

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$1,665,016	\$6,892,694	\$5,227,678	314%
2	Short Term Investments	\$110,612	\$110,778	\$166	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$9,618,035	\$8,850,797	(\$767,238)	-8%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$887,860	\$772,809	(\$115,051)	-13%
8	Prepaid Expenses	\$1,727,752	\$872,178	(\$855,574)	-50%
9	Other Current Assets	\$814,691	\$672,298	(\$142,393)	-17%
	Total Current Assets	\$14,823,966	\$18,171,554	\$3,347,588	23%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$894,273	\$0	(\$894,273)	-100%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$1,685,728	\$1,658,681	(\$27,047)	-2%
	Total Noncurrent Assets Whose Use is Limited:	\$2,580,001	\$1,658,681	(\$921,320)	-36%
5	Interest in Net Assets of Foundation	\$894,273	\$960,239	\$65,966	7%
6	Long Term Investments	\$3,482,913	\$1,815,473	(\$1,667,440)	-48%
7	Other Noncurrent Assets	\$4,434,466	\$3,337,233	(\$1,097,233)	-25%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$50,192,655	\$51,713,669	\$1,521,014	3%
2	Less: Accumulated Depreciation	\$28,032,185	\$30,714,786	\$2,682,601	10%
	Property, Plant and Equipment, Net	\$22,160,470	\$20,998,883	(\$1,161,587)	-5%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$22,160,470	\$20,998,883	(\$1,161,587)	-5%
	Total Assets	\$48,376,089	\$46,942,063	(\$1,434,026)	-3%

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LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$5,318,753	\$7,032,887	\$1,714,134	32%
2	Salaries, Wages and Payroll Taxes	\$6,870,249	\$6,690,575	(\$179,674)	-3%
3	Due To Third Party Payers	\$1,691,606	\$2,226,150	\$534,544	32%
4	Due To Affiliates	\$20,705	\$122,749	\$102,044	493%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$2,686,057	\$2,554,267	(\$131,790)	-5%
	Total Current Liabilities	\$16,587,370	\$18,626,628	\$2,039,258	12%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$0	\$6,000,000	\$6,000,000	0%
	Total Long Term Debt	\$0	\$6,000,000	\$6,000,000	0%
3	Accrued Pension Liability	\$16,549,876	\$18,262,691	\$1,712,815	10%
4	Other Long Term Liabilities	\$6,632,746	\$5,074,953	(\$1,557,793)	-23%
	Total Long Term Liabilities	\$23,182,622	\$29,337,644	\$6,155,022	27%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$7,157,824	(\$2,536,448)	(\$9,694,272)	-135%
2	Temporarily Restricted Net Assets	\$774,510	\$840,476	\$65,966	9%
3	Permanently Restricted Net Assets	\$673,763	\$673,763	\$0	0%
	Total Net Assets	\$8,606,097	(\$1,022,209)	(\$9,628,306)	-112%
	Total Liabilities and Net Assets	\$48,376,089	\$46,942,063	(\$1,434,026)	-3%

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013 ACTUAL</u>	<u>FY 2014 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. <u>Operating Revenue:</u>					
1	Total Gross Patient Revenue	\$194,913,879	\$197,304,278	\$2,390,399	1%
2	Less: Allowances	\$117,910,482	\$126,172,435	\$8,261,953	7%
3	Less: Charity Care	\$643,601	\$579,794	(\$63,807)	-10%
4	Less: Other Deductions	\$0	\$1,442,946	\$1,442,946	0%
	Total Net Patient Revenue	\$76,359,796	\$69,109,103	(\$7,250,693)	-9%
5	Provision for Bad Debts	\$6,456,481	\$5,608,309	(\$848,172)	-13%
	Net Patient Service Revenue less provision for bad debts	\$69,903,315	\$63,500,794	(\$6,402,521)	-9%
6	Other Operating Revenue	\$1,449,445	\$1,352,459	(\$96,986)	-7%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$71,352,760	\$64,853,253	(\$6,499,507)	-9%
B. <u>Operating Expenses:</u>					
1	Salaries and Wages	\$37,819,070	\$35,687,358	(\$2,131,712)	-6%
2	Fringe Benefits	\$12,180,524	\$9,339,322	(\$2,841,202)	-23%
3	Physicians Fees	\$722,901	\$770,256	\$47,355	7%
4	Supplies and Drugs	\$11,584,106	\$12,428,440	\$844,334	7%
5	Depreciation and Amortization	\$4,180,977	\$2,687,549	(\$1,493,428)	-36%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$34,936	\$26,961	(\$7,975)	-23%
8	Malpractice Insurance Cost	\$2,479,413	\$746,227	(\$1,733,186)	-70%
9	Other Operating Expenses	\$11,115,319	\$10,390,485	(\$724,834)	-7%
	Total Operating Expenses	\$80,117,246	\$72,076,598	(\$8,040,648)	-10%
	Income/(Loss) From Operations	(\$8,764,486)	(\$7,223,345)	\$1,541,141	-18%
C. <u>Non-Operating Revenue:</u>					
1	Income from Investments	\$324,629	\$360,284	\$35,655	11%
2	Gifts, Contributions and Donations	\$300,669	\$1,905	(\$298,764)	-99%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	Total Non-Operating Revenue	\$625,298	\$362,189	(\$263,109)	-42%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$8,139,188)	(\$6,861,156)	\$1,278,032	-16%
Other Adjustments:					
	Unrealized Gains/(Losses)	(\$736,830)	(\$342,578)	\$394,252	-54%

MILFORD HOSPITAL					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013</u>	<u>FY 2014</u>	<u>AMOUNT</u>	<u>%</u>
		<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	(\$736,830)	(\$342,578)	\$394,252	-54%
	Excess/(Deficiency) of Revenue Over Expenses	(\$8,876,018)	(\$7,203,734)	\$1,672,284	-19%
	Principal Payments	\$935,367	\$1	(\$935,366)	-100%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<u>GROSS REVENUE BY PAYER</u>				
A.	<u>INPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$47,673,191	\$46,013,180	(\$1,660,011)	-3%
2	MEDICARE MANAGED CARE	\$16,838,321	\$17,563,560	\$725,239	4%
3	MEDICAID	\$3,647,163	\$8,491,118	\$4,843,955	133%
4	MEDICAID MANAGED CARE	\$1,577,197	\$0	(\$1,577,197)	-100%
5	CHAMPUS/TRICARE	\$174,774	\$119,348	(\$55,426)	-32%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$26,124,829	\$24,892,987	(\$1,231,842)	-5%
8	WORKER'S COMPENSATION	\$750,068	\$521,777	(\$228,291)	-30%
9	SELF- PAY/UNINSURED	\$1,363,537	\$1,574,728	\$211,191	15%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$31,334	\$72,804	\$41,470	132%
	TOTAL INPATIENT GROSS REVENUE	\$98,180,414	\$99,249,502	\$1,069,088	1%
B.	<u>OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$21,464,079	\$23,774,337	\$2,310,258	11%
2	MEDICARE MANAGED CARE	\$9,980,176	\$10,956,407	\$976,231	10%
3	MEDICAID	\$7,035,226	\$16,965,353	\$9,930,127	141%
4	MEDICAID MANAGED CARE	\$7,648,947	\$0	(\$7,648,947)	-100%
5	CHAMPUS/TRICARE	\$231,144	\$180,436	(\$50,708)	-22%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$43,358,999	\$41,749,036	(\$1,609,963)	-4%
8	WORKER'S COMPENSATION	\$1,308,198	\$1,220,144	(\$88,054)	-7%
9	SELF- PAY/UNINSURED	\$5,507,937	\$3,025,507	(\$2,482,430)	-45%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$198,761	\$183,557	(\$15,204)	-8%
	TOTAL OUTPATIENT GROSS REVENUE	\$96,733,467	\$98,054,777	\$1,321,310	1%
C.	<u>TOTAL GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$69,137,270	\$69,787,517	\$650,247	1%
2	MEDICARE MANAGED CARE	\$26,818,497	\$28,519,967	\$1,701,470	6%
3	MEDICAID	\$10,682,389	\$25,456,471	\$14,774,082	138%
4	MEDICAID MANAGED CARE	\$9,226,144	\$0	(\$9,226,144)	-100%
5	CHAMPUS/TRICARE	\$405,918	\$299,784	(\$106,134)	-26%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$69,483,828	\$66,642,023	(\$2,841,805)	-4%
8	WORKER'S COMPENSATION	\$2,058,266	\$1,741,921	(\$316,345)	-15%
9	SELF- PAY/UNINSURED	\$6,871,474	\$4,600,235	(\$2,271,239)	-33%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$230,095	\$256,361	\$26,266	11%
	TOTAL GROSS REVENUE	\$194,913,881	\$197,304,279	\$2,390,398	1%
II.	<u>NET REVENUE BY PAYER</u>				
A.	<u>INPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$15,052,562	\$14,387,850	(\$664,712)	-4%
2	MEDICARE MANAGED CARE	\$5,574,685	\$5,724,759	\$150,074	3%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	\$671,541	\$1,668,745	\$997,204	148%
4	MEDICAID MANAGED CARE	\$497,232	\$0	(\$497,232)	-100%
5	CHAMPUS/TRICARE	\$63,596	\$33,114	(\$30,482)	-48%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$11,944,841	\$10,324,547	(\$1,620,294)	-14%
8	WORKER'S COMPENSATION	\$486,206	\$265,443	(\$220,763)	-45%
9	SELF- PAY/UNINSURED	\$14,362	\$56,740	\$42,378	295%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$6,064	\$18,590	\$12,526	207%
	TOTAL INPATIENT NET REVENUE	\$34,311,089	\$32,479,788	(\$1,831,301)	-5%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$5,059,853	\$5,835,248	\$775,395	15%
2	MEDICARE MANAGED CARE	\$2,443,172	\$2,614,117	\$170,945	7%
3	MEDICAID	\$1,930,487	\$4,731,261	\$2,800,774	145%
4	MEDICAID MANAGED CARE	\$2,091,032	\$0	(\$2,091,032)	-100%
5	CHAMPUS/TRICARE	\$61,532	\$51,084	(\$10,448)	-17%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$20,591,132	\$18,173,357	(\$2,417,775)	-12%
8	WORKER'S COMPENSATION	\$999,404	\$889,993	(\$109,411)	-11%
9	SELF- PAY/UNINSURED	\$63,231	\$134,197	\$70,966	112%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$37,428	\$34,694	(\$2,734)	-7%
	TOTAL OUTPATIENT NET REVENUE	\$33,277,271	\$32,463,951	(\$813,320)	-2%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$20,112,415	\$20,223,098	\$110,683	1%
2	MEDICARE MANAGED CARE	\$8,017,857	\$8,338,876	\$321,019	4%
3	MEDICAID	\$2,602,028	\$6,400,006	\$3,797,978	146%
4	MEDICAID MANAGED CARE	\$2,588,264	\$0	(\$2,588,264)	-100%
5	CHAMPUS/TRICARE	\$125,128	\$84,198	(\$40,930)	-33%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$32,535,973	\$28,497,904	(\$4,038,069)	-12%
8	WORKER'S COMPENSATION	\$1,485,610	\$1,155,436	(\$330,174)	-22%
9	SELF- PAY/UNINSURED	\$77,593	\$190,937	\$113,344	146%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$43,492	\$53,284	\$9,792	23%
	TOTAL NET REVENUE	\$67,588,360	\$64,943,739	(\$2,644,621)	-4%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	1,474	1,342	(132)	-9%
2	MEDICARE MANAGED CARE	537	525	(12)	-2%
3	MEDICAID	143	333	190	133%
4	MEDICAID MANAGED CARE	115	0	(115)	-100%
5	CHAMPUS/TRICARE	10	3	(7)	-70%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	1,000	850	(150)	-15%
8	WORKER'S COMPENSATION	18	11	(7)	-39%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
9	SELF- PAY/UNINSURED	50	55	5	10%
10	SAGA	0	0	0	0%
11	OTHER	1	2	1	100%
	TOTAL DISCHARGES	3,348	3,121	(227)	-7%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	6,826	6,035	(791)	-12%
2	MEDICARE MANAGED CARE	2,376	2,196	(180)	-8%
3	MEDICAID	568	1,559	991	174%
4	MEDICAID MANAGED CARE	343	0	(343)	-100%
5	CHAMPUS/TRICARE	27	6	(21)	-78%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	3,236	2,792	(444)	-14%
8	WORKER'S COMPENSATION	46	32	(14)	-30%
9	SELF- PAY/UNINSURED	175	244	69	39%
10	SAGA	0	0	0	0%
11	OTHER	6	16	10	167%
	TOTAL PATIENT DAYS	13,603	12,880	(723)	-5%
C.	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	8,518	8,599	81	1%
2	MEDICARE MANAGED CARE	4,510	4,330	(180)	-4%
3	MEDICAID	4,071	10,132	6,061	149%
4	MEDICAID MANAGED CARE	5,948	0	(5,948)	-100%
5	CHAMPUS/TRICARE	166	108	(58)	-35%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	28,673	25,829	(2,844)	-10%
8	WORKER'S COMPENSATION	935	941	6	1%
9	SELF- PAY/UNINSURED	2,717	2,168	(549)	-20%
10	SAGA	0	0	0	0%
11	OTHER	124	112	(12)	-10%
	TOTAL OUTPATIENT VISITS	55,662	52,219	(3,443)	-6%
IV.	<u>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</u>				
A.	<u>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$7,991,432	\$7,736,819	(\$254,613)	-3%
2	MEDICARE MANAGED CARE	\$3,220,674	\$3,328,587	\$107,913	3%
3	MEDICAID	\$1,342,068	\$10,903,073	\$9,561,005	712%
4	MEDICAID MANAGED CARE	\$5,940,933	\$0	(\$5,940,933)	-100%
5	CHAMPUS/TRICARE	\$153,712	\$104,766	(\$48,946)	-32%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$23,249,455	\$15,161,151	(\$8,088,304)	-35%
8	WORKER'S COMPENSATION	\$953,677	\$703,461	(\$250,216)	-26%
9	SELF- PAY/UNINSURED	\$3,507,216	\$2,484,621	(\$1,022,595)	-29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$151,918	\$143,018	(\$8,900)	-6%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$46,511,085	\$40,565,496	(\$5,945,589)	-13%
B.	<u>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$1,880,370	\$2,079,526	\$199,156	11%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	MEDICARE MANAGED CARE	\$769,435	\$1,071,143	\$301,708	39%
3	MEDICAID	\$1,342,068	\$2,809,423	\$1,467,355	109%
4	MEDICAID MANAGED CARE	\$4,340,423	\$0	(\$4,340,423)	-100%
5	CHAMPUS/TRICARE	\$51,003	\$27,431	(\$23,572)	-46%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$10,254,347	\$7,574,417	(\$2,679,930)	-26%
8	WORKER'S COMPENSATION	\$676,606	\$509,377	(\$167,229)	-25%
9	SELF- PAY/UNINSURED	\$744,309	\$74,310	(\$669,999)	-90%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$46,915	\$51,576	\$4,661	10%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$20,105,476	\$14,197,203	(\$5,908,273)	-29%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	4,050	3,197	(853)	-21%
2	MEDICARE MANAGED CARE	1,532	1,302	(230)	-15%
3	MEDICAID	3,216	5,331	2,115	66%
4	MEDICAID MANAGED CARE	4,944	0	(4,944)	-100%
5	CHAMPUS/TRICARE	119	60	(59)	-50%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	14,791	7,683	(7,108)	-48%
8	WORKER'S COMPENSATION	896	543	(353)	-39%
9	SELF- PAY/UNINSURED	2,508	1,526	(982)	-39%
10	SAGA	0	0	0	0%
11	OTHER	119	93	(26)	-22%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	32,175	19,735	(12,440)	-39%

