

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

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
A. AFFILIATE NAME HARTFORD HEALTH CARE CORPORATION		
1	Affiliate Description	PARENT CORPORATION
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	One State Street, Suite 19
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06103 -
8	CEO Name	Lucille Janatka
9	CEO Title	President & CEO
10	CT Agent Name	Winship Service corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919
B. AFFILIATE NAME BRADLEY HEALTH SERVICES, INC.		
1	Affiliate Description	Mammography Services
2	Affiliate type of service	Women's Health Services
3	Tax Status	Not for Profit
4	Street Address	81 Meriden Avenue
5	Town	Southington
6	State	Connecticut
7	Zip Code	06489 -
8	CEO Name	Clarence Silvia
9	CEO Title	President/CEO
10	CT Agent Name	Clarence Silvia
11	CT Agent Company	Central CT Health Alliance
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
C. AFFILIATE NAME CENCONN SERVICES, INC.		
1	Affiliate Description	The corporation performs various functions that support the other affiliates. 100% owned by Central CT Health Alliance.
2	Affiliate type of service	Affiliate Support Services
3	Tax Status	For Profit
4	Street Address	100 Grand Street
5	Town	New Britain
6	State	Connecticut
7	Zip Code	06050 -
8	CEO Name	Lucille Janatka
9	CEO Title	President
10	CT Agent Name	Elizabeth Schlaff, Esq.
11	CT Agent Company	The Hospital of Central CT
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
D. AFFILIATE NAME		
	AFFILIATE NAME	CENTRAL CT HEALTH ALLIANCE
1	Affiliate Description	Organized for the purpose of benefiting, carrying out the purpose of, and upholding, promoting and furthering the welfare programs and activities of Hartford Health Care Corporation and other affiliates.
2	Affiliate type of service	Managed Services Org. (MSO)
3	Tax Status	Not for Profit
4	Street Address	100 Grand Street
5	Town	New Britain
6	State	Connecticut
7	Zip Code	06050 -
8	CEO Name	Clarence Silvia
9	CEO Title	President/CEO
10	CT Agent Name	Elizabeth Schlaff, Esq.
11	CT Agent Company	The Hospital of Central CT
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
E. AFFILIATE NAME		
	AFFILIATE NAME	CENTRAL CT SENIOR HEALTH SERVICES
1	Affiliate Description	Long Term Care
2	Affiliate type of service	Long Term Care
3	Tax Status	Not for Profit
4	Street Address	45 Meriden Avenue
5	Town	Ssouthington
6	State	Connecticut
7	Zip Code	06489 -
8	CEO Name	Lucille Janatka
9	CEO Title	President
10	CT Agent Name	Lucille Janatka
11	CT Agent Company	Central CT Health Alliance
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
F. AFFILIATE NAME		
	AFFILIATE NAME	CLINICAL LABORATORY PARTNERS, LLC
1	Affiliate Description	Lab
2	Affiliate type of service	Lab
3	Tax Status	For Profit
4	Street Address	129 Patricia Genova Drive
5	Town	Newington
6	State	Connecticut
7	Zip Code	06111 -
8	CEO Name	James Fantus
9	CEO Title	President & CEO
10	CT Agent Name	Winship Service Corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
G. AFFILIATE NAME		
COMMUNITY MENTAL HEALTH AFFILIATES		
1	Affiliate Description	Develop, provide and promote an effective system of service delivery for behavioral health through a network of integrated unified services located in one or more community facilities.
2	Affiliate type of service	Mental Health Facility
3	Tax Status	Not for Profit
4	Street Address	270 John Downey Drive
5	Town	New Britain
6	State	Connecticut
7	Zip Code	06051 -
8	CEO Name	Raymond Gorman
9	CEO Title	Executive Director
10	CT Agent Name	Guion, Stevens & Rybak, LLP
11	CT Agent Company	Guion, Stevens & Rybak, LLP
12	CT Agent Company Street Address	93 West Street
13	CT Agent Town	Litchfield
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06759 -
H. AFFILIATE NAME		
HARTFORD HEALTHCARE AT HOME, INC.		
1	Affiliate Description	PROVIDE, PLAN AND DEVELOP A CONTINUUM OF HOME CARE AND COMMUNITY HEALTH SERVICES.
2	Affiliate type of service	Home Health/VNAs
3	Tax Status	Not for Profit
4	Street Address	103 Woodland Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06105 -
8	CEO Name	Michael Soccio
9	CEO Title	President
10	CT Agent Name	Winship Services Corporation
11	CT Agent Company	Winship Services Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919
I. AFFILIATE NAME		
HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		
1	Affiliate Description	REHABILITATION SERVICES
2	Affiliate type of service	Rehabilitation Services
3	Tax Status	For Profit
4	Street Address	181 PATRICIA GENOVA DRIVE
5	Town	Newington
6	State	Connecticut
7	Zip Code	06111 -
8	CEO Name	Rita Parisi
9	CEO Title	Pres & CEO
10	CT Agent Name	Winship Service Corp.
11	CT Agent Company	Winship Service Corp.
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
J.	AFFILIATE NAME	HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHTON CARE CENTER
1	Affiliate Description	Long Term Care
2	Affiliate type of service	Long Term Care
3	Tax Status	Not for Profit
4	Street Address	45 Meriden Avenue
5	Town	Southington
6	State	Connecticut
7	Zip Code	06489 -
8	CEO Name	William Kowalewski
9	CEO Title	Executive Director
10	CT Agent Name	Lucille Janatka
11	CT Agent Company	Central CT Health Alliance
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
