248 06415 06416 06424 06447 06457 227 Sycamore Commons, Suite 200 06480 Stafford Springs, CT 06076 Psychiatry 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23

Date of Fining Ampoints (as options below)			Ho	ospitals, Hospital Systems and Group Practi Written Report due by Decembe	ces with 30 or more physicians r 31st annually	
Safe Prime Service Serv	Date o	of Filing				
Type of Provider Reporting lessent into the books provider lessent balance from the tree from Protection balance into the tree tree from Protection balance into the tree tree tree tree tree tree tree			>	Saint Francis Hospital	-	
Kapital Kapital Sensitive Conversion Kapital	Type	of Provider Reporting (see options below)	~		4	
Implementation Implementation Implementation Implementa	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Hospital, Hospital System, Group Practice)	-	roopiai	<u> </u>	
Name and address of each basic space of the space of t	1 2 3 4 5	Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box	structions below to add additional tabs.			
Name and advess of each Business of each Business of each Business of each Business advess adve	(1)	(2)	(3)	(4)	(5)	(6)
International Image: Image: Ima				Primary Service Area as defined in Section 1(11	Name and address of each Business Entity that	
Image: series of the series	Line	Name and address of Group Practice	Location			Description of services at this location
25Index<Index<Index<Index<IndexIndex<IndexIndexIndexIndexIndexIndexIndexIndexIndex<IndexIndex<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<I						
261111127111111281111112911111120111111211111112211111123111111241111112511111126111111271111112811111129111111201111112011111129111111201111112011111120111111201111112111111121111111211111112111111122111 <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td></td<>						
77IndentionIndentionIndentionIndention78IndentionIndentionIndentionIndention79IndentionIndentionIndentionIndention70IndentionIndentionIndentionIndention71IndentionIndentionIndentionIndention73IndentionIndentionIndentionIndention74IndentionIndentionIndentionIndention75IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76IndentionIndentionIndentionIndention76 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
28Index<IndexIndex<IndexIndex<Index<Index<Index<Index<Index<Index<IndexIndex<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index						
P9Index<IndexIndex<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Index<Ind						
9091 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
11Image: style st						
1214 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
33Image: section of the se						
34Image: section of the se						
35Image: section of the se						
36Image: section of the se						
37Image: section of the se						
38Image: section of the se						
39Image: section of the se						
4041 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
41111142111114311111441111114511111146111111471111114811111149111111						
4211114311111441111114511111146111111471111114811111149111111						
43434444454647 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
44444647 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>						
45 46 47 48 47 48 47 48 47 48 48 49 49 47<						
46						
47						
48						
49						

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing ---Full Legal Name of Entity Reporting --Saint Francis Hospital - ` Type of Provider Reporting (see options below) Hospital (Hospital, Hospital System, Group Practice) f more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below 1 Click the "Move or Copy" option 2 Under the heading "Before Sheet:," click on "(move to end)" 3 Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (4) (6) (5) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Line Name and address of Group Practice Location Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. Harford/06112, Hartford/06105, Hartford/06106. Hartford/06120. Bloomfield/06002, Windsor/06095, East Hartford/06108, Hartford/06114, St Francis Emergency Medical Group East Hartford/06118, 114 Woodland Street, Hartford, CT Hartford, CT 06082/Enfiled, Manchester/06040, West Hartford/06117, West Hartford/06119, Windsor Locks/06096, Wethersfield/06109, South Windsor/07074, Newington/06110 Emergency medicine 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually						
Full Le Type o	of Filing egal Name of Entity Reporting of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis Hospital > Hospital				
1 2 3 4	than one Group Practice is being reported, please follow the in Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK"	nstructions below to add additional tabs.					
(1)	(2)	(3)	(4) Primary Service Area as defined in Section 1(11)	(5) Name and address of each Business Entity that	(6)		
Line	Name and address of Group Practice	Location	of PA 14-168	provides services as part of the Group Practice	Description of services at this location		
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
23							
24							
25 26							
26							
28							
29							
30							
31							
32							
33							
34							
35							
36							
37							
38 39							
39 40							
40							
42							
43							
44		1					
45		İ		1			
46							
47							
48							
49							
50							