MILFORD HOSPITAL					
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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	<u>OPERATING EXPENSE BY CATEGORY</u>				
A.	<u>Salaries & Wages:</u>				
1	Nursing Salaries	\$16,446,079	\$14,893,505	(\$1,552,574)	-9%
2	Physician Salaries	\$5,633,239	\$4,236,141	(\$1,397,098)	-25%
3	Non-Nursing, Non-Physician Salaries	\$15,739,752	\$16,557,712	\$817,960	5%
	Total Salaries & Wages	\$37,819,070	\$35,687,358	(\$2,131,712)	-6%
B.	<u>Fringe Benefits:</u>				
1	Nursing Fringe Benefits	\$5,577,143	\$4,202,695	(\$1,374,448)	-25%
2	Physician Fringe Benefits	\$695,961	\$560,359	(\$135,602)	-19%
3	Non-Nursing, Non-Physician Fringe Benefits	\$5,907,420	\$4,576,268	(\$1,331,152)	-23%
	Total Fringe Benefits	\$12,180,524	\$9,339,322	(\$2,841,202)	-23%
C.	<u>Contractual Labor Fees:</u>				
1	Nursing Fees	\$279,055	\$74,114	(\$204,941)	-73%
2	Physician Fees	\$722,901	\$770,256	\$47,355	7%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$1,001,956	\$844,370	(\$157,586)	-16%
D.	<u>Medical Supplies and Pharmaceutical Cost:</u>				
1	Medical Supplies	\$9,894,485	\$10,406,832	\$512,347	5%
2	Pharmaceutical Costs	\$1,689,621	\$2,021,608	\$331,987	20%
	Total Medical Supplies and Pharmaceutical Cost	\$11,584,106	\$12,428,440	\$844,334	7%
E.	<u>Depreciation and Amortization:</u>				
1	Depreciation-Building	\$2,686,630	\$1,033,891	(\$1,652,739)	-62%
2	Depreciation-Equipment	\$1,484,821	\$1,653,658	\$168,837	11%
3	Amortization	\$9,526	\$0	(\$9,526)	-100%
	Total Depreciation and Amortization	\$4,180,977	\$2,687,549	(\$1,493,428)	-36%
F.	<u>Bad Debts:</u>				
1	Bad Debts	\$0	\$0	\$0	0%
G.	<u>Interest Expense:</u>				
1	Interest Expense	\$34,936	\$26,961	(\$7,975)	-23%
H.	<u>Malpractice Insurance Cost:</u>				
1	Malpractice Insurance Cost	\$2,479,413	\$746,227	(\$1,733,186)	-70%
I.	<u>Utilities:</u>				
1	Water	\$84,975	\$81,301	(\$3,674)	-4%
2	Natural Gas	\$533,634	\$326,461	(\$207,173)	-39%
3	Oil	\$34,489	\$18,680	(\$15,809)	-46%
4	Electricity	\$1,083,168	\$985,369	(\$97,799)	-9%
5	Telephone	\$78,530	\$84,843	\$6,313	8%
6	Other Utilities	\$53,913	\$52,691	(\$1,222)	-2%
	Total Utilities	\$1,868,709	\$1,549,345	(\$319,364)	-17%
J.	<u>Business Expenses:</u>				
1	Accounting Fees	\$138,117	\$232,189	\$94,072	68%
2	Legal Fees	\$372,467	\$290,258	(\$82,209)	-22%
3	Consulting Fees	\$167,762	\$33,279	(\$134,483)	-80%
4	Dues and Membership	\$229,641	\$230,726	\$1,085	0%
5	Equipment Leases	\$107,385	\$212,590	\$105,205	98%
6	Building Leases	\$142,371	\$142,426	\$55	0%
7	Repairs and Maintenance	\$232,040	\$119,286	(\$112,754)	-49%
8	Insurance	\$117,407	\$224,540	\$107,133	91%
9	Travel	\$26,472	\$28,825	\$2,353	9%
10	Conferences	\$33,782	\$29,486	(\$4,296)	-13%

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$650,726	\$647,825	(\$2,901)	0%
13	Licenses and Subscriptions	\$152,014	\$210,516	\$58,502	38%
14	Postage and Shipping	\$48,402	\$29,569	(\$18,833)	-39%
15	Advertising	\$126,444	\$103,779	(\$22,665)	-18%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$632,006	\$681,140	\$49,134	8%
20	Lab Fees / Red Cross charges	\$777,655	\$643,733	(\$133,922)	-17%
21	Billing & Collection / Bank Fees	\$434,524	\$511,346	\$76,822	18%
22	Recruiting / Employee Education & Recognition	\$0	\$0	\$0	0%
23	Laundry / Linen	\$286,339	\$257,339	(\$29,000)	-10%
24	Professional / Physician Fees	\$587,547	\$770,256	\$182,709	31%
25	Waste disposal	\$27,223	\$36,462	\$9,239	34%
26	Purchased Services - Medical	\$733,755	\$414,749	(\$319,006)	-43%
27	Purchased Services - Non Medical	\$811,969	\$506,915	(\$305,054)	-38%
28	Other Business Expenses	\$421,817	\$338,532	(\$83,285)	-20%
	Total Business Expenses	\$7,257,865	\$6,695,766	(\$562,099)	-8%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$1,709,690	\$2,071,260	\$361,570	21%
	Total Operating Expenses - All Expense Categories*	\$80,117,246	\$72,076,598	(\$8,040,648)	-10%
	*A.-K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$4,647,379	\$2,689,660	(\$1,957,719)	-42%
2	General Accounting	\$666,700	\$746,062	\$79,362	12%
3	Patient Billing & Collection	\$1,527,966	\$1,211,626	(\$316,340)	-21%
4	Admitting / Registration Office	\$628,133	\$631,657	\$3,524	1%
5	Data Processing	\$1,919,935	\$2,426,865	\$506,930	26%
6	Communications	\$437,632	\$444,823	\$7,191	2%
7	Personnel	\$362,818	\$379,037	\$16,219	4%
8	Public Relations	\$179,801	\$152,558	(\$27,243)	-15%
9	Purchasing	\$232,864	\$226,432	(\$6,432)	-3%
10	Dietary and Cafeteria	\$1,642,128	\$1,532,506	(\$109,622)	-7%
11	Housekeeping	\$1,171,432	\$1,163,361	(\$8,071)	-1%
12	Laundry & Linen	\$61,624	\$46,730	(\$14,894)	-24%
13	Operation of Plant	\$3,466,032	\$2,904,106	(\$561,926)	-16%
14	Security	\$234,512	\$233,793	(\$719)	0%
15	Repairs and Maintenance	\$795,600	\$737,514	(\$58,086)	-7%
16	Central Sterile Supply	\$418,352	\$382,451	(\$35,901)	-9%
17	Pharmacy Department	\$2,573,605	\$2,873,691	\$300,086	12%
18	Other General Services	\$4,315,319	\$4,614,832	\$299,513	7%
	Total General Services	\$25,281,832	\$23,397,704	(\$1,884,128)	-7%
B.	Professional Services:				
1	Medical Care Administration	\$620,294	\$564,504	(\$55,790)	-9%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,260,371	\$1,138,875	(\$121,496)	-10%
4	Medical Records	\$895,689	\$824,655	(\$71,034)	-8%
5	Social Service	\$256,505	\$267,911	\$11,406	4%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$3,032,859	\$2,795,945	(\$236,914)	-8%
C.	Special Services:				