K.	AFFILIATE NAME	HARTFORD HOSPITAL
1	Affiliate Description	HOSPITAL
2	Affiliate type of service	Hospital
3	Tax Status	Not for Profit
4	Street Address	80 SEYMOUR ST
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06103 -
8	CEO Name	Jeffrey Flaks
9	CEO Title	President and CEO
10	CT Agent Name	Winship Service Corp.
11	CT Agent Company	Winship Service Corp.
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 -
L.	AFFILIATE NAME	HHC INDEMNITY SERVICES, LTD
1	Affiliate Description	Reinsurance
2	Affiliate type of service	Insurance
3	Tax Status	For Profit
4	Street Address	F.B. Perry Building, 40 Church Street
5	Town	Hamilton
6	State	Bermuda
7	Zip Code	-
8	CEO Name	Elliot Joseph
9	CEO Title	President & CEO
10	CT Agent Name	Winship Service Corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
M.	AFFILIATE NAME	HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP
1	Affiliate Description	Practice medicine and provide healthcare services to the public as a medical foundation
2	Affiliate type of service	Foundation
3	Tax Status	Not for Profit
4	Street Address	1290 Silas Deane Highway
5	Town	Wethersfield
6	State	Connecticut
7	Zip Code	06109 -
8	CEO Name	James Watkins Jr
9	CEO Title	President
10	CT Agent Name	Winship Service Corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919
N.	AFFILIATE NAME	JEFFERSON HOUSE
1	Affiliate Description	Care for the aged
2	Affiliate type of service	Care for the Aged
3	Tax Status	Not for Profit
4	Street Address	80 Seymour Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06103 - 1919
8	CEO Name	Stuart Markowitz, MD
9	CEO Title	President & CEO
10	CT Agent Name	Winship Service Corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919
O.	AFFILIATE NAME	MIDSTATE MEDICAL CENTER
1	Affiliate Description	HOSPITAL
2	Affiliate type of service	Hospital
3	Tax Status	Not for Profit
4	Street Address	435 Lewis Ave
5	Town	Meriden
6	State	Connecticut
7	Zip Code	06451 -
8	CEO Name	Lucille Janatka
9	CEO Title	President and CEO
10	CT Agent Name	Winship Service Corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
P. AFFILIATE NAME MRI OF FARMINGTON AVENUE LLC		
1	Affiliate Description	Magnetic Resonance Imaging
2	Affiliate type of service	Imaging Services
3	Tax Status	For Profit
4	Street Address	15 Quail Ridge Road
5	Town	Farmington
6	State	Connecticut
7	Zip Code	06032 -
8	CEO Name	Lucille Janatka
9	CEO Title	Partner
10	CT Agent Name	Mark Krober, Ecq.
11	CT Agent Company	Murtha, Cullina, Richter & Pinney LLP
12	CT Agent Company Street Address	15 Quail Ridge Road
13	CT Agent Town	Farmington
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06032 -
Q. AFFILIATE NAME MULBERRY GARDENS OF SOUTHTON, LLC		
1	Affiliate Description	Long Term Care
2	Affiliate type of service	Long Term Care
3	Tax Status	Not for Profit
4	Street Address	58 Mulberry Street
5	Town	Southington
6	State	Connecticut
7	Zip Code	06489 -
8	CEO Name	Perry Phillips
9	CEO Title	Executive Director
10	CT Agent Name	Lucille Janatka
11	CT Agent Company	The Hospital of Central CT
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
R. AFFILIATE NAME NATCHAUG HOSPITAL		
1	Affiliate Description	Mental Health Facility
2	Affiliate type of service	Mental Health Facility
3	Tax Status	Not for Profit
4	Street Address	189 Storrs Road
5	Town	Mansfield Center
6	State	Connecticut
7	Zip Code	06250 -
8	CEO Name	Stephen Larcen, Ph.D.
9	CEO Title	President & CEO
10	CT Agent Name	Winship Service Corporation
11	CT Agent Company	Winship Service Corporation
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
S.	AFFILIATE NAME	NEW BRITAIN MRI LIMITED PARTNERSHIP
1	Affiliate Description	MRI Testing
2	Affiliate type of service	Imaging Services
3	Tax Status	Not for Profit
4	Street Address	100 Grand Street
5	Town	New Britain
6	State	Connecticut
7	Zip Code	06050 -
8	CEO Name	Lucille Janatka
9	CEO Title	General Partner
10	CT Agent Name	Elliot B. Pollack, Esq.
11	CT Agent Company	Hoberman & Pollack
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -
T.	AFFILIATE NAME	PRACTICE CENTRAL, LLC
1	Affiliate Description	Facilitate the adoption of electronic health systems by physician practices in CT for effective data sharing and clinical integrations resulting in better coordinated care
2	Affiliate type of service	For Profit Services (Specify)
3	Tax Status	For Profit
4	Street Address	85 Seymour Street
5	Town	Hartford
6	State	Connecticut
7	Zip Code	06102 -
8	CEO Name	Kent Stahl, M
9	CEO Title	Managing Director
10	CT Agent Name	Winship Services Corp
11	CT Agent Company	Winship Services Corp
12	CT Agent Company Street Address	One Constitution Plaza
13	CT Agent Town	Hartford
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06103 - 1919
U.	AFFILIATE NAME	RUSHFORD CENTER, INC.
1	Affiliate Description	Mental Health Facility
2	Affiliate type of service	Mental Health Facility
3	Tax Status	Not for Profit
4	Street Address	1250 Silver Street
5	Town	Middletown
6	State	Connecticut
7	Zip Code	06457 -
8	CEO Name	Stephen Larcen, PhD.
9	CEO Title	President & CEO
10	CT Agent Name	Richard W. Tomc & Associates
11	CT Agent Company	Richard W. Tomc, Esquire
12	CT Agent Company Street Address	49 Main Street
13	CT Agent Town	Middletown
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06457 -