		Hospitals, Hospital Systems and Group Written Report due by D	Practices with 30 or more physicians ecember 31st annually	
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis Hospital> Hospital		
If more than one Group Practice is being reported, please follow the inst 1 Right click on the the "BusinessEntity" tab below 2 Click in "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	ructions below to add additional tabs.			
(1) (2)	(3)	(4)	(5)	(6)
			(11) of PA 14 Name and address of each Business Entity that	
Line Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06095 06082 06102 06111 06106 06118 06107 06105 06112 06117 06108 06074 06001 06067 06114 06067 06114 06070 06114 06070 06096 06040 06033 06078 06110 06035 06066 06071 06032 06010	114 Woodland Street, Hartford, CT 06105	Cardiovascular disease (cardiology), Endocrinology, Family practice, Geriatric medicine, Gynecological oncology, Hematology/oncology, Internal medicine, Infectious disease, Registered Diettian / Nutrition Professional, Neurology, Neurosurgery, Obstetrics/gynecology, Orthopedic surgery, Pediatric medicine, Pulmonary disease, Critical care medicine (intensivists)

		Hospitals, Hospital Systems and Group I Written Report due by Dec	Practices with 30 or more physicians cember 31st annually	
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis Hospital > Hospital		
If more than one Group Practice is being reported, please follow the inst 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	ructions below to add additional tabs.			
(1) (2)	(3)	(4)	(5)	(6)
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(168	11) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
	Location		provides services as part of the oroup r factice	When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06112 06105 06106 06095 06002 06082 06010 06118 06040 06120 06066 06114 06108 06109 06107 06107 06111 06074 06119 06037 06051 06037 06051 06033 06042 06001 06029 06110 06120 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06110 06029 06051 06037 06051 06037 06051 06051 06037 06051 06051 06037 06051 06051 06037 06051 06078 06051 06079 06110 06079 06110 06179 06110 06079 06110 06079 06110 06179 06110 06179 06110 06179 06110 06179 06110 06179 06110 06117 06117 06117 06117 06117 06119 06790 07700 07700 07700 07700 07700 07700 07700 07	1000 Asylum Avenue Suite 4301, Hartford CT 06105	Plastic and reconstructive surgery, Orthopedic surgery

		Hospitals, Hospital Systems and Group Practic Written Report due by December	ces with 30 or more physicians r 31st annually	
Date of Filing Full Legal Name of Entity Reporting	nstructions below to add additional tabs.	Saint Francis Hospital Hospital		
(1) (2)	(3)	(4)	(5)	(6)
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(11) of F 168	PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06117 06107 06001 06105 06106 06119 06112 06002 06032 06110 06110 06109 06114 06019 06118 06111 06095 06086 06070 06074 06082 06108	1000 Asylum Avenue Suite 2112 Hartford CT 06105	Geriatric medicine, Infectious disease, Internal medicine

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually					
Full Le Type o <i>If more</i> 1 2 3 4	of Filing egal Name of Entity Reporting of Provider Reporting (see options below) of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice) than one Group Practice is being reported, please follow the instruction Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK"	tructions below to add additional tabs.	Saint Francis Hospital Hospital			
(1)	(2)	(3)	(4)	(5)	(6)	
	Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(11) of PA 14 168		Description of services at this location	
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.	
4	Saint Francis Medical Group	Hartford, CT	06112 06106 06105 06095 06002 06120 0618 06118 06040 06119 06042 06066 06114 06082 06100 06107 06457 06076 06111 06117 0633	1000 Asylum Avenue Suite 2118 Hartford CT 06105	Obstectrics and Gynecology	

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually				
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	Saint Francis Hospital Hospital		
If more than one Group Practice is being reported, please follow the in 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	istructions deiow to add additional tabs.			
(1) (2)	(3)		(5)	(6)
Line Name and address of Group Practice	Location	168	PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06106 06082 06108 06114 06112 06118 06105 06120 06076 06095 06040 06002 06066 06051 06071 06053 06042 06042 06010 06029 06226 06110	1000 Asylum Avenue Suite 2102 Hartford CT 06105	General surgery