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Operating Room	\$2,208,844	\$2,280,979	\$72,135	3%
2	Recovery Room	\$477,572	\$471,539	(\$6,033)	-1%
3	Anesthesiology	\$103,757	\$109,122	\$5,365	5%
4	Delivery Room	\$211,343	\$190,066	(\$21,277)	-10%
5	Diagnostic Radiology	\$2,728,421	\$2,745,865	\$17,444	1%
6	Diagnostic Ultrasound	\$477,111	\$504,576	\$27,465	6%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$0	\$0	\$0	0%
9	CT Scan	\$638,756	\$626,172	(\$12,584)	-2%
10	Laboratory	\$4,083,838	\$3,987,670	(\$96,168)	-2%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$98,161	\$100,219	\$2,058	2%
14	Electroencephalography	\$15,092	\$6,517	(\$8,575)	-57%
15	Occupational Therapy	\$53,472	\$60,512	\$7,040	13%
16	Speech Pathology	\$41,307	\$42,851	\$1,544	4%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,002,450	\$898,779	(\$103,671)	-10%
19	Pulmonary Function	\$101,010	\$102,314	\$1,304	1%
20	Intravenous Therapy	\$280,915	\$305,523	\$24,608	9%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$167,535	\$0	(\$167,535)	-100%
24	Emergency Room	\$7,748,021	\$6,266,290	(\$1,481,731)	-19%
25	MRI	\$413,312	\$405,833	(\$7,479)	-2%
26	PET Scan	\$68,476	\$72,397	\$3,921	6%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$454,384	\$604,769	\$150,385	33%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$606,802	\$612,444	\$5,642	1%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$17,616,783	\$12,998,543	(\$4,618,240)	-26%
	Total Special Services	\$39,597,362	\$33,392,980	(\$6,204,382)	-16%
D.	Routine Services:				
1	Medical & Surgical Units	\$7,597,640	\$7,820,852	\$223,212	3%
2	Intensive Care Unit	\$2,083,907	\$2,250,929	\$167,022	8%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$0	\$0	\$0	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$974,021	\$866,045	(\$107,976)	-11%
7	Newborn Nursery Unit	\$974,021	\$895,508	(\$78,513)	-8%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$575,604	\$656,635	\$81,031	14%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	Total Routine Services	\$12,205,193	\$12,489,969	\$284,776	2%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$80,117,246	\$72,076,598	(\$8,040,648)	-10%
	*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$84,451,715	\$69,903,315	\$63,500,794
2	Other Operating Revenue	2,505,143	1,449,445	1,352,459
3	Total Operating Revenue	\$86,956,858	\$71,352,760	\$64,853,253
4	Total Operating Expenses	90,685,854	80,117,246	72,076,598
5	Income/(Loss) From Operations	(\$3,728,996)	(\$8,764,486)	(\$7,223,345)
6	Total Non-Operating Revenue	1,943,229	(111,532)	19,611
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,785,767)	(\$8,876,018)	(\$7,203,734)
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	-4.19%	-12.30%	-11.13%
2	Hospital Non Operating Margin	2.19%	-0.16%	0.03%
3	Hospital Total Margin	-2.01%	-12.46%	-11.10%
4	Income/(Loss) From Operations	(\$3,728,996)	(\$8,764,486)	(\$7,223,345)
5	Total Operating Revenue	\$86,956,858	\$71,352,760	\$64,853,253
6	Total Non-Operating Revenue	\$1,943,229	(\$111,532)	\$19,611
7	Total Revenue	\$88,900,087	\$71,241,228	\$64,872,864
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,785,767)	(\$8,876,018)	(\$7,203,734)
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$5,927,259	\$7,157,824	(\$2,536,448)
2	Hospital Total Net Assets	\$7,270,463	\$8,606,097	(\$1,022,209)
3	Hospital Change in Total Net Assets	(\$8,224,756)	\$1,335,634	(\$9,628,306)
4	Hospital Change in Total Net Assets %	46.9%	18.4%	-111.9%

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
D.	<u>Cost Data Summary</u>			
1	<u>Ratio of Cost to Charges</u>	0.47	0.41	0.36
2	Total Operating Expenses	\$90,685,854	\$80,117,246	\$72,076,598
3	Total Gross Revenue	\$189,422,164	\$194,913,881	\$197,304,279
4	Total Other Operating Revenue	\$2,505,143	\$1,449,445	\$1,352,459
5	<u>Private Payment to Cost Ratio</u>	1.01	1.17	1.20
6	Total Non-Government Payments	\$35,503,735	\$34,099,176	\$29,844,277
7	Total Uninsured Payments	\$249,764	\$77,593	\$190,937
8	Total Non-Government Charges	\$79,203,642	\$78,413,568	\$72,984,179
9	Total Uninsured Charges	\$5,628,494	\$6,871,474	\$4,600,235
10	<u>Medicare Payment to Cost Ratio</u>	0.70	0.72	0.80
11	Total Medicare Payments	\$29,632,816	\$28,130,272	\$28,561,974
12	Total Medicare Charges	\$90,191,654	\$95,955,767	\$98,307,484
13	<u>Medicaid Payment to Cost Ratio</u>	0.56	0.64	0.69
14	Total Medicaid Payments	\$5,177,495	\$5,190,292	\$6,400,006
15	Total Medicaid Charges	\$19,582,175	\$19,908,533	\$25,456,471
16	<u>Uncompensated Care Cost</u>	\$3,412,141	\$2,896,870	\$2,245,167
17	Charity Care	\$192,533	\$643,601	\$579,795
18	Bad Debts	\$7,028,914	\$6,456,481	\$5,608,309
19	Total Uncompensated Care	\$7,221,447	\$7,100,082	\$6,188,104
20	<u>Uncompensated Care % of Total Expenses</u>	3.8%	3.6%	3.1%

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>
21	Total Operating Expenses	\$90,685,854	\$80,117,246	\$72,076,598
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	1	1	1
2	Total Current Assets	\$16,168,102	\$14,823,966	\$18,171,554
3	Total Current Liabilities	\$16,194,450	\$16,587,370	\$18,626,628
4	<u>Days Cash on Hand</u>	3	9	37
5	Cash and Cash Equivalents	\$404,540	\$1,665,016	\$6,892,694
6	Short Term Investments	225,160	110,612	110,778
7	Total Cash and Short Term Investments	\$629,700	\$1,775,628	\$7,003,472
8	Total Operating Expenses	\$90,685,854	\$80,117,246	\$72,076,598
9	Depreciation Expense	\$2,796,910	\$4,180,977	\$2,687,549
10	Operating Expenses less Depreciation Expense	\$87,888,944	\$75,936,269	\$69,389,049
11	<u>Days Revenue in Patient Accounts Receivable</u>	49	41	38
12	Net Patient Accounts Receivable	\$12,293,728	\$9,618,035	\$8,850,797
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$895,803	\$1,691,606	\$2,226,150
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$11,397,925	\$7,926,429	\$6,624,647
16	Total Net Patient Revenue	\$84,451,715	\$69,903,315	\$63,500,794
17	<u>Average Payment Period</u>	67	80	98
18	Total Current Liabilities	\$16,194,450	\$16,587,370	\$18,626,628
19	Total Operating Expenses	\$90,685,854	\$80,117,246	\$72,076,598
20	Depreciation Expense	\$2,796,910	\$4,180,977	\$2,687,549

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
21	Total Operating Expenses less Depreciation Expense	\$87,888,944	\$75,936,269	\$69,389,049
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	12.5	17.8	(2.2)
2	Total Net Assets	\$7,270,463	\$8,606,097	(\$1,022,209)
3	Total Assets	\$58,224,680	\$48,376,089	\$46,942,063
4	<u>Cash Flow to Total Debt Ratio</u>	6.2	(28.3)	(18.3)
5	Excess/(Deficiency) of Revenues Over Expenses	(\$1,785,767)	(\$8,876,018)	(\$7,203,734)
6	Depreciation Expense	\$2,796,910	\$4,180,977	\$2,687,549
7	Excess of Revenues Over Expenses and Depreciation Expense	\$1,011,143	(\$4,695,041)	(\$4,516,185)
8	Total Current Liabilities	\$16,194,450	\$16,587,370	\$18,626,628
9	Total Long Term Debt	\$0	\$0	\$6,000,000
10	Total Current Liabilities and Total Long Term Debt	\$16,194,450	\$16,587,370	\$24,626,628
11	<u>Long Term Debt to Capitalization Ratio</u>	-	-	120.5
12	Total Long Term Debt	\$0	\$0	\$6,000,000
13	Total Net Assets	\$7,270,463	\$8,606,097	(\$1,022,209)
14	Total Long Term Debt and Total Net Assets	\$7,270,463	\$8,606,097	\$4,977,791
15	<u>Debt Service Coverage Ratio</u>	1.1	(4.8)	(166.5)
16	Excess Revenues over Expenses	(1,785,767)	(\$8,876,018)	(\$7,203,734)
17	Interest Expense	102,151	\$34,936	\$26,961
18	Depreciation and Amortization Expense	2,796,910	\$4,180,977	\$2,687,549
19	Principal Payments	955,684	\$935,367	\$1
G.	<u>Other Financial Ratios</u>			

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
20	<u>Average Age of Plant</u>	17.4	6.7	11.4
21	Accumulated Depreciation	48,777,136	28,032,185	30,714,786
22	Depreciation and Amortization Expense	2,796,910	4,180,977	2,687,549
H. <u>Utilization Measures Summary</u>				
1	Patient Days	14,756	13,603	12,880
2	Discharges	3,580	3,348	3,121
3	ALOS	4.1	4.1	4.1
4	Staffed Beds	47	46	43
5	Available Beds	-	118	118
6	Licensed Beds	118	118	118
7	Occupancy of Staffed Beds	86.0%	81.0%	82.1%
8	Occupancy of Available Beds	34.3%	31.6%	29.9%
9	Full Time Equivalent Employees	507.0	498.6	468.0
I. <u>Hospital Gross Revenue Payer Mix Percentage</u>				
1	Non-Government Gross Revenue Payer Mix Percentage	38.8%	36.7%	34.7%
2	Medicare Gross Revenue Payer Mix Percentage	47.6%	49.2%	49.8%
3	Medicaid Gross Revenue Payer Mix Percentage	10.3%	10.2%	12.9%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
5	Uninsured Gross Revenue Payer Mix Percentage	3.0%	3.5%	2.3%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.2%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$73,575,148	\$71,542,094	\$68,383,944
9	Medicare Gross Revenue (Charges)	\$90,191,654	\$95,955,767	\$98,307,484
10	Medicaid Gross Revenue (Charges)	\$19,582,175	\$19,908,533	\$25,456,471
11	Other Medical Assistance Gross Revenue (Charges)	\$223,769	\$230,095	\$256,361
12	Uninsured Gross Revenue (Charges)	\$5,628,494	\$6,871,474	\$4,600,235
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$220,924	\$405,918	\$299,784
14	Total Gross Revenue (Charges)	\$189,422,164	\$194,913,881	\$197,304,279
J. <u>Hospital Net Revenue Payer Mix Percentage</u>				
1	Non-Government Net Revenue Payer Mix Percentage	50.0%	50.3%	45.7%
2	Medicare Net Revenue Payer Mix Percentage	42.1%	41.6%	44.0%

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
3	Medicaid Net Revenue Payer Mix Percentage	7.4%	7.7%	9.9%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
5	Uninsured Net Revenue Payer Mix Percentage	0.4%	0.1%	0.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.2%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$35,253,971	\$34,021,583	\$29,653,340
9	Medicare Net Revenue (Payments)	\$29,632,816	\$28,130,272	\$28,561,974
10	Medicaid Net Revenue (Payments)	\$5,177,495	\$5,190,292	\$6,400,006
11	Other Medical Assistance Net Revenue (Payments)	\$53,975	\$43,491	\$53,284
12	Uninsured Net Revenue (Payments)	\$249,764	\$77,593	\$190,937
13	CHAMPUS / TRICARE Net Revenue Payments)	\$71,213	\$125,128	\$84,198
14	Total Net Revenue (Payments)	\$70,439,234	\$67,588,359	\$64,943,739
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	1,240	1,068	916
2	Medicare	1,986	2,011	1,867
3	Medical Assistance	351	259	335
4	Medicaid	349	258	333
5	Other Medical Assistance	2	1	2
6	CHAMPUS / TRICARE	3	10	3
7	Uninsured (Included In Non-Government)	63	50	55
8	Total	3,580	3,348	3,121
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.33260	1.34430	1.39700
2	Medicare	1.48819	1.47660	1.47070
3	Medical Assistance	0.96735	1.20935	1.10945
4	Medicaid	0.96408	1.20690	1.11100
5	Other Medical Assistance	1.53870	1.84180	0.85140
6	CHAMPUS / TRICARE	0.57980	1.26520	1.67740
7	Uninsured (Included In Non-Government)	1.32154	0.94562	1.27420
8	Total Case Mix Index	1.38247	1.41309	1.41049
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	3,025	3,065	2,897
2	Emergency Room - Treated and Discharged	33,427	32,175	19,735
3	Total Emergency Room Visits	36,452	35,240	22,632