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(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
V.	AFFILIATE NAME	THE ORCHARDS AT SOUTHINGTON
1	Affiliate Description	To initiate, develop, operate and maintain senior housing with assisted living services
2	Affiliate type of service	Care for the Aged
3	Tax Status	Not for Profit
4	Street Address	34 Hobart Street
5	Town	Southington
6	State	Connecticut
7	Zip Code	06489 -
8	CEO Name	Audrey Vinci
9	CEO Title	Executive Director
10	CT Agent Name	Lucille Janatka
11	CT Agent Company	Central CT Health Alliance
12	CT Agent Company Street Address	100 Grand Street
13	CT Agent Town	New Britain
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06050 -

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
A . THE HOSPITAL OF CENTRAL CONNECTICUT			
1		Unrestricted	\$187,369
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$23,883
4		Permanently Restricted by Donor	\$21,631
5		Intercompany Eliminations	\$0
		Total:	\$232,883
B . HARTFORD HEALTH CARE CORPORATION			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
C . CENCONN SERVICES, INC.			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
D . CENTRAL CT HEALTH ALLIANCE			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
E . CLINICAL LABORATORY PARTNERS, LLC			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
F . HARTFORD HEALTHCARE AT HOME, INC.			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
G . HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
	H . HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHINGTON CARE CENTER		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	I . HARTFORD HOSPITAL		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	J . HHC INDEMNITY SERVICES, LTD		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	K . HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	L . JEFFERSON HOUSE		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	M . MIDSTATE MEDICAL CENTER		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	N . MRI OF FARMINGTON AVENUE LLC		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
O . MULBERRY GARDENS OF SOUTHINGTON, LLC			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
P . NATCHAUG HOSPITAL			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
Q . NEW BRITAIN MRI LIMITED PARTNERSHIP			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
R . PRACTICE CENTRAL, LLC			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
S . RUSHFORD CENTER, INC.			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
T . THE ORCHARDS AT SOUTHINGTON			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
U . THE WILLIAM BACKUS HOSPITAL			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0

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(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2015
V .	VNA HEALTH RESOURCES, INC.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
W .	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$232,883
	Intercompany Eliminations		\$0
	Total of all Affiliates	Fund Balance:	\$232,883

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
A. HARTFORD HEALTH CARE CORPORATION				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$2,120,357)
1		Salary & Wage and Taxes	09/30/2015	(\$2,584,911)
2		CHEFA Series A&C	09/30/2015	(\$219,178)
3		Memorial Sloan-Kettering Trademark	09/30/2015	\$77,543
4		Audit fees	09/30/2015	(\$87,817)
5		Consulting (Huron)	09/30/2015	\$2,629,169
6		rebates	09/30/2015	(\$14,375)
7		Premier	09/30/2015	(\$111,747)
8		Towers Watson	09/30/2015	\$280,724
9		Careconnect	09/30/2015	(\$147,305)
10		HHC AP invoice processed	09/30/2015	(\$22,237)
11		403 Prudential	09/30/2015	\$1,408
12		Render Hall inv - Amb Surgical Center	09/30/2015	\$1,883
13		Monthly Fees (Conifer, Fisher)	09/30/2015	(\$2,726)
14		Licensing/Dues/Subscription Renewals	09/30/2015	\$29,164
15		Workers Compensation	09/30/2015	(\$23,487)
16		Dietary Exp	09/30/2015	(\$632)
17		Management Fees	09/30/2015	(\$1,010,727)
18		CennConn Consolidated	09/30/2015	(\$5,715)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$3,331,323)
B. BRADLEY HEALTH SERVICES, INC.				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
C. CENCONN SERVICES, INC.				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$25,697
1		Maintenance	09/30/2015	\$125
2		Supplies	09/30/2015	(\$3,808)
3		Postage	09/30/2015	\$1
4		Rent	09/30/2015	(\$500)
5		CennConn Consolidated	09/30/2015	\$4,385
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$25,900