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually					
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		-> Saint Francis Hospital -> Hospital			
If more than one Group Practice is being reported, please follow the in 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet.," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	structions below to add additional tabs.				
(1) (2)	(3)	(4)	(5)	(6)	
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(1 168	11) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location	
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.	
Saint Francis Medical Group	Hartford, CT	06082 06066 06095 06040 06042 06118 06002 06112 06105 06108 06074 06033 06109 06096 06106 06119 06790 06114 06117 06670 0617 06107 06107 06107 06107 06107 06107 06107 06107 06107 06107 06107 06107 06107 06111 06070 06457 06111 06073 06053.	1000 Asylum Avenue Suite 2110 Hartford CT 06105	Gynecological oncology, Surgical oncology	

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually					
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see option (Hospital, Hospital System, Grout If more than one Group Practice is being regiment 1 Right click on the the "BusinessEntitit 2 Click the "Move or Copy" option	ons below) p Practice) ported, please follow the in	structions below to add additional tabs.	Saint Francis Hospital Hospital		
 3 Under the heading "Before Sheet.," 4 Click inside the "create a copy" box 5 Click "OK" 					
(1) (2)		(3)	(4) Primary Service Area as defined in Section 1(11) of P.	(5) A 14-Name and address of each Business Entity that	(6)
Line Name and address of Group P	ractice	Location	168	provides services as part of the Group Practice	Description of services at this location
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Media	cal Group	Hartford, CT	06106 06112 06118 06002 06108 06095 06120 06105 06114 06082 06040 06109 06074 06066 06096 06096 06096 06092 06110 06111 06117 06067	1000 Asylum Avenue Suite 2115, Hartford CT 06105	Rheumatology

		Hospitals, Hospital Systems and Group Written Report due by D	D Practices with 30 or more physicians December 31st annually	
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		-> Saint Francis Hospital -> Hospital		
If more than one Group Practice is being reported, please follow the in 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet.," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	nstructions below to add additional tabs.			
(1) (2)	(3)	(4)	(5)	(6)
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1 168	1(11) of PA 14-Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06100 06112 06105 06118 06108 06082 06010 06040 06074 06109 06120 06111 06119 06120 06110 06095 06067 06007 06001 06114 06053 06066 06033 06032 06042 06790 06107 06117 06117 06117 06117 06096 06035 06078	1000 Asylum Avenue Suite 2120 Hartford CT 06105	Vascular surgery

		Hospitals, Hospital Systems and Group Written Report due by D	Practices with 30 or more physicians recember 31st annually	
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		Saint Francis Hospital Hospital		
If more than one Group Practice is being reported, please follow the instant of the "BusinessEntity" tab below 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	instructions below to add additional tabs.			
(1) (2)	(3)	(4)	(5)	(6)
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1 168	I(11) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	00093 06106 06112 06114 06105 06002 06118 06108 06082 06117 06096 06070 06120 06070 06120 06011 06111 06033 06109 06040 06107 06199 06040 0617 0619 06067 06078 06110 06078 06110 06078 06110 06076 06076 06076 06238	1000 Asylum Avenue Suite 3207 Hartford CT 06105	General surgery

		Hospitals, Hospital Systems a Written Rep	and Group Practices with 30 or more physicians ort due by December 31st annually	
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis H > Hospita		
If more than one Group Practice is being reported, please follow the ins 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	structions below to add additional tabs.			
(1) (2)	(3)	(4)	(5)	(6)
Line Name and address of Group Practice	Location	Primary Service Area as defined 168	in Section 1(11) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06082 06106 06010 06114 06066 06108 06040 06105 06120 06112 06118 06002 06112 06095	1000 Asylum Avenue Suite 3215 Hartford CT 06105	Neurology, Neurosurgery
Saint Francis Medical Group	Hartford, CT	06112 06105 06106 06118 06095 06114 06040 06082 06002 06108 06120 06010 06111 06117 06074 06074 06070 06110 06001 06029	1000 Asylum Avenue Suite 4302 Hartford CT 06105	