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$1,080,277	\$547,150	(\$533,127)	-49%
2	Inpatient Payments	\$375,784	\$102,277	(\$273,507)	-73%
3	Outpatient Charges	\$448,970	\$107,926	(\$341,044)	-76%
4	Outpatient Payments	\$129,613	\$66,237	(\$63,376)	-49%
5	Discharges	22	14	(8)	-36%
6	Patient Days	130	90	(40)	-31%
7	Outpatient Visits (Excludes ED Visits)	117	18	(99)	-85%
8	Emergency Department Outpatient Visits	55	13	(42)	-76%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,529,247	\$655,076	(\$874,171)	-57%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$505,397	\$168,514	(\$336,883)	-67%
B.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C.	CONNECTICARE, INC.				
1	Inpatient Charges	\$4,759,867	\$5,858,616	\$1,098,749	23%
2	Inpatient Payments	\$1,654,060	\$1,926,748	\$272,688	16%
3	Outpatient Charges	\$2,848,838	\$3,429,385	\$580,547	20%
4	Outpatient Payments	\$752,826	\$790,550	\$37,724	5%
5	Discharges	157	167	10	6%
6	Patient Days	624	730	106	17%
7	Outpatient Visits (Excludes ED Visits)	621	701	80	13%
8	Emergency Department Outpatient Visits	423	399	(24)	-6%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,608,705	\$9,288,001	\$1,679,296	22%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,406,886	\$2,717,298	\$310,412	13%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$11,462	\$44,041	\$32,579	284%
2	Inpatient Payments	\$7,357	\$10,367	\$3,010	41%
3	Outpatient Charges	\$9,253	\$48,202	\$38,949	421%
4	Outpatient Payments	\$1,984	\$19,110	\$17,126	863%
5	Discharges	1	2	1	100%
6	Patient Days	1	7	6	600%
7	Outpatient Visits (Excludes ED Visits)	0	2	2	0%
8	Emergency Department Outpatient Visits	6	16	10	167%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$20,715	\$92,243	\$71,528	345%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,341	\$29,477	\$20,136	216%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$8,985,384	\$7,204,601	(\$1,780,783)	-20%
2	Inpatient Payments	\$2,843,333	\$2,393,897	(\$449,436)	-16%
3	Outpatient Charges	\$4,965,074	\$4,781,236	(\$183,838)	-4%
4	Outpatient Payments	\$1,132,614	\$1,122,093	(\$10,521)	-1%
5	Discharges	290	228	(62)	-21%
6	Patient Days	1,325	882	(443)	-33%
7	Outpatient Visits (Excludes ED Visits)	1,653	1,251	(402)	-24%
8	Emergency Department Outpatient Visits	786	582	(204)	-26%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,950,458	\$11,985,837	(\$1,964,621)	-14%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,975,947	\$3,515,990	(\$459,957)	-12%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$188,918	\$225,245	\$36,327	19%
2	Inpatient Payments	\$71,625	\$65,953	(\$5,672)	-8%
3	Outpatient Charges	\$183,818	\$270,745	\$86,927	47%
4	Outpatient Payments	\$33,970	\$109,796	\$75,826	223%
5	Discharges	9	8	(1)	-11%
6	Patient Days	29	32	3	10%
7	Outpatient Visits (Excludes ED Visits)	72	174	102	142%
8	Emergency Department Outpatient Visits	47	51	4	9%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$372,736	\$495,990	\$123,254	33%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$105,595	\$175,749	\$70,154	66%
I. AETNA					
1	Inpatient Charges	\$1,755,847	\$3,626,168	\$1,870,321	107%
2	Inpatient Payments	\$583,312	\$1,208,689	\$625,377	107%
3	Outpatient Charges	\$1,463,476	\$2,221,528	\$758,052	52%
4	Outpatient Payments	\$374,481	\$476,846	\$102,365	27%
5	Discharges	55	104	49	89%
6	Patient Days	259	447	188	73%
7	Outpatient Visits (Excludes ED Visits)	507	872	365	72%
8	Emergency Department Outpatient Visits	200	227	27	14%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,219,323	\$5,847,696	\$2,628,373	82%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$957,793	\$1,685,535	\$727,742	76%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$56,566	\$57,739	\$1,173	2%
2	Inpatient Payments	\$39,214	\$16,828	(\$22,386)	-57%
3	Outpatient Charges	\$60,747	\$97,385	\$36,638	60%
4	Outpatient Payments	\$17,684	\$29,485	\$11,801	67%
5	Discharges	3	2	(1)	-33%
6	Patient Days	8	8	0	0%
7	Outpatient Visits (Excludes ED Visits)	8	10	2	25%
8	Emergency Department Outpatient Visits	15	14	(1)	-7%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$117,313	\$155,124	\$37,811	32%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$56,898	\$46,313	(\$10,585)	-19%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$16,838,321	\$17,563,560	\$725,239	4%
	TOTAL INPATIENT PAYMENTS	\$5,574,685	\$5,724,759	\$150,074	3%
	TOTAL OUTPATIENT CHARGES	\$9,980,176	\$10,956,407	\$976,231	10%
	TOTAL OUTPATIENT PAYMENTS	\$2,443,172	\$2,614,117	\$170,945	7%
	TOTAL DISCHARGES	537	525	(12)	-2%
	TOTAL PATIENT DAYS	2,376	2,196	(180)	-8%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	2,978	3,028	50	2%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	1,532	1,302	(230)	-15%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$26,818,497	\$28,519,967	\$1,701,470	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,017,857	\$8,338,876	\$321,019	4%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$1,577,197	\$0	(\$1,577,197)	-100%
2	Inpatient Payments	\$497,232	\$0	(\$497,232)	-100%
3	Outpatient Charges	\$7,648,947	\$0	(\$7,648,947)	-100%
4	Outpatient Payments	\$2,091,032	\$0	(\$2,091,032)	-100%
5	Discharges	115	0	(115)	-100%
6	Patient Days	343	0	(343)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,004	0	(1,004)	-100%
8	Emergency Department Outpatient Visits	4,944	0	(4,944)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,226,144	\$0	(\$9,226,144)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,588,264	\$0	(\$2,588,264)	-100%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**MILFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2014
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2013 ACTUAL	(4) FY 2014 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H.	AETNA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$1,577,197	\$0	(\$1,577,197)	-100%
	TOTAL INPATIENT PAYMENTS	\$497,232	\$0	(\$497,232)	-100%
	TOTAL OUTPATIENT CHARGES	\$7,648,947	\$0	(\$7,648,947)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$2,091,032	\$0	(\$2,091,032)	-100%
	TOTAL DISCHARGES	115	0	(115)	-100%
	TOTAL PATIENT DAYS	343	0	(343)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	1,004	0	(1,004)	-100%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	4,944	0	(4,944)	-100%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,226,144	\$0	(\$9,226,144)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,588,264	\$0	(\$2,588,264)	-100%

MILFORD HEALTH & MEDICAL, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. ASSETS					
A. Current Assets:					
1	Cash and Cash Equivalents	\$3,173,042	\$7,667,186	\$4,494,144	142%
2	Short Term Investments	\$112,243	\$112,417	\$174	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$10,371,729	\$9,919,854	(\$451,875)	-4%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$887,860	\$772,809	(\$115,051)	-13%
8	Prepaid Expenses	\$3,619,088	\$1,159,190	(\$2,459,898)	-68%
9	Other Current Assets	\$0	\$0	\$0	0%
	Total Current Assets	\$18,163,962	\$19,631,456	\$1,467,494	8%
B. Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$894,273	\$0	(\$894,273)	-100%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$10,914,877	\$5,169,001	(\$5,745,876)	-53%
	Total Noncurrent Assets Whose Use is Limited:	\$11,809,150	\$5,169,001	(\$6,640,149)	-56%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$4,061,602	\$5,052,099	\$990,497	24%
7	Other Noncurrent Assets	\$5,037,525	\$2,360,811	(\$2,676,714)	-53%
C. Net Fixed Assets:					
1	Property, Plant and Equipment	\$64,201,307	\$65,808,101	\$1,606,794	3%
2	Less: Accumulated Depreciation	\$28,868,914	\$31,844,774	\$2,975,860	\$0
	Property, Plant and Equipment, Net	\$35,332,393	\$33,963,327	(\$1,369,066)	-4%
3	Construction in Progress	\$0	\$0	\$0	0%
	Total Net Fixed Assets	\$35,332,393	\$33,963,327	(\$1,369,066)	-4%
	Total Assets	\$74,404,632	\$66,176,694	(\$8,227,938)	-11%

MILFORD HEALTH & MEDICAL, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. <u>LIABILITIES AND NET ASSETS</u>					
A. <u>Current Liabilities:</u>					
1	Accounts Payable and Accrued Expenses	\$5,511,378	\$7,255,878	\$1,744,500	32%
2	Salaries, Wages and Payroll Taxes	\$7,152,032	\$6,989,049	(\$162,983)	-2%
3	Due To Third Party Payers	\$1,886,925	\$2,415,370	\$528,445	28%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$133,467	\$142,366	\$8,899	7%
7	Other Current Liabilities	\$2,999,148	\$1,964,014	(\$1,035,134)	-35%
	Total Current Liabilities	\$17,682,950	\$18,766,677	\$1,083,727	6%
B. <u>Long Term Debt:</u>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$6,634,757	\$12,492,523	\$5,857,766	88%
	Total Long Term Debt	\$6,634,757	\$12,492,523	\$5,857,766	88%
3	Accrued Pension Liability	\$16,549,876	\$18,262,691	\$1,712,815	10%
4	Other Long Term Liabilities	\$15,192,808	\$10,011,117	(\$5,181,691)	-34%
	Total Long Term Liabilities	\$38,377,441	\$40,766,331	\$2,388,890	6%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. <u>Net Assets:</u>					
1	Unrestricted Net Assets or Equity	\$16,895,968	\$5,129,446	(\$11,766,522)	-70%
2	Temporarily Restricted Net Assets	\$774,510	\$840,477	\$65,967	9%
3	Permanently Restricted Net Assets	\$673,763	\$673,763	\$0	0%
	Total Net Assets	\$18,344,241	\$6,643,686	(\$11,700,555)	-64%
	Total Liabilities and Net Assets	\$74,404,632	\$66,176,694	(\$8,227,938)	-11%

MILFORD HEALTH & MEDICAL, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2013 ACTUAL</u>	<u>FY 2014 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. <u>Operating Revenue:</u>					
1	Total Gross Patient Revenue	\$202,576,756	\$204,465,712	\$1,888,956	1%
2	Less: Allowances	\$120,880,699	\$128,630,744	\$7,750,045	6%
3	Less: Charity Care	\$643,601	\$581,295	(\$62,306)	-10%
4	Less: Other Deductions	\$0	\$1,442,946	\$1,442,946	0%
	Total Net Patient Revenue	\$81,052,456	\$73,810,727	(\$7,241,729)	-9%
5	Provision for Bad Debts	\$6,520,133	\$5,785,341	(\$734,792)	-11%
	Net Patient Service Revenue less provision for bad debts	\$74,532,323	\$68,025,386	(\$6,506,937)	-9%
6	Other Operating Revenue	\$2,729,480	\$2,438,403	(\$291,077)	-11%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$77,261,803	\$70,463,789	(\$6,798,014)	-9%
B. <u>Operating Expenses:</u>					
1	Salaries and Wages	\$40,773,272	\$38,732,104	(\$2,041,168)	-5%
2	Fringe Benefits	\$12,946,476	\$10,103,835	(\$2,842,641)	-22%
3	Physicians Fees	\$722,901	\$770,256	\$47,355	7%
4	Supplies and Drugs	\$11,584,106	\$12,428,440	\$844,334	7%
5	Depreciation and Amortization	\$6,887,793	\$2,989,243	(\$3,898,550)	-57%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$468,339	\$452,267	(\$16,072)	-3%
8	Malpractice Insurance Cost	\$2,499,414	\$746,227	(\$1,753,187)	-70%
9	Other Operating Expenses	\$13,950,615	\$15,361,223	\$1,410,608	10%
	Total Operating Expenses	\$89,832,916	\$81,583,595	(\$8,249,321)	-9%
	Income/(Loss) From Operations	(\$12,571,113)	(\$11,119,806)	\$1,451,307	-12%
C. <u>Non-Operating Revenue:</u>					
1	Income from Investments	\$1,736,372	\$1,712,782	(\$23,590)	-1%
2	Gifts, Contributions and Donations	\$454,342	\$156,498	(\$297,844)	-66%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	Total Non-Operating Revenue	\$2,190,714	\$1,869,280	(\$321,434)	-15%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$10,380,399)	(\$9,250,526)	\$1,129,873	-11%
Other Adjustments:					
	Unrealized Gains/(Losses)	(\$536,330)	(\$422,199)	\$114,131	-21%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	(\$536,330)	(\$422,199)	\$114,131	-21%
	Excess/(Deficiency) of Revenue Over Expenses	(\$10,916,729)	(\$9,672,725)	\$1,244,004	-11%