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
D. CENTRAL CT HEALTH ALLIANCE				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$41,750
1		CMHA ck payable to CCHA for HOCC (RENT)	09/30/2015	\$12,846
2		Payment on Account	09/30/2015	(\$54,596)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
E. CLINICAL LABORATORY PARTNERS, LLC				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$54,496)
1		Salary & Wage & Taxes	09/30/2015	\$50,865
2		Rent	09/30/2015	\$37,818
3		Prudential 403B	09/30/2015	(\$485)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$33,702
F. HARTFORD HEALTHCARE AT HOME, INC.				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
G. HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$65,170
1		Management Fee	09/30/2015	\$1,200
2		Administrator Salay & Fringe	09/30/2015	\$11,313
3		Physical Therapist Salary & Fringe	09/30/2015	\$4,252
4		Occupational Therapist Salary & Fringe	09/30/2015	(\$23,159)
5		Physician Liasion Salary & Fringe	09/30/2015	\$4,825
6		Cell Phone Expenses	09/30/2015	\$372
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$63,973
H. HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHINGTON CARE CENTER				
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$24,745
1		Salary & Wage and Taxes	09/30/2015	\$33,900
2		Dietary	09/30/2015	(\$2,809)

**THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
3		Supplies	09/30/2015	(\$1,537)
4		Insurance	09/30/2015	(\$5,180)
5		Prudential 403B	09/30/2015	(\$69,841)
6		Tax - Property	09/30/2015	(\$2,353)
7		Patient Billing	09/30/2015	(\$79)
8		Payment on Account	09/30/2015	\$13,130
9		Miscellaneous	09/30/2015	(\$10,297)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$20,321)
I.	HARTFORD HOSPITAL			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$2,910,854)
1		Laundry Expense	09/30/2015	\$1,451,049
2		FSA	09/30/2015	\$74,539
3		Dietary Exp	09/30/2015	\$593,701
4		Health Science Library	09/30/2015	\$500
5		Cable	09/30/2015	\$92,132
6		IT Alloc for Dep adj HH	09/30/2015	\$435
7		Miscellaneous	09/30/2015	\$471,720
8		Dues & Subscriptions	09/30/2015	(\$29,240)
9		prudential	09/30/2015	\$20
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$255,998)
J.	HHC INDEMNITY SERVICES, LTD			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$434,867
1		Medical Plan	09/30/2015	(\$1,567,805)
2		Dental Plan	09/30/2015	\$387,957
3		LTD	09/30/2015	\$39,142
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$705,839)
K.	HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$425,040)
1		Reimbursement of Expenses (Phys Practices)	09/30/2015	(\$42,953)
2		Salary & Wage & Fringe	09/30/2015	\$324,597
3		Dietary Exp	09/30/2015	(\$94)
4		Rent	09/30/2015	\$79,024
5		Supplies	09/30/2015	(\$45)

**THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$64,511)
L.	JEFFERSON HOUSE			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$2,353)
1		Salary & Wage & Taxes	09/30/2015	\$2,099
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$254)
M.	MIDSTATE MEDICAL CENTER			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$688,475
1		Salary & Wage & Fringe	09/30/2015	(\$544,493)
2		Diabeties Program	09/30/2015	(\$653)
3		Bariatric Program	09/30/2015	(\$27,504)
4		Diabeties Program	09/30/2015	(\$1,156)
5		Mileage Reimb	09/30/2015	(\$41)
6		Interpretation Services	09/30/2015	(\$4,147)
7		Susan Keane Baker-speaker	09/30/2015	(\$4,500)
8		Render Hall inv - Amb Surgical Center	09/30/2015	(\$941)
9		HOCC pt -L.COHEN	09/30/2015	(\$13,615)
10		Rent	09/30/2015	(\$60)
11		Prudential 403B	09/30/2015	(\$3,557)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$87,808
N.	MRI OF FARMINGTON AVENUE LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
O.	MULBERRY GARDENS OF SOUTHINGTON, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
P.	NATCHAUG HOSPITAL			

**THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$722)
1		Salary & Wage & Taxes	09/30/2015	\$722
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
Q.	NEW BRITAIN MRI LIMITED PARTNERSHIP			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$4,959)
1		Services provided by HHC for NB MRI	09/30/2015	\$224,175
2		Salaries & Wages	09/30/2015	\$2,914
3		Reimbursement of Expenses/services (Payment on Acct)	09/30/2015	(\$42,298)
4		Invoices paid my HOCC on behalf or owed to NB MRILP (AP invo	09/30/2015	\$96,330
5		Contact Labor (PR MRI)	09/30/2015	(\$384,353)
6		CennConn Consolidated	09/30/2015	\$108,191
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
R.	PRACTICE CENTRAL, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$0
S.	RUSHFORD CENTER, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$229)
1		Salary & Wage & Taxes	09/30/2015	\$785
2		Prudential 403B	09/30/2015	(\$2,874)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$2,318)
T.	THE ORCHARDS AT SOUTHINGTON			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
1		Salary & Wage & Taxes	09/30/2015	\$1,905
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$1,905
U.	THE WILLIAM BACKUS HOSPITAL			