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually				
tructions below to add additional tabs.	> Saint Francis Hospit > Hospital	al		
(3)	(4)	(5)	(6)	
Leastion			Description of services at this location	
Hartford, CT	06112 06105 06106 06002 06118 06108 06095 06082 06114 06120 06040 06040 06066 06042 0619 06111 06117 06117 06110 06033 06070 06076 06119 06051 06074		When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.	
	06107	1000 Asylum Avenue Suite 4320 Hartford CT 06105	Orthopedic surgery, General surgery	
	(3) Location	(3) (4) ructions below to add additional tabs. Image: Construction of the second of the sec	Written Report due by December 31st annually Saint Francis Hospital Saint Francis Hospital Hospital Hospital Saint Francis Hospital Hospital Colspan="2">Colspan="2" Colspan="2" Colspan="2" Colspan="2" <th col<="" td=""></th>	

		Hospitals, Hospital Systems and Group Pr Written Report due by Dece	actices with 30 or more physicians mber 31st annually	
Date of Filing Full Legal Name of Entity Reporting Type of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		Saint Francis Hospital Hospital		
If more than one Group Practice is being reported, please follow the in 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	structions below to add additional tabs.			
(1) (2)	(3)	(4)	(5)	(6)
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(11) 168) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location
	Location		provides services as part of the Group Practice	When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.
Saint Francis Medical Group	Hartford, CT	06002 06106 06105 06112 06095 06108 06040 06118 06082 06109 06074 06114 06107 06111 06033 06067 06066 06001 06600 06070 06119 06119 06110 06042 06120 06032 06032 06226 06019 06032	1000 Asylum Avenue Suite 4304 Hartford CT 06105	Neurology
Saint Francis Medical Group	Hartford, CT	06106 061012 06105 06120 06114 06108 06118 06002	1075 Asylum Avenue Hartford CT 06105	Obstetrics/gynecology

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually							
Date of Filing Full Legal Name of Entity Reporting Full Legal Name of Entity Reporting		Saint Francis Hospital Hospital					
5 Click "OK" (1) (2)	(3)	(4) Primary Service Area as defined in Section 1	(5) (11) of PA 14 Name and address of each Business Entity that	(6)			
Line Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.			
Saint Francis Medical Group	Enfield, CT	06082 06076 06071 06096 06078	140 Hazard Avenue Enfield CT 06082	Family practice, Geriatric medicine, Orthopedic surgery			
Saint Francis Medical Group	Enfield, CT	06082 06071 06076 06096 06016 06078	142 Hazard Avenue Enfiled CT 06082	Hematology/oncology			

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually									
Date of Filing	ull Legal Name of Entity Reporting								
If more than one Group Practice is being reported, please follow the in 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" 4 Click inside the "create a copy" box 5 Click "OK"	 <i>imore than one Group Practice is being reported, please follow the instructions below to add additional tabs.</i> Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box 								
(1) (2)	(3)	(4)	(5)	(6)					
Line Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(168	11) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location					
				When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.					
Saint Francis Medical Group	Hartford, CT	00093 06002 06082 06106 06112 06111 06105 06118 06109 06117 06108 06107 06074 06001 06074 06074 06001 06077 06033 06066 06120 06066 06120 06078 06042 06110 06029 06019	19 Woodland Street Hartford CT 06105	Urology					

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually								
Full Le Type of 1 2 3 4	3 Under the heading "Before Sheet:," click on "(move to end)"							
(1)	(2)	(3)	(4)	(5)	(6)			
Line	Name and address of Group Practice	Location	Primary Service Area as defined in Section 1(11) o 168	of PA 14-Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location			
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.			
18	Saint Francis Medical Group	West Hartford, CT	06106 06114 06118 0610 0619 06105 06108 06095 06109 06117 06001 06111 06112 06040 06051	345 North Main Street, West Hartford CT 06117	Family practice			

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually						
Full Le Type o	of Filing egal Name of Entity Reporting of Provider Reporting (see options below)		> Saint Francis Hospital > Hospital				
1 2 3 4	than one Group Practice is being reported, please follow the ins Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK"	tructions below to add additional tabs.					
(1)	(2)	(3)	(4)	(5)	(6)		
			Primary Service Area as defined in Section 1(11) of PA 14	Name and address of each Business Entity that			
Line	Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location		
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.		
19	Saint Francis Medical Group	Avon, CT	06070 06001 06105 06117 06002 06032 06082 06095 06106 06790 06112 06109 06112 06109 06111 06066 06107 06119 0618 06033 06040 06033 06040 06074 06019 06057 06057 06089 06118 06013	35 Nod Road, Avon, CT 06001	Podiatry		
20	Saint Francis Medical Group	Vernon, CT	06066 06084 06029 06040 06042 06074 06076 06238 06082 06108	428 Hartford Turnpike Vernon CT 06066	Obstetrics/gynecology		