MILFORD HEALTH & MEDICAL, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$89,130,320	\$74,532,323	\$68,025,386
2	Other Operating Revenue	3,585,478	2,729,480	2,438,403
3	Total Operating Revenue	\$92,715,798	\$77,261,803	\$70,463,789
4	Total Operating Expenses	98,072,081	89,832,916	81,583,595
5	Income/(Loss) From Operations	(\$5,356,283)	(\$12,571,113)	(\$11,119,806)
6	Total Non-Operating Revenue	2,793,652	1,654,384	1,447,081
7	Excess/(Deficiency) of Revenue Over Expenses	(\$2,562,631)	(\$10,916,729)	(\$9,672,725)
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-5.61%	-15.93%	-15.46%
2	Parent Corporation Non-Operating Margin	2.93%	2.10%	2.01%
3	Parent Corporation Total Margin	-2.68%	-13.83%	-13.45%
4	Income/(Loss) From Operations	(\$5,356,283)	(\$12,571,113)	(\$11,119,806)
5	Total Operating Revenue	\$92,715,798	\$77,261,803	\$70,463,789
6	Total Non-Operating Revenue	\$2,793,652	\$1,654,384	\$1,447,081
7	Total Revenue	\$95,509,450	\$78,916,187	\$71,910,870
8	Excess/(Deficiency) of Revenue Over Expenses	(\$2,562,631)	(\$10,916,729)	(\$9,672,725)
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$15,462,135	\$16,895,968	\$5,129,446
2	Parent Corporation Total Net Assets	\$16,805,339	\$18,344,241	\$6,643,686
3	Parent Corporation Change in Total Net Assets	(\$8,226,206)	\$1,538,902	(\$11,700,555)
4	Parent Corporation Change in Total Net Assets %	67.1%	9.2%	-63.8%

MILFORD HEALTH & MEDICAL, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
D. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	1.06	1.03	1.05
2	Total Current Assets	\$18,172,170	\$18,163,962	\$19,631,456
3	Total Current Liabilities	\$17,161,237	\$17,682,950	\$18,766,677
4	<u>Days Cash on Hand</u>	7	14	36
5	Cash and Cash Equivalents	\$1,579,650	\$3,173,042	\$7,667,186
6	Short Term Investments	\$226,782	\$112,243	\$112,417
7	Total Cash and Short Term Investments	\$1,806,432	\$3,285,285	\$7,779,603
8	Total Operating Expenses	\$98,072,081	\$89,832,916	\$81,583,595
9	Depreciation Expense	\$3,165,395	\$6,887,793	\$2,989,243
10	Operating Expenses less Depreciation Expense	\$94,906,686	\$82,945,123	\$78,594,352
11	<u>Days Revenue in Patient Accounts Receivable</u>	49	42	40
12	Net Patient Accounts Receivable	\$ 13,057,002	\$ 10,371,729	\$ 9,919,854
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,100,013	\$1,886,925	\$2,415,370
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 11,956,989	\$ 8,484,804	\$ 7,504,484
16	Total Net Patient Revenue	\$89,130,320	\$74,532,323	\$68,025,386
17	<u>Average Payment Period</u>	66	78	87
18	Total Current Liabilities	\$17,161,237	\$17,682,950	\$18,766,677
19	Total Operating Expenses	\$98,072,081	\$89,832,916	\$81,583,595
20	Depreciation Expense	\$3,165,395	\$6,887,793	\$2,989,243
20	Total Operating Expenses less Depreciation Expense	\$94,906,686	\$82,945,123	\$78,594,352

MILFORD HEALTH & MEDICAL, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2012	FY 2013	FY 2014
E. Solvency Measures Summary				
1	<u>Equity Financing Ratio</u>	22.3	24.7	10.0
2	Total Net Assets	\$16,805,339	\$18,344,241	\$6,643,686
3	Total Assets	\$75,494,348	\$74,404,632	\$66,176,694
4	<u>Cash Flow to Total Debt Ratio</u>	2.5	(16.6)	(21.4)
5	Excess/(Deficiency) of Revenues Over Expenses	(\$2,562,631)	(\$10,916,729)	(\$9,672,725)
6	Depreciation Expense	\$3,165,395	\$6,887,793	\$2,989,243
7	Excess of Revenues Over Expenses and Depreciation Expense	\$602,764	(\$4,028,936)	(\$6,683,482)
8	Total Current Liabilities	\$17,161,237	\$17,682,950	\$18,766,677
9	Total Long Term Debt	\$6,768,005	\$6,634,757	\$12,492,523
10	Total Current Liabilities and Total Long Term Debt	\$23,929,242	\$24,317,707	\$31,259,200
11	<u>Long Term Debt to Capitalization Ratio</u>	28.7	26.6	65.3
12	Total Long Term Debt	\$6,768,005	\$6,634,757	\$12,492,523
13	Total Net Assets	\$16,805,339	\$18,344,241	\$6,643,686
14	Total Long Term Debt and Total Net Assets	\$23,573,344	\$24,978,998	\$19,136,209

MILFORD HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2014								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
LINE	DESCRIPTION	PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
1	Adult Medical/Surgical	10,579	2,860	2,865	29	78	99.9%	37.2%
2	ICU/CCU (Excludes Neonatal ICU)	1,544	475	0	6	10	70.5%	42.3%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0	0	0	0	0	0.0%	0.0%
	TOTAL PSYCHIATRIC	0	0	0	0	0	0.0%	0.0%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	403	134	135	4	12	27.6%	9.2%
7	Newborn	354	127	127	4	12	24.2%	8.1%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	6	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	12,526	2,994	3,000	39	106	88.0%	32.4%
	TOTAL INPATIENT BED UTILIZATION	12,880	3,121	3,127	43	118	82.1%	29.9%
	TOTAL INPATIENT REPORTED YEAR	12,880	3,121	3,127	43	118	82.1%	29.9%
	TOTAL INPATIENT PRIOR YEAR	13,603	3,348	3,351	46	118	81.0%	31.6%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-723	-227	-224	-3	0	1.0%	-1.7%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-5%	-7%	-7%	-7%	0%	1%	-5%
	Total Licensed Beds and Bassinets	118						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	611	490	-121	-20%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,498	1,325	-173	-12%
3	Emergency Department Scans	6,160	6,301	141	2%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	8,269	8,116	-153	-2%
B. MRI Scans (A)					
1	Inpatient Scans	192	140	-52	-27%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,717	1,468	-249	-15%
3	Emergency Department Scans	105	183	78	74%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	2,014	1,791	-223	-11%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	57	58	1	2%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	57	58	1	2%
D. PET/CT Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	1,081	1,062	-19	-2%
2	Outpatient Surgical Procedures	1,836	1,748	-88	-5%
	Total Surgical Procedures	2,917	2,810	-107	-4%
J. Endoscopy Procedures					

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Endoscopy Procedures	236	286	50	21%
2	Outpatient Endoscopy Procedures	1,659	1,645	-14	-1%
	Total Endoscopy Procedures	1,895	1,931	36	2%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	3,065	2,897	-168	-5%
2	Emergency Room Visits: Treated and Discharged	32,175	19,735	-12,440	-39%
	Total Emergency Room Visits	35,240	22,632	-12,608	-36%
L. Hospital Clinic Visits					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	11,264	11,264	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0%
	Total Hospital Clinic Visits	0	11,264	11,264	0%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	0	0	0	0%
2	Cardiac Rehabilitation	0	0	0	0%
3	Chemotherapy	0	0	0	0%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	21,955	22,170	215	1%
	Total Other Hospital Outpatient Visits	21,955	22,170	215	1%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	170.7	195.0	24.3	14%
2	Total Physician FTEs	20.6	13.0	-7.6	-37%
3	Total Non-Nursing and Non-Physician FTEs	307.3	260.0	-47.3	-15%
	Total Hospital Full Time Equivalent Employees	498.6	468.0	-30.6	-6%

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2013</u>	<u>ACTUAL FY 2014</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. Outpatient Surgical Procedures					
1	Milford Hospital	1,836	1,748	-88	-5%
	Total Outpatient Surgical Procedures(A)	1,836	1,748	-88	-5%
B. Outpatient Endoscopy Procedures					
1	Milford Hospital	1,659	1,645	-14	-1%
	Total Outpatient Endoscopy Procedures(B)	1,659	1,645	-14	-1%
C. Outpatient Hospital Emergency Room Visits					
1	MilfHospBostonPostRd WalkIn Ctr	12,199	0	-12,199	-100%
2	Milford Hospital	19,976	19,735	-241	-1%
	Total Outpatient Hospital Emergency Room Visits(C)	32,175	19,735	-12,440	-39%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$64,511,512	\$63,576,740	(\$934,772)	-1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$20,627,247	\$20,112,609	(\$514,638)	-2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.97%	31.64%	-0.34%	-1%
4	DISCHARGES	2,011	1,867	(144)	-7%
5	CASE MIX INDEX (CMI)	1.47660	1.47070	(0.00590)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,969.44260	2,745.79690	(223.64570)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,946.50	\$7,324.87	\$378.37	5%
8	PATIENT DAYS	9,202	8,231	(971)	-11%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,241.60	\$2,443.52	\$201.91	9%
10	AVERAGE LENGTH OF STAY	4.6	4.4	(0.2)	-4%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$31,444,255	\$34,730,744	\$3,286,489	10%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,503,025	\$8,449,365	\$946,340	13%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.86%	24.33%	0.47%	2%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	48.74%	54.63%	5.89%	12%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	980.20330	1,019.90601	39.70271	4%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,654.56	\$8,284.45	\$629.89	8%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$95,955,767	\$98,307,484	\$2,351,717	2%
18	TOTAL ACCRUED PAYMENTS	\$28,130,272	\$28,561,974	\$431,702	2%
19	TOTAL ALLOWANCES	\$67,825,495	\$69,745,510	\$1,920,015	3%