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
1		Payment - Domestic Claims	09/30/2015	(\$93,718)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$93,718)
	V. VNA HEALTH RESOURCES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	(\$4,005)
1		Nightingale Sponsorship	09/30/2015	\$5,120
2		Salary & Wage & Taxes	09/30/2015	\$2,631
		Ending Unconsolidated Intercompany Balance:	9/30/2015	\$3,746
	W. WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED			
		Beginning Unconsolidated Intercompany Balance:	9/30/2014	\$0
1		Prudential 403B	09/30/2015	(\$1,865)
		Ending Unconsolidated Intercompany Balance:	9/30/2015	(\$1,865)
			Grand Total:	(\$4,259,113)

THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
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REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Beginning Unconsolidated Intercompany Balance	10/01/2014	\$14,728,730
A.	HARTFORD HEALTH CARE CORPORATION		Nothing to Report		\$0
			Total:	9/30/2015	\$0
B.	BRADLEY HEALTH SERVICES, INC.		Nothing to Report		\$0
			Total:	9/30/2015	\$0
C.	CENCONN SERVICES, INC.		Nothing to Report		\$0
			Total:	9/30/2015	\$0
D.	CENTRAL CT HEALTH ALLIANCE		Nothing to Report		\$0
			Total:	9/30/2015	\$0
E.	CENTRAL CT SENIOR HEALTH SERVICES		Nothing to Report		\$0
			Total:	9/30/2015	\$0
F.	CLINICAL LABORATORY PARTNERS, LLC		Nothing to Report		\$0
			Total:	9/30/2015	\$0
G.	COMMUNITY MENTAL HEALTH AFFILIATES		Nothing to Report		\$0
			Total:	9/30/2015	\$0
H.	HARTFORD HEALTHCARE AT HOME, INC.		Nothing to Report		\$0
			Total:	9/30/2015	\$0
I.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		Nothing to Report		\$0
			Total:	9/30/2015	\$0
J.	HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHTON CARE CENTER		Nothing to Report		\$0

THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
FISCAL YEAR 2015
REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Total:	9/30/2015	\$0
K.	HARTFORD HOSPITAL		Nothing to Report		\$0
			Total:	9/30/2015	\$0
L.	HHC INDEMNITY SERVICES, LTD		Nothing to Report		\$0
			Total:	9/30/2015	\$0
M.	HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP		Nothing to Report		\$0
			Total:	9/30/2015	\$0
N.	JEFFERSON HOUSE		Nothing to Report		\$0
			Total:	9/30/2015	\$0
O.	MIDSTATE MEDICAL CENTER		Nothing to Report		\$0
			Total:	9/30/2015	\$0
P.	MRI OF FARMINGTON AVENUE LLC		Nothing to Report		\$0
			Total:	9/30/2015	\$0
Q.	MULBERRY GARDENS OF SOUTHINGTON, LLC		Nothing to Report		\$0
			Total:	9/30/2015	\$0
R.	NATCHAUG HOSPITAL		Nothing to Report		\$0
			Total:	9/30/2015	\$0
S.	NEW BRITAIN MRI LIMITED PARTNERSHIP		Nothing to Report		\$0
			Total:	9/30/2015	\$0
T.	PRACTICE CENTRAL, LLC		Nothing to Report		\$0
			Total:	9/30/2015	\$0

THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
FISCAL YEAR 2015
REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
U.	RUSHFORD CENTER, INC.		Nothing to Report		\$0
			Total:	9/30/2015	\$0
V.	THE ORCHARDS AT SOUTHTON		Nothing to Report		\$0
			Total:	9/30/2015	\$0
W.	THE WILLIAM BACKUS HOSPITAL		Nothing to Report		\$0
			Total:	9/30/2015	\$0
X.	VNA HEALTH RESOURCES, INC.		Nothing to Report		\$0
			Total:	9/30/2015	\$0
Y.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		Nothing to Report		\$0
			Total:	9/30/2015	\$0
			Ending Unconsolidated Intercompany Balance	9/30/2015	\$14,728,730

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

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
	A. HARTFORD HEALTH CARE CORPORATION		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	B. BRADLEY HEALTH SERVICES, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	C. CENCONN SERVICES, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	D. CENTRAL CT HEALTH ALLIANCE		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	E. CENTRAL CT SENIOR HEALTH SERVICES		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	F. CLINICAL LABORATORY PARTNERS, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	G. COMMUNITY MENTAL HEALTH AFFILIATES		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	H. HARTFORD HEALTHCARE AT HOME, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	I. HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	J. HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHLINGTON CARE CENTER		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	K. HARTFORD HOSPITAL		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	L. HHC INDEMNITY SERVICES, LTD		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	M. HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	N. JEFFERSON HOUSE		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	O. MIDSTATE MEDICAL CENTER		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	P. MRI OF FARMINGTON AVENUE LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	Q. MULBERRY GARDENS OF SOUTHLINGTON, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	R. NATCHAUG HOSPITAL		