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually							
Full Le Type o	of Filing egal Name of Entity Reporting of Provider Reporting (see options below)		-> Saint Francis Hospital -> Hospital					
1 2 3 4	than one Group Practice is being reported, please follow the ins Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK"	tructions below to add additional tabs.						
(1)	(2)	(3)	(4)	(5)	(6)			
			Primary Service Area as defined in Section 1(11) of PA 14		Description of commission of this location			
Line	Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.			
21	Saint Francis Medical Group	Hartford, CT	06112 06002 06106 06082 06095 06040 06105 06120 06108 06066 06118 06111 06070 06001 06074 06010 06114 06074 06010 06114 06035 06238 06107 06033 06457 06117 06109 06096 06096 06096 06096 06096 06096 06097 06119 06096 06095 06120 06120 06095 06238 0617 06117 06117 06119 06095 06095 06095 06120 06095 06095 06120 06095 06096 06097 06097 06097 06099 06096 06097 06099 06096 06097 06099 06096 06097 06099 06096 06097 06099 06095 06097 06099 06095 060	490/500 BlueHills Avenue Hartford CT 06112	Physical medicine and rehabilitation, Neurology, Family practice, Critical care medicine (intensivists) Internal medicine, General surgery			
21	Saint Francis Medical Group	Sharon, CT	06022 06069 12546 12522 06108 06039 12501 06068 12592 06031 12567	50 Hospital Hill Road Sharon CT 06067	Cardiovascular disease (cardiology)			

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually					
Full Le Type c	f Filing gal Name of Entity Reporting f Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis Hospital > Hospital			
1 2 3 4	than one Group Practice is being reported, please follow the ins Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK"	structions below to add additional tabs.				
(1)	(2)	(3)	(4)	(5)	(6)	
. /			Primary Service Area as defined in Section	1(11) of PA 14 Name and address of each Business Entity that		
Line	Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location	
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.	
23	Saint Francis Medical Group	Torrington, CT	06790 06098 06057 06759	540 Litchfield Street, Torrington CT 06790	Internal medicine	
24	Saint Francis Medical Group	Rocky Hill, CT	06067 06109 06457 06416 06095 06111 06118 06040 06033 06066 06114 06108 06105 06002 06112 06029 06074 06106 06037 06110 06037 06110 06084 06360 06441 06238 06082 06117 06231	546 Cromwell Avenue Rocky Hill 06067	Obstetrics/gynecology	

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually								
Full Leg	Filing gal Name of Entity Reporting f Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)		> Saint Francis Hospital > Hospital					
1 2 (3 4 (3 Under the heading "Before Sheet:," click on "(move to end)"							
(1)	(2)	(3)	(4)	(5)	(6)			
Line	Name and address of Group Practice	Location	Primary Service Area as defined in Section 168	on 1(11) of PA 14 Name and address of each Business Entity that provides services as part of the Group Practice	Description of services at this location			
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.			
25	Saint Francis Medical Group	Bloomfield, CT	06082 06095 06040 06002 06074 06096 06042 06066 06109 06117 06118 06106 06026 06105 06016 06105 06016 06119 06033 06035 06035 06078 06107 06107 06107 06107 06107 06107 06107 06120 06071 06120 06071 06120 06071 06120 06071	580 Cottage Grove Road, Bloomfield CT 06002	Urology			

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually							
Full I Type	of Filing Legal Name of Entity Reporting of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)	> >	Saint Francis Hospital Hospital					
1 2 3 4	 nore than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box Click "OK" 							
(1)	(2)	(3)	(4)	(5)	(6)			
1.1.4	Name and address of Group Prosting	Leastien	Primary Service Area as defined in Section 1(11) of PA 1		Description of services at this location			
Line	Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.			
	Saint Francis Medical Group	Enfield, CT	06082 06096 06076 06078 06095 06071 06029 06066 06074 06016 06088 06040					
26	Saint Francis Medical Group	Bloomfield, CT	06084 06002 06095 06112 06117 06096 06074 06082 06120 06107 06114 06106 06107 06118 06070 06001 06033 06042 06105 06027 06109 06119	7 Elm Street Enfield CT 06082 701 Cottage Grove Road, Bloomfield CT 06002	Urology			
28 29								
30								
31								

	Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually									
Full Lo Type o	of Filing egal Name of Entity Reporting of Provider Reporting (see options below) (Hospital, Hospital System, Group Practice)	······	Saint Francis Hospital Hospital							
1 2 3 4 5	 more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below Click the "Move or Copy" option Under the heading "Before Sheet:," click on "(move to end)" 									
(1)	(2)	(3)	(4)	(5)	(6)					
	Nome and address of One on Deadles	I and an	Primary Service Area as defined in Section 1(11) of PA 14-	name and address of each Business Entity that provides services as part of the Group Practice	Description of convises at this location					
Line	Name and address of Group Practice	Location	168	provides services as part of the Group Practice	Description of services at this location					
					When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services.					
32										
33										
34										
35 36										
36										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48 49										
49 50										
50										

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing --Full Legal Name of Entity Reporting --Saint Francis Hospital Type of Provider Reporting (see options below) Hospital (Hospital, Hospital System, Group Practice) more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below 1 Click the "Move or Copy" option 2 Under the heading "Before Sheet:," click on "(move to end)" 3 Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (6) (4) (5) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Line Name and address of Group Practice Location Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 06002 06095 06105 Saint Francis Clinic Medical Group Bloomfield, CT 421 Cottage Grove Road, Bloomfield CT 06002 06106 06112 Emergency medicine 06029 06071 06076 Saint Francis Clinic Medical Group Ellington, CT 06078 06082 06096 137 West Road, Ellington CT 06029 Family practice, Cardiovascular disease (cardiology), Primary care 06033 06073 Saint Francis Clinic Medical Group 06108 Glastonbury, CT 06118 06480 Internal medicine 55 Oak Street, Glastonbury CT 06033 06040 06042 Saint Francis Clinic Medical Group Manchester, CT 06108 06118 318 West Middle Tpke, Manchester CT 06040 Emergency medicine 06001 06019 06032 Saint Francis Clinic Medical Group 06070 Simsbury, CT 06085 06089 06092 498 Bushy Hill Road, Simsbury, CT 06070 Emergency medicine Saint Francis Clinic Medical Group Stafford Springs, CT 06076 87 West Stafford Road Rt 190, Stafford Springs, CT 06076 Emergency medicine 6

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing ---Full Legal Name of Entity Reporting ---Saint Francis Hospital Type of Provider Reporting (see options below) Hospital (Hospital, Hospital System, Group Practice) f more than one Group Practice is being reported, please follow the instructions below to add additional tabs. Right click on the the "BusinessEntity" tab below 1 Click the "Move or Copy" option 2 Under the heading "Before Sheet:," click on "(move to end)" 3 Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (4) (6) (5) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Line Name and address of Group Practice Location Description of services at this location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 06002 06040 06067 06095 06105 06106 06108 Saint Francis Clinic Medical Group Hartford, CT 06109 06110 06112 06114 06118 06120 06143 550 Main Street, Hartford, CT 06103 Emergency medicine 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Hospitals, Hospital Systems and Group Practices with 30 or more physicians Written Report due by December 31st annually Date of Filing ---Full Legal Name of Entity Reporting ---Saint Francis Hospital - ` Type of Provider Reporting (see options below) Hospital (Hospital, Hospital System, Group Practice) f more than one Group Practice is being reported, please follow the instructions below to add additional tabs. 1 Right click on the the "BusinessEntity" tab below 2 Click the "Move or Copy" option 3 Under the heading "Before Sheet:," click on "(move to end)" Click inside the "create a copy" box 4 5 Click "OK" (1) (2) (3) (4) (5) (6) Primary Service Area as defined in Section 1(11) Name and address of each Business Entity that of PA 14-168 provides services as part of the Group Practice Description of services at this location Line Name and address of Group Practice Location When user clicks into a cell below, a dropdown box appears allowing the user to enter multiple services. Users must select one service at a time when entering services. 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50