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
<u>NON-GOVERNMENT INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$28,238,434	\$26,989,492	(\$1,248,942)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,445,409	\$10,646,730	(\$1,798,679)	-14%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	44.07%	39.45%	-4.62%	-10%
4	DISCHARGES	1,068	916	(152)	-14%
5	CASE MIX INDEX (CMI)	1.34430	1.39700	0.05270	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,435.71240	1,279.65200	(156.06040)	-11%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,668.46	\$8,320.02	(\$348.44)	-4%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,721.95)	(\$995.15)	\$726.80	-42%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,472,226)	(\$1,273,444)	\$1,198,782	-48%
10	PATIENT DAYS	3,457	3,068	(389)	-11%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,600.06	\$3,470.25	(\$129.81)	-4%
12	AVERAGE LENGTH OF STAY	3.2	3.3	0.1	3%
<u>NON-GOVERNMENT OUTPATIENT</u>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$50,175,134	\$45,994,687	(\$4,180,447)	-8%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$21,653,767	\$19,197,547	(\$2,456,220)	-11%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	43.16%	41.74%	-1.42%	-3%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	177.68%	170.42%	-7.27%	-4%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,897.66342	1,561.01987	(336.64355)	-18%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$11,410.75	\$12,298.08	\$887.33	8%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$3,756.19)	(\$4,013.63)	(\$257.43)	7%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$7,127,988)	(\$6,265,349)	\$862,640	-12%
<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>					
21	TOTAL ACCRUED CHARGES	\$78,413,568	\$72,984,179	(\$5,429,389)	-7%
22	TOTAL ACCRUED PAYMENTS	\$34,099,176	\$29,844,277	(\$4,254,899)	-12%
23	TOTAL ALLOWANCES	\$44,314,392	\$43,139,902	(\$1,174,490)	-3%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$9,600,214)	(\$7,538,793)	\$2,061,422	-21%
<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$68,766,683	\$66,221,864	(\$2,544,819)	-4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$25,786,529	\$33,792,844	\$8,006,315	31%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$42,980,154	\$32,429,020	(\$10,551,134)	-25%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	62.50%	48.97%	-13.53%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
C.	<u>UNINSURED</u>				
	<u>UNINSURED INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$1,363,537	\$1,574,728	\$211,191	15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,362	\$56,740	\$42,378	295%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.05%	3.60%	2.55%	242%
4	DISCHARGES	50	55	5	10%
5	CASE MIX INDEX (CMI)	0.94562	1.27420	0.32858	35%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	47.28100	70.08100	22.80000	48%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$303.76	\$809.63	\$505.88	167%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,364.70	\$7,510.39	(\$854.31)	-10%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,642.75	\$6,515.24	(\$127.51)	-2%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$314,076	\$456,594	\$142,519	45%
11	PATIENT DAYS	175	244	69	39%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$82.07	\$232.54	\$150.47	183%
13	AVERAGE LENGTH OF STAY	3.5	4.4	0.9	27%
	<u>UNINSURED OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,507,937	\$3,025,507	(\$2,482,430)	-45%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$63,231	\$134,197	\$70,966	112%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	1.15%	4.44%	3.29%	286%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	403.94%	192.13%	-211.82%	-52%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	201.97241	105.67087	(96.30153)	-48%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$313.07	\$1,269.95	\$956.89	306%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$11,097.68	\$11,028.13	(\$69.56)	-1%
21	MEDICARE - UNINSURED OP PMT / OPED	\$7,341.49	\$7,014.50	(\$326.99)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,482,779	\$741,229	(\$741,550)	-50%
	<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$6,871,474	\$4,600,235	(\$2,271,239)	-33%
24	TOTAL ACCRUED PAYMENTS	\$77,593	\$190,937	\$113,344	146%
25	TOTAL ALLOWANCES	\$6,793,881	\$4,409,298	(\$2,384,583)	-35%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,796,855	\$1,197,823	(\$599,032)	-33%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
<u>MEDICAID INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$5,224,360	\$8,491,118	\$3,266,758	63%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,168,773	\$1,668,745	\$499,972	43%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.37%	19.65%	-2.72%	-12%
4	DISCHARGES	258	333	75	29%
5	CASE MIX INDEX (CMI)	1.20690	1.11100	(0.09590)	-8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	311.38020	369.96300	58.58280	19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,753.52	\$4,510.57	\$757.05	20%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$4,914.93	\$3,809.45	(\$1,105.48)	-22%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,192.98	\$2,814.30	(\$378.68)	-12%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$994,231	\$1,041,186	\$46,955	5%
11	PATIENT DAYS	911	1,559	648	71%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,282.96	\$1,070.39	(\$212.56)	-17%
13	AVERAGE LENGTH OF STAY	3.5	4.7	1.2	33%
<u>MEDICAID OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,684,173	\$16,965,353	\$2,281,180	16%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$4,021,519	\$4,731,261	\$709,742	18%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.39%	27.89%	0.50%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	281.07%	199.80%	-81.27%	-29%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	725.16378	665.33789	(59.82589)	-8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,545.67	\$7,111.07	\$1,565.40	28%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,865.08	\$5,187.01	(\$678.07)	-12%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,108.89	\$1,173.39	(\$935.50)	-44%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,529,291	\$780,701	(\$748,590)	-49%
<u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$19,908,533	\$25,456,471	\$5,547,938	28%
24	TOTAL ACCRUED PAYMENTS	\$5,190,292	\$6,400,006	\$1,209,714	23%
25	TOTAL ALLOWANCES	\$14,718,241	\$19,056,465	\$4,338,224	29%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,523,522	\$1,821,887	(\$701,635)	-28%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
E.	<u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u>				
	<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$31,334	\$72,804	\$41,470	132%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,063	\$18,590	\$12,527	207%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	19.35%	25.53%	6.18%	32%
4	DISCHARGES	1	2	1	100%
5	CASE MIX INDEX (CMI)	1.84180	0.85140	(0.99040)	-54%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1.84180	1.70280	(0.13900)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,291.89	\$10,917.31	\$7,625.42	232%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$5,376.57	(\$2,597.29)	(\$7,973.86)	-148%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$3,654.62	(\$3,592.44)	(\$7,247.06)	-198%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,731	(\$6,117)	(\$12,848)	-191%
11	PATIENT DAYS	6	16	10	167%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,010.50	\$1,161.88	\$151.38	15%
13	AVERAGE LENGTH OF STAY	6.0	8.0	2.0	33%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$198,761	\$183,557	(\$15,204)	-8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$37,428	\$34,694	(\$2,734)	-7%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.83%	18.90%	0.07%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	634.33%	252.12%	-382.21%	-60%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6.34330	5.04250	(1.30080)	-21%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,900.40	\$6,880.32	\$979.92	17%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$5,510.35	\$5,417.76	(\$92.60)	-2%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$1,754.16	\$1,404.13	(\$350.03)	-20%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,127	\$7,080	(\$4,047)	-36%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$230,095	\$256,361	\$26,266	11%
24	TOTAL ACCRUED PAYMENTS	\$43,491	\$53,284	\$9,793	23%
25	TOTAL ALLOWANCES	\$186,604	\$203,077	\$16,473	9%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$17,858	\$963	(\$16,895)	-95%

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$5,255,694	\$8,563,922	\$3,308,228	63%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,174,836	\$1,687,335	\$512,499	44%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.35%	19.70%	-2.65%	-12%
4	DISCHARGES	259	335	76	29%
5	CASE MIX INDEX (CMI)	1.20935	1.10945	(0.09990)	-8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	313.22200	371.66580	58.44380	19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,750.81	\$4,539.93	\$789.12	21%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,917.65	\$3,780.09	(\$1,137.55)	-23%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,195.70	\$2,784.95	(\$410.75)	-13%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,000,962	\$1,035,069	\$34,107	3%
11	PATIENT DAYS	917	1,575	658	72%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,281.17	\$1,071.32	(\$209.85)	-16%
13	AVERAGE LENGTH OF STAY	3.5	4.7	1.2	33%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,882,934	\$17,148,910	\$2,265,976	15%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$4,058,947	\$4,765,955	\$707,008	17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.27%	27.79%	0.52%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	283.18%	200.25%	-82.93%	-29%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	731.50708	670.38039	(61.12669)	-8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,548.75	\$7,109.33	\$1,560.58	28%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,862.01	\$5,188.75	(\$673.26)	-11%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,105.81	\$1,175.13	(\$930.69)	-44%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,540,418	\$787,781	(\$752,637)	-49%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$20,138,628	\$25,712,832	\$5,574,204	28%
24	TOTAL ACCRUED PAYMENTS	\$5,233,783	\$6,453,290	\$1,219,507	23%
25	TOTAL ALLOWANCES	\$14,904,845	\$19,259,542	\$4,354,697	29%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2013	FY 2014	DIFFERENCE	DIFFERENCE
G. <u>CHAMPUS / TRICARE</u>					
<u>CHAMPUS / TRICARE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$174,774	\$119,348	(\$55,426)	-32%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$63,596	\$33,114	(\$30,482)	-48%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.39%	27.75%	-8.64%	-24%
4	DISCHARGES	10	3	(7)	-70%
5	CASE MIX INDEX (CMI)	1.26520	1.67740	0.41220	33%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	12.65200	5.03220	(7.61980)	-60%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,026.56	\$6,580.42	\$1,553.87	31%
8	PATIENT DAYS	27	6	(21)	-78%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,355.41	\$5,519.00	\$3,163.59	134%
10	AVERAGE LENGTH OF STAY	2.7	2.0	(0.7)	-26%
<u>CHAMPUS / TRICARE OUTPATIENT</u>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$231,144	\$180,436	(\$50,708)	-22%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$61,532	\$51,084	(\$10,448)	-17%
<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>					
13	TOTAL ACCRUED CHARGES	\$405,918	\$299,784	(\$106,134)	-26%
14	TOTAL ACCRUED PAYMENTS	\$125,128	\$84,198	(\$40,930)	-33%
15	TOTAL ALLOWANCES	\$280,790	\$215,586	(\$65,204)	-23%
H. <u>OTHER DATA</u>					
1	OTHER OPERATING REVENUE	\$1,449,445	\$1,352,459	(\$96,986)	-7%
2	TOTAL OPERATING EXPENSES	\$80,117,246	\$72,076,598	(\$8,040,648)	-10%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u>					
4	CHARITY CARE (CHARGES)	\$643,601	\$579,795	(\$63,806)	-10%
5	BAD DEBTS (CHARGES)	\$6,456,481	\$5,608,309	(\$848,172)	-13%
6	UNCOMPENSATED CARE (CHARGES)	\$7,100,082	\$6,188,104	(\$911,978)	-13%
7	COST OF UNCOMPENSATED CARE	\$2,192,238	\$2,110,886	(\$81,352)	-4%
<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>					
8	TOTAL ACCRUED CHARGES	\$20,138,628	\$25,712,832	\$5,574,204	28%
9	TOTAL ACCRUED PAYMENTS	\$5,233,783	\$6,453,290	\$1,219,507	23%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$6,218,051	\$8,771,161	\$2,553,110	41%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$984,268	\$2,317,871	\$1,333,603	135%

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$98,180,414	\$99,249,502	\$1,069,088	1%
2	TOTAL INPATIENT PAYMENTS	\$34,311,088	\$32,479,788	(\$1,831,300)	-5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	34.95%	32.73%	-2.22%	-6%
4	TOTAL DISCHARGES	3,348	3,121	(227)	-7%
5	TOTAL CASE MIX INDEX	1.41309	1.41049	(0.00260)	0%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	4,731.02900	4,402.14690	(328.88210)	-7%
7	TOTAL OUTPATIENT CHARGES	\$96,733,467	\$98,054,777	\$1,321,310	1%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	98.53%	98.80%	0.27%	0%
9	TOTAL OUTPATIENT PAYMENTS	\$33,277,271	\$32,463,951	(\$813,320)	-2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	34.40%	33.11%	-1.29%	-4%
11	TOTAL CHARGES	\$194,913,881	\$197,304,279	\$2,390,398	1%
12	TOTAL PAYMENTS	\$67,588,359	\$64,943,739	(\$2,644,620)	-4%
13	TOTAL PAYMENTS / TOTAL CHARGES	34.68%	32.92%	-1.76%	-5%
14	PATIENT DAYS	13,603	12,880	(723)	-5%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$69,941,980	\$72,260,010	\$2,318,030	3%
2	INPATIENT PAYMENTS	\$21,865,679	\$21,833,058	(\$32,621)	0%
3	GOVT. INPATIENT PAYMENTS / CHARGES	31.26%	30.21%	-1.05%	-3%
4	DISCHARGES	2,280	2,205	(75)	-3%
5	CASE MIX INDEX	1.44531	1.41610	(0.02922)	-2%
6	CASE MIX ADJUSTED DISCHARGES	3,295.31660	3,122.49490	(172.82170)	-5%
7	OUTPATIENT CHARGES	\$46,558,333	\$52,060,090	\$5,501,757	12%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	66.57%	72.05%	5.48%	8%
9	OUTPATIENT PAYMENTS	\$11,623,504	\$13,266,404	\$1,642,900	14%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.97%	25.48%	0.52%	2%
11	TOTAL CHARGES	\$116,500,313	\$124,320,100	\$7,819,787	7%
12	TOTAL PAYMENTS	\$33,489,183	\$35,099,462	\$1,610,279	5%
13	TOTAL PAYMENTS / CHARGES	28.75%	28.23%	-0.51%	-2%
14	PATIENT DAYS	10,146	9,812	(334)	-3%
15	TOTAL GOVERNMENT DEDUCTIONS	\$83,011,130	\$89,220,638	\$6,209,508	7%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.6	4.4	(0.2)	-4%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.3	0.1	3%
3	UNINSURED	3.5	4.4	0.9	27%
4	MEDICAID	3.5	4.7	1.2	33%
5	OTHER MEDICAL ASSISTANCE	6.0	8.0	2.0	33%
6	CHAMPUS / TRICARE	2.7	2.0	(0.7)	-26%
7	TOTAL AVERAGE LENGTH OF STAY	4.1	4.1	0.1	2%