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

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	S. NEW BRITAIN MRI LIMITED PARTNERSHIP		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	T. PRACTICE CENTRAL, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	U. RUSHFORD CENTER, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	V. THE ORCHARDS AT SOUTHTON		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	W. THE WILLIAM BACKUS HOSPITAL		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	X. VNA HEALTH RESOURCES, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	Y. WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2015
	Grand Total:	\$0	9/30/2015

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
A.	HARTFORD HEALTH CARE CORPORATION		
0	Nothing to Report	\$0	0
	Total:	\$0	
B.	BRADLEY HEALTH SERVICES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
C.	CENCONN SERVICES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
D.	CENTRAL CT HEALTH ALLIANCE		
0	Nothing to Report	\$0	0
	Total:	\$0	
E.	CENTRAL CT SENIOR HEALTH SERVICES		
0	Nothing to Report	\$0	0
	Total:	\$0	
F.	CLINICAL LABORATORY PARTNERS, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
G.	COMMUNITY MENTAL HEALTH AFFILIATES		
0	Nothing to Report	\$0	0
	Total:	\$0	
H.	HARTFORD HEALTHCARE AT HOME, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
I.	HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
J.	HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHLINGTON CARE CENTER		
0	Nothing to Report	\$0	0
	Total:	\$0	

THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
K.	HARTFORD HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
L.	HHC INDEMNITY SERVICES, LTD		
0	Nothing to Report	\$0	0
	Total:	\$0	
M.	HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP		
0	Nothing to Report	\$0	0
	Total:	\$0	
N.	JEFFERSON HOUSE		
0	Nothing to Report	\$0	0
	Total:	\$0	
O.	MIDSTATE MEDICAL CENTER		
0	Nothing to Report	\$0	0
	Total:	\$0	
P.	MRI OF FARMINGTON AVENUE LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
Q.	MULBERRY GARDENS OF SOUTHWINGTON, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
R.	NATCHAUG HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
S.	NEW BRITAIN MRI LIMITED PARTNERSHIP		
0	Nothing to Report	\$0	0
	Total:	\$0	
T.	PRACTICE CENTRAL, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
U.	RUSHFORD CENTER, INC.		

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
0	Nothing to Report	\$0	0
	Total:	\$0	
V.	THE ORCHARDS AT SOUTHTON		
0	Nothing to Report	\$0	0
	Total:	\$0	
W.	THE WILLIAM BACKUS HOSPITAL		
0	Nothing to Report	\$0	0
	Total:	\$0	
X.	VNA HEALTH RESOURCES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
Y.	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED		
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$0	

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR
INDIGENT CARE AND FREE BEDS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 ACTUAL	FY 2015 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A . 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%
B . Free Beds					
	Beginning Balance	\$1,137,391.05	\$1,242,518.64	\$105,127.59	9%
1	Donations	\$3,017.00	\$0.00	(\$3,017.00)	-100%
2	Income	\$80,504.05	\$105,783.58	\$25,279.53	31%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$21,606.54	(\$146,268.98)	(\$167,875.52)	-777%
	Ending Balance	\$1,242,518.64	\$1,202,033.24	(\$40,485.40)	-3%
5	Projected Interest Income	\$20,000.00	\$20,000.00	\$0.00	0%
C . 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%

THE HOSPITAL OF CENTRAL CONNECTICUT		
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REPORT 17A - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applications for Hospital Bed Funds		906
	Grand Total	\$0.00

THE HOSPITAL OF CENTRAL CONNECTICUT					
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REPORT 17B - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
(3)	Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each Hospital Bed				
(4)	Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund.				
(5)	Actual Dollar Amount of Earnings reinvested as Principal, if any.				
(6)	Actual Dollar Amount of Earnings available for Patient Care.				
	General Free Bed Fund	\$836,532.72	\$73,618.12	\$0.00	\$73,618.12
	Childrens Free Bed Fund	\$179,673.63	\$15,811.98	\$0.00	\$15,811.98
	Quigley Memorial Fund	\$120,621.10	\$10,615.12	\$0.00	\$10,615.12
	Rosahn Memorial	\$65,205.79	\$573,836.00	\$0.00	\$5,738.36
	Total Bed Funds :	\$1,202,033.24	\$673,881.22	\$0.00	\$105,783.58

**THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
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REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION**

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I. GENERAL COLLECTION PROCESSES AND PROCEDURES		
A.	Hospital's processes and policies for assigning a debt to a Collection Agent	All collection agency and law firm accounts are sent by alpha split weekly. Transfer to agencies/law firm done electronically. Accounts are sent when the dunning cycle has been completed unsuccessfully and/or when all the internal collection efforts have been exhausted
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed tot he hospital as they occur.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	12.71%
II. SPECIFIC COLLECTION AGENT INFORMATION		
A	Collection Agent	
1	Collection Agent Name	Optimum Outcomes
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	All collection agency and law firm accounts are sent by alpha split weekly. Transfer to agencies/law firm done electronically. Accounts are sent when the dunning cycle has been completed unsuccessfully and/or when all the internal collection efforts have been exhausted
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed tot he hospital as they occur.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	12.63%

**THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
FISCAL YEAR 2015
REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION**

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
B	Collection Agent	
1	Collection Agent Name	EOS CCA
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	All collection agency and law firm accounts are sent by alpha split weekly. Transfer to agencies/law firm done electronically. Accounts are sent when the dunning cycle has been completed unsuccessfully and/or when all the internal collection efforts have been exhausted
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	All collection agency and law firm billing to the hospital occurs the month after the payments are received. Payment to the agencies and law firm is based upon a percentage of the amount collected. Legal fees are billed tot he hospital as they occur.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	12.73%

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL EMPLOYEES**

LINE	POSITION TITLE	EMPLOYEE NAME	SALARY	FRINGE BENEFITS	TOTAL
1.	Chief Emergency Room Physician	Jeff Finkelstein, Hospital of Central Connecticut	\$806,726	\$98,546	\$905,272
2.	Hospitalist	Haklai Lau, Hospital of Central Connecticut	\$789,220	\$47,643	\$836,863
3.	Director Surgical Oncology	James Flaherty, Hospital of Central Connecticut	\$567,163	\$137,801	\$704,964
4.	Hospitalist	Elizabeth Tillman, Hospital of Central Connecticut	\$501,406	\$31,484	\$532,890
5.	Chief of Cardiology	Justin Lundbye, Hospital of Central Connecticut	\$468,788	\$59,863	\$528,651
6.	Medical Director NBG ED	David Buono, Hospital of Central Connecticut	\$437,233	\$67,839	\$505,072
7.	Gynecologic Oncologist	James Hoffman, Hospital of Central Connecticut	\$413,256	\$75,940	\$489,196
8.	Medical Director BMH ED	Eric Hobert, Hospital of Central Connecticut	\$442,729	\$43,384	\$486,113
9.	Director Hospitalist Medicine	Daniel Kombert, Hospital of Central Connecticut	\$410,832	\$42,591	\$453,423
10.	Chief of Surgery	Rekhinder Singh, Hospital of Central Connecticut	\$390,785	\$60,072	\$450,857
		Grand Total:	\$5,228,138	\$665,163	\$5,893,301

**HARTFORD HEALTH CARE CORPORATION
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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.	HHC Regional VP Medical Affairs Central Region	Steven Hanks, Hartford HealthCare Corp.Med Group	\$2,486,680	\$94,057	\$2,580,737
2.	President and CEO	Elliot Joseph, Hartford HealthCare Corp.	\$2,027,131	\$341,675	\$2,368,806
3.	Exec VP CFO	Thomas Marchozzi, Hartford HealthCare Corp	\$1,523,554	\$50,536	\$1,574,090
4.	Cardiothoracic Surgeon	Robert Gallagher, Hartford HealthCare Medical Group	\$1,338,450	\$136,671	\$1,475,121
5.	EVP COO	Jeffrey Flaks, Hartford HealthCare Corp.	\$1,198,123	\$211,786	\$1,409,909
6.	Chair Dept of Cardiac Surgery	Robert Hagberg, Hartford HealthCare Medical Group	\$1,086,717	\$112,060	\$1,198,777
7.	Plastic Surgeon	Charles Castiglione, Hartford HealthCare Medical Group	\$1,002,736	\$103,588	\$1,106,324
8.	Colorectal Surgeon	Paul Vignati, Hartford HealthCare Medical Group	\$928,709	\$103,102	\$1,031,811
9.	Transplant Physician	Patricia Sheiner, Hartford HealthCare Medical Group	\$880,187	\$95,061	\$975,248
10.	HHC SVP East Region President	David Whitehead, Hartford HealthCare Corp	\$860,274	\$101,537	\$961,811
		Grand Total:	\$13,332,561	\$1,350,073	\$14,682,634