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$194,913,881	\$197,304,279	\$2,390,398	1%
2	TOTAL GOVERNMENT DEDUCTIONS	\$83,011,130	\$89,220,638	\$6,209,508	7%
3	UNCOMPENSATED CARE	\$7,100,082	\$6,188,104	(\$911,978)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$42,980,154	\$32,429,020	(\$10,551,134)	-25%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,640,438	\$2,162,080	\$521,642	32%
6	TOTAL ADJUSTMENTS	\$134,731,804	\$129,999,842	(\$4,731,962)	-4%
7	TOTAL ACCRUED PAYMENTS	\$60,182,077	\$67,304,437	\$7,122,360	12%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$60,182,077	\$67,304,437	\$7,122,360	12%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3087623965	0.3411200068	0.0323576104	10%
11	COST OF UNCOMPENSATED CARE	\$2,192,238	\$2,110,886	(\$81,352)	-4%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$984,268	\$2,317,871	\$1,333,603	135%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,176,506	\$4,428,758	\$1,252,251	39%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$1,529,291	\$780,701	(\$748,590)	-49%
2	OTHER MEDICAL ASSISTANCE	\$17,858	\$963	(\$16,895)	-95%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,796,855	\$1,197,823	(\$599,032)	-33%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,344,004	\$1,979,487	(\$1,364,517)	-41%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,775,412	\$2,162,080	(\$613,332)	-22.10%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$2,314,956	(\$1,442,946)	(\$3,757,902)	-162.33%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$69,903,315	\$63,500,794	(\$6,402,521)	-9.16%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$194,913,879	\$197,304,279	\$2,390,400	1.23%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$7,100,082	\$6,188,104	(\$911,978)	-12.84%

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$28,238,434	\$26,989,492	(\$1,248,942)
2	MEDICARE	\$64,511,512	63,576,740	(\$934,772)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,255,694	8,563,922	\$3,308,228
4	MEDICAID	\$5,224,360	8,491,118	\$3,266,758
5	OTHER MEDICAL ASSISTANCE	\$31,334	72,804	\$41,470
6	CHAMPUS / TRICARE	\$174,774	119,348	(\$55,426)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,363,537	1,574,728	\$211,191
	TOTAL INPATIENT GOVERNMENT CHARGES	\$69,941,980	\$72,260,010	\$2,318,030
	TOTAL INPATIENT CHARGES	\$98,180,414	\$99,249,502	\$1,069,088
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$50,175,134	\$45,994,687	(\$4,180,447)
2	MEDICARE	\$31,444,255	34,730,744	\$3,286,489
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,882,934	17,148,910	\$2,265,976
4	MEDICAID	\$14,684,173	16,965,353	\$2,281,180
5	OTHER MEDICAL ASSISTANCE	\$198,761	183,557	(\$15,204)
6	CHAMPUS / TRICARE	\$231,144	180,436	(\$50,708)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,507,937	3,025,507	(\$2,482,430)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$46,558,333	\$52,060,090	\$5,501,757
	TOTAL OUTPATIENT CHARGES	\$96,733,467	\$98,054,777	\$1,321,310
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$78,413,568	\$72,984,179	(\$5,429,389)
2	TOTAL MEDICARE	\$95,955,767	\$98,307,484	\$2,351,717
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,138,628	\$25,712,832	\$5,574,204
4	TOTAL MEDICAID	\$19,908,533	\$25,456,471	\$5,547,938
5	TOTAL OTHER MEDICAL ASSISTANCE	\$230,095	\$256,361	\$26,266
6	TOTAL CHAMPUS / TRICARE	\$405,918	\$299,784	(\$106,134)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,871,474	\$4,600,235	(\$2,271,239)
	TOTAL GOVERNMENT CHARGES	\$116,500,313	\$124,320,100	\$7,819,787
	TOTAL CHARGES	\$194,913,881	\$197,304,279	\$2,390,398
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,445,409	\$10,646,730	(\$1,798,679)
2	MEDICARE	\$20,627,247	20,112,609	(\$514,638)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,174,836	1,687,335	\$512,499
4	MEDICAID	\$1,168,773	1,668,745	\$499,972
5	OTHER MEDICAL ASSISTANCE	\$6,063	18,590	\$12,527
6	CHAMPUS / TRICARE	\$63,596	33,114	(\$30,482)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$14,362	56,740	\$42,378
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$21,865,679	\$21,833,058	(\$32,621)
	TOTAL INPATIENT PAYMENTS	\$34,311,088	\$32,479,788	(\$1,831,300)
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$21,653,767	\$19,197,547	(\$2,456,220)
2	MEDICARE	\$7,503,025	8,449,365	\$946,340
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,058,947	4,765,955	\$707,008
4	MEDICAID	\$4,021,519	4,731,261	\$709,742
5	OTHER MEDICAL ASSISTANCE	\$37,428	34,694	(\$2,734)
6	CHAMPUS / TRICARE	\$61,532	51,084	(\$10,448)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$63,231	134,197	\$70,966
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$11,623,504	\$13,266,404	\$1,642,900
	TOTAL OUTPATIENT PAYMENTS	\$33,277,271	\$32,463,951	(\$813,320)
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$34,099,176	\$29,844,277	(\$4,254,899)
2	TOTAL MEDICARE	\$28,130,272	\$28,561,974	\$431,702
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,233,783	\$6,453,290	\$1,219,507
4	TOTAL MEDICAID	\$5,190,292	\$6,400,006	\$1,209,714
5	TOTAL OTHER MEDICAL ASSISTANCE	\$43,491	\$53,284	\$9,793
6	TOTAL CHAMPUS / TRICARE	\$125,128	\$84,198	(\$40,930)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$77,593	\$190,937	\$113,344
	TOTAL GOVERNMENT PAYMENTS	\$33,489,183	\$35,099,462	\$1,610,279
	TOTAL PAYMENTS	\$67,588,359	\$64,943,739	(\$2,644,620)

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.49%	13.68%	-0.81%
2	MEDICARE	33.10%	32.22%	-0.87%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.70%	4.34%	1.64%
4	MEDICAID	2.68%	4.30%	1.62%
5	OTHER MEDICAL ASSISTANCE	0.02%	0.04%	0.02%
6	CHAMPUS / TRICARE	0.09%	0.06%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.70%	0.80%	0.10%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	35.88%	36.62%	0.74%
	TOTAL INPATIENT PAYER MIX	50.37%	50.30%	-0.07%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.74%	23.31%	-2.43%
2	MEDICARE	16.13%	17.60%	1.47%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.64%	8.69%	1.06%
4	MEDICAID	7.53%	8.60%	1.06%
5	OTHER MEDICAL ASSISTANCE	0.10%	0.09%	-0.01%
6	CHAMPUS / TRICARE	0.12%	0.09%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.83%	1.53%	-1.29%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	23.89%	26.39%	2.50%
	TOTAL OUTPATIENT PAYER MIX	49.63%	49.70%	0.07%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.41%	16.39%	-2.02%
2	MEDICARE	30.52%	30.97%	0.45%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.74%	2.60%	0.86%
4	MEDICAID	1.73%	2.57%	0.84%
5	OTHER MEDICAL ASSISTANCE	0.01%	0.03%	0.02%
6	CHAMPUS / TRICARE	0.09%	0.05%	-0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.02%	0.09%	0.07%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.35%	33.62%	1.27%
	TOTAL INPATIENT PAYER MIX	50.76%	50.01%	-0.75%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32.04%	29.56%	-2.48%
2	MEDICARE	11.10%	13.01%	1.91%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.01%	7.34%	1.33%
4	MEDICAID	5.95%	7.29%	1.34%
5	OTHER MEDICAL ASSISTANCE	0.06%	0.05%	0.00%
6	CHAMPUS / TRICARE	0.09%	0.08%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.09%	0.21%	0.11%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	17.20%	20.43%	3.23%
	TOTAL OUTPATIENT PAYER MIX	49.24%	49.99%	0.75%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,068	916	(152)
2	MEDICARE	2,011	1,867	(144)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	259	335	76
4	MEDICAID	258	333	75
5	OTHER MEDICAL ASSISTANCE	1	2	1
6	CHAMPUS / TRICARE	10	3	(7)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	50	55	5
	TOTAL GOVERNMENT DISCHARGES	2,280	2,205	(75)
	TOTAL DISCHARGES	3,348	3,121	(227)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3,457	3,068	(389)
2	MEDICARE	9,202	8,231	(971)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	917	1,575	658
4	MEDICAID	911	1,559	648
5	OTHER MEDICAL ASSISTANCE	6	16	10
6	CHAMPUS / TRICARE	27	6	(21)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	175	244	69
	TOTAL GOVERNMENT PATIENT DAYS	10,146	9,812	(334)
	TOTAL PATIENT DAYS	13,603	12,880	(723)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.2	3.3	0.1
2	MEDICARE	4.6	4.4	(0.2)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.5	4.7	1.2
4	MEDICAID	3.5	4.7	1.2
5	OTHER MEDICAL ASSISTANCE	6.0	8.0	2.0
6	CHAMPUS / TRICARE	2.7	2.0	(0.7)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.5	4.4	0.9
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.5	4.4	(0.0)
	TOTAL AVERAGE LENGTH OF STAY	4.1	4.1	0.1
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,34430	1,39700	0.05270
2	MEDICARE	1,47660	1,47070	(0.00590)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,20935	1,10945	(0.09990)
4	MEDICAID	1,20690	1,11100	(0.09590)
5	OTHER MEDICAL ASSISTANCE	1,84180	0,85140	(0.99040)
6	CHAMPUS / TRICARE	1,26520	1,67740	0.41220
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0,94562	1,27420	0.32858
	TOTAL GOVERNMENT CASE MIX INDEX	1,44531	1,41610	(0.02922)
	TOTAL CASE MIX INDEX	1,41309	1,41049	(0.00260)
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,766,683	\$66,221,864	(\$2,544,819)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$25,786,529	\$33,792,844	\$8,006,315
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$42,980,154	\$32,429,020	(\$10,551,134)
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	62.50%	48.97%	-13.53%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,775,412	\$2,162,080	(\$613,332)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,640,438	\$2,162,080	\$521,642
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$643,601	\$579,795	(\$63,806)
9	BAD DEBTS	\$6,456,481	\$5,608,309	(\$848,172)
10	TOTAL UNCOMPENSATED CARE	\$7,100,082	\$6,188,104	(\$911,978)
11	TOTAL OTHER OPERATING REVENUE	\$1,449,445	\$1,352,459	(\$96,986)
12	TOTAL OPERATING EXPENSES	\$80,117,246	\$72,076,598	(\$8,040,648)