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS**

PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) ^c	FRINGE BENEFITS ^A (Directly or Indirectly) ^c	TOTAL
A . HARTFORD HEALTH CARE CORPORATION				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$351,771	\$102,133	\$453,904
2	Paid by the Hospital to Employees of the Entity Listed Above	\$21,942,041	\$2,986,397	\$24,928,438
B . BRADLEY HEALTH SERVICES, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
C . CENCONN SERVICES, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
D . CENTRAL CT HEALTH ALLIANCE				
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
E . CLINICAL LABORATORY PARTNERS, LLC				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$121,055	\$7,815	\$128,870
F . HARTFORD HEALTHCARE AT HOME, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$7,432	\$552	\$7,984
G . HARTFORD HEALTHCARE REHABILITATION NETWORK, LLC				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$65,877	\$17,864	\$83,741
2	Paid by the Hospital to Employees of the Entity Listed Above	\$177,574	\$0	\$177,574
H . HARTFORD HEALTHCARE SENIOR SERVICES D/B/A SOUTHWINGTON CARE CENTER				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$40,286	\$11,280	\$51,566
2	Paid by the Hospital to Employees of the Entity Listed Above	\$489	\$37	\$526
I . HARTFORD HOSPITAL				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$825,457	\$121,061	\$946,518
2	Paid by the Hospital to Employees of the Entity Listed Above	\$1,799,228	\$40,475	\$1,839,703
J . HHC INDEMNITY SERVICES, LTD				
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
K . HHC PHYSICIANCARE INC. D/B/A HARTFORD MEDICAL GROUP				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$15,000	\$0	\$15,000
2	Paid by the Hospital to Employees of the Entity Listed Above	\$645,862	\$2,141	\$648,003
L . JEFFERSON HOUSE				
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	\$7,164	\$473	\$7,637
M . MIDSTATE MEDICAL CENTER				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$1,564,455	\$2,076	\$1,566,531
2	Paid by the Hospital to Employees of the Entity Listed Above	\$831,430	\$8,125	\$839,555
N . MRI OF FARMINGTON AVENUE LLC				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
O . MULBERRY GARDENS OF SOUTHWINGTON, LLC				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
P . NATCHAUG HOSPITAL				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0

**THE HOSPITAL OF CENTRAL CONNECTICUT
ANNUAL REPORTING
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REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS
PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) ^C	FRINGE BENEFITS ^A (Directly or Indirectly) ^C	TOTAL
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
Q .	NEW BRITAIN MRI LIMITED PARTNERSHIP			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$27,988	\$8,956	\$36,944
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
R .	PRACTICE CENTRAL, LLC			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
S .	RUSHFORD CENTER, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$1,103	\$84	\$1,187
T .	THE ORCHARDS AT SOUTHLINGTON			
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	\$5,876	\$449	\$6,325
U .	THE WILLIAM BACKUS 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
V .	VNA HEALTH RESOURCES, INC.			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
W .	WINDHAM COMMUNITY MEMORIAL HOSPITAL, INCORPORATED			
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0

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

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

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

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

**THE HOSPITAL OF CENTRAL CONNECTICUT
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REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR
CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY**

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

THE HOSPITAL OF CENTRAL CONNECTICUT					
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REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2014 AMOUNT	FY 2015 AMOUNT	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (see Hospital Audited Financial Statement Notes)					
1.	Number of Applicants	1,982	906	(1,076)	-54%
2.	Number of Approved Applicants	1,094	671	(423)	-39%
3.	Total Charges (A)	\$17,256,889	\$9,706,868	(\$7,550,021)	-44%
	Average Charges	\$15,774	\$14,466	(\$1,308)	-8%
4.	Ratio of Cost to Charges (RCC)	0.41218	0.409651	(0.002529)	-1%
	Total Cost	\$7,112,945	\$3,976,428	(\$3,136,516)	-44%
	Average Cost	\$6,502	\$5,926	(\$576)	-9%
5.	Charity Care - Inpatient Charges	\$3,542,918	\$2,122,076	(\$1,420,842)	-40%
6.	Charity Care - Outpatient Emergency Department Charges	10,513,667	5,421,348	(5,092,319)	-48%
7.	Charity Care - Outpatient Charges (Excludes ED Charges)	3,200,304	2,163,444	(1,036,860)	-32%
	Total Charges (A)	\$17,256,889	\$9,706,868	(\$7,550,021)	-44%
8.	Charity Care - Number of Patient Days	3,192	3,317	125	4%
9.	Charity Care - Number of Discharges	635	577	(58)	-9%
10.	Charity Care - Number of Outpatient ED Visits	9,613	6,673	(2,940)	-31%
11.	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	4,935	3,673	(1,262)	-26%
(A) The total amount must agree with the total amount listed in the Hospital Audited Financial Statement Notes.					
B. Hospital Bed Funds (see Hospital Reporting System - Report 17)					
1.	Number of Applicants	1,982	906	(1,076)	-54%
2.	Number of Approved Applicants	-	-	-	0%
3.	Total Charges (B)	\$0	\$0	\$0	0%
	Average Charges	\$0	\$0	\$0	0%
4.	Ratio of Cost to Charges (RCC)	0.41218	0.409651	(0.002529)	-1%
	Total Cost	\$0	\$0	\$0	0%
	Average Cost	\$0	\$0	\$0	0%
5.	Bed Funds - Inpatient Charges	\$0	\$0	\$0	0%
6.	Bed Funds - Outpatient Emergency Department Charges	0	0	0	0%
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	0	0	0	0%
	Total Charges (B)	\$0	\$0	\$0	0%
8.	Bed Funds - Number of Patient Days	0	0	0	0%
9.	Bed Funds - Number of Discharges	0	0	0	0%
10.	Bed Funds - Number of Outpatient ED Visits	0	0	0	0%
11.	Bed Funds - Number of Outpatient Visits(Excludes ED Visits)	0	0	0	0%
(B) The total amount must agree with the total amount listed on Hospital Reporting System - Report 17.					