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,435.71240	1,279.65200	(156.06040)
2	MEDICARE	2,969.44260	2,745.79690	(223.64570)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	313.22200	371.66580	58.44380
4	MEDICAID	311.38020	369.96300	58.58280
5	OTHER MEDICAL ASSISTANCE	1.84180	1.70280	(0.13900)
6	CHAMPUS / TRICARE	12.65200	5.03220	(7.61980)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	47.28100	70.08100	22.80000
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	3,295.31660	3,122.49490	(172.82170)
	TOTAL CASE MIX ADJUSTED DISCHARGES	4,731.02900	4,402.14690	(328.88210)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,897.66342	1,561.01987	-336.64355
2	MEDICARE	980.20330	1,019.90601	39.70271
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	731.50708	670.38039	-61.12669
4	MEDICAID	725.16378	665.33789	-59.82589
5	OTHER MEDICAL ASSISTANCE	6.34330	5.04250	-1.30080
6	CHAMPUS / TRICARE	13.22531	4.53554	-8.68976
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	201.97241	105.67087	-96.30153
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	1,724.93568	1,694.82194	-30.11375
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	3,622.59910	3,255.84181	-366.75729
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,668.46	\$8,320.02	(\$348.44)
2	MEDICARE	\$6,946.50	\$7,324.87	\$378.37
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,750.81	\$4,539.93	\$789.12
4	MEDICAID	\$3,753.52	\$4,510.57	\$757.05
5	OTHER MEDICAL ASSISTANCE	\$3,291.89	\$10,917.31	\$7,625.42
6	CHAMPUS / TRICARE	\$5,026.56	\$6,580.42	\$1,553.87
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$303.76	\$809.63	\$505.88
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,635.38	\$6,992.18	\$356.80
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,252.35	\$7,378.17	\$125.82
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,410.75	\$12,298.08	\$887.33
2	MEDICARE	\$7,654.56	\$8,284.45	\$629.89
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,548.75	\$7,109.33	\$1,560.58
4	MEDICAID	\$5,545.67	\$7,111.07	\$1,565.40
5	OTHER MEDICAL ASSISTANCE	\$5,900.40	\$6,880.32	\$979.92
6	CHAMPUS / TRICARE	\$4,652.59	\$11,263.04	\$6,610.44
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$313.07	\$1,269.95	\$956.89
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,738.51	\$7,827.61	\$1,089.09
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,186.02	\$9,970.99	\$784.96

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$1,529,291	\$780,701	(\$748,590)
2	OTHER MEDICAL ASSISTANCE	\$17,858	\$963	(\$16,895)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,796,855	\$1,197,823	(\$599,032)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$3,344,004	\$1,979,487	(\$1,364,517)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$194,913,881	\$197,304,279	\$2,390,398
2	TOTAL GOVERNMENT DEDUCTIONS	\$83,011,130	\$89,220,638	\$6,209,508
3	UNCOMPENSATED CARE	\$7,100,082	\$6,188,104	(\$911,978)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$42,980,154	\$32,429,020	(\$10,551,134)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,640,438	\$2,162,080	\$521,642
6	TOTAL ADJUSTMENTS	\$134,731,804	\$129,999,842	(\$4,731,962)
7	TOTAL ACCRUED PAYMENTS	\$60,182,077	\$67,304,437	\$7,122,360
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$60,182,077	\$67,304,437	\$7,122,360
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3087623965	0.3411200068	0.0323576104
11	COST OF UNCOMPENSATED CARE	\$2,192,238	\$2,110,886	(\$81,352)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$984,268	\$2,317,871	\$1,333,603
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$3,176,506	\$4,428,758	\$1,252,251
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	44.07%	39.45%	-4.62%
2	MEDICARE	31.97%	31.64%	-0.34%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	22.35%	19.70%	-2.65%
4	MEDICAID	22.37%	19.65%	-2.72%
5	OTHER MEDICAL ASSISTANCE	19.35%	25.53%	6.18%
6	CHAMPUS / TRICARE	36.39%	27.75%	-8.64%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.05%	3.60%	2.55%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	31.26%	30.21%	-1.05%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	34.95%	32.73%	-2.22%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	43.16%	41.74%	-1.42%
2	MEDICARE	23.86%	24.33%	0.47%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.27%	27.79%	0.52%
4	MEDICAID	27.39%	27.89%	0.50%
5	OTHER MEDICAL ASSISTANCE	18.83%	18.90%	0.07%
6	CHAMPUS / TRICARE	26.62%	28.31%	1.69%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.15%	4.44%	3.29%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	24.97%	25.48%	0.52%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	34.40%	33.11%	-1.29%

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$67,588,359	\$64,943,739	(\$2,644,620)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$67,588,359	\$64,943,739	(\$2,644,620)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,314,956	(\$1,442,946)	(\$3,757,902)
4	CALCULATED NET REVENUE	\$77,494,770	\$63,500,793	(\$13,993,977)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$69,903,315	\$63,500,794	(\$6,402,521)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$7,591,455	(\$1)	(\$7,591,456)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$194,913,881	\$197,304,279	\$2,390,398
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$194,913,881	\$197,304,279	\$2,390,398
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$194,913,879	\$197,304,279	\$2,390,400
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$2	\$0	(\$2)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,100,082	\$6,188,104	(\$911,978)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,100,082	\$6,188,104	(\$911,978)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,100,082	\$6,188,104	(\$911,978)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

MILFORD HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$26,989,492
2	MEDICARE	63,576,740
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,563,922
4	MEDICAID	8,491,118
5	OTHER MEDICAL ASSISTANCE	72,804
6	CHAMPUS / TRICARE	119,348
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,574,728
	TOTAL INPATIENT GOVERNMENT CHARGES	\$72,260,010
	TOTAL INPATIENT CHARGES	\$99,249,502
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$45,994,687
2	MEDICARE	34,730,744
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,148,910
4	MEDICAID	16,965,353
5	OTHER MEDICAL ASSISTANCE	183,557
6	CHAMPUS / TRICARE	180,436
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,025,507
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$52,060,090
	TOTAL OUTPATIENT CHARGES	\$98,054,777
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$72,984,179
2	TOTAL GOVERNMENT ACCRUED CHARGES	124,320,100
	TOTAL ACCRUED CHARGES	\$197,304,279
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$10,646,730
2	MEDICARE	20,112,609
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,687,335
4	MEDICAID	1,668,745
5	OTHER MEDICAL ASSISTANCE	18,590
6	CHAMPUS / TRICARE	33,114
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	56,740
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$21,833,058
	TOTAL INPATIENT PAYMENTS	\$32,479,788
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$19,197,547
2	MEDICARE	8,449,365
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,765,955
4	MEDICAID	4,731,261
5	OTHER MEDICAL ASSISTANCE	34,694
6	CHAMPUS / TRICARE	51,084
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	134,197
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$13,266,404
	TOTAL OUTPATIENT PAYMENTS	\$32,463,951
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$29,844,277
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	35,099,462
	TOTAL ACCRUED PAYMENTS	\$64,943,739

MILFORD HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	916
2	MEDICARE	1,867
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	335
4	MEDICAID	333
5	OTHER MEDICAL ASSISTANCE	2
6	CHAMPUS / TRICARE	3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	55
	TOTAL GOVERNMENT DISCHARGES	2,205
	TOTAL DISCHARGES	3,121
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,39700
2	MEDICARE	1,47070
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,10945
4	MEDICAID	1,11100
5	OTHER MEDICAL ASSISTANCE	0,85140
6	CHAMPUS / TRICARE	1,67740
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,27420
	TOTAL GOVERNMENT CASE MIX INDEX	1,41610
	TOTAL CASE MIX INDEX	1,41049
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$66,221,864
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$33,792,844
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$32,429,020
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	48.97%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,162,080
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$2,162,080
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$579,795
9	BAD DEBTS	\$5,608,309
10	TOTAL UNCOMPENSATED CARE	\$6,188,104
11	TOTAL OTHER OPERATING REVENUE	\$1,352,459
12	TOTAL OPERATING EXPENSES	\$72,076,598

MILFORD HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2014		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2014
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$64,943,739
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$64,943,739
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$1,442,946)
	CALCULATED NET REVENUE	\$63,500,793
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$63,500,794
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$197,304,279
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$197,304,279
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$197,304,279
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,188,104
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,188,104
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,188,104
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	512	1,024	512	100%
2	Number of Approved Applicants	123	271	148	120%
3	Total Charges (A)	\$643,601	\$579,795	(\$63,806)	-10%
4	Average Charges	\$5,233	\$2,139	(\$3,093)	-59%
5	Ratio of Cost to Charges (RCC)	0.472501	0.408005	(0.064496)	-14%
6	Total Cost	\$304,102	\$236,559	(\$67,543)	-22%
7	Average Cost	\$2,472	\$873	(\$1,599)	-65%
8	Charity Care - Inpatient Charges	\$424,743	\$216,130	(\$208,613)	-49%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	105,854	76,980	(28,874)	-27%
10	Charity Care - Emergency Department Charges	113,004	286,685	173,681	154%
11	Total Charges (A)	\$643,601	\$579,795	(\$63,806)	-10%
12	Charity Care - Number of Patient Days	75	161	86	115%
13	Charity Care - Number of Discharges	24	27	3	13%
14	Charity Care - Number of Outpatient ED Visits	76	198	122	161%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	15	52	37	247%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$1,408,208	\$2,284,924	\$876,716	62%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	808,223	691,475	(116,748)	-14%
3	Bad Debts - Emergency Department	4,240,050	2,631,910	(1,608,140)	-38%
4	Total Bad Debts (A)	\$6,456,481	\$5,608,309	(\$848,172)	-13%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$643,601	\$579,795	(\$63,806)	-10%
2	Bad Debts (A)	6,456,481	5,608,309	(848,172)	-13%
3	Total Uncompensated Care (A)	\$7,100,082	\$6,188,104	(\$911,978)	-13%
4	Uncompensated Care - Inpatient Services	\$1,832,951	\$2,501,054	\$668,103	36%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	914,077	768,455	(145,622)	-16%
6	Uncompensated Care - Emergency Department	4,353,054	2,918,595	(1,434,459)	-33%
7	Total Uncompensated Care (A)	\$7,100,082	\$6,188,104	(\$911,978)	-13%

(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.

MILFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCURED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014		
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$68,766,683	\$66,221,864	(\$2,544,819)	-4%
2	Total Contractual Allowances	\$42,980,154	\$32,429,020	(\$10,551,134)	-25%
	Total Accrued Payments (A)	\$25,786,529	\$33,792,844	\$8,006,315	31%
	Total Discount Percentage	62.50%	48.97%	-13.53%	-22%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$96,546,778	\$98,180,414	\$99,249,502
2	Outpatient Gross Revenue	\$92,875,386	\$96,733,467	\$98,054,777
3	Total Gross Patient Revenue	\$189,422,164	\$194,913,881	\$197,304,279
4	Net Patient Revenue	\$84,451,715	\$69,903,315	\$63,500,794
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$90,685,854	\$80,117,246	\$72,076,598
C. <u>Utilization Statistics</u>				
1	Patient Days	14,756	13,603	12,880
2	Discharges	3,580	3,348	3,121
3	Average Length of Stay	4.1	4.1	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	28,951	27,006	25,605
0	Equivalent (Adjusted) Discharges (ED)	7,024	6,647	6,204
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.38247	1.41309	1.41049
2	Case Mix Adjusted Patient Days (CMAPD)	20,400	19,222	18,167
3	Case Mix Adjusted Discharges (CMAD)	4,949	4,731	4,402
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	40,024	38,161	36,116
5	Case Mix Adjusted Equivalent Discharges (CMAED)	9,710	9,392	8,751
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$12,837	\$14,329	\$15,319
2	Total Gross Revenue per Discharge	\$52,911	\$58,218	\$63,218
3	Total Gross Revenue per EPD	\$6,543	\$7,218	\$7,706
4	Total Gross Revenue per ED	\$26,968	\$29,325	\$31,801
5	Total Gross Revenue per CMAEPD	\$4,733	\$5,108	\$5,463
6	Total Gross Revenue per CMAED	\$19,507	\$20,752	\$22,546
7	Inpatient Gross Revenue per EPD	\$3,335	\$3,636	\$3,876
8	Inpatient Gross Revenue per ED	\$13,746	\$14,771	\$15,997

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$5,723	\$5,139	\$4,930
2	Net Patient Revenue per Discharge	\$23,590	\$20,879	\$20,346
3	Net Patient Revenue per EPD	\$2,917	\$2,588	\$2,480
4	Net Patient Revenue per ED	\$12,024	\$10,517	\$10,235
5	Net Patient Revenue per CMAEPD	\$2,110	\$1,832	\$1,758
6	Net Patient Revenue per CMAED	\$8,697	\$7,443	\$7,256
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$6,146	\$5,890	\$5,596
2	Total Operating Expense per Discharge	\$25,331	\$23,930	\$23,094
3	Total Operating Expense per EPD	\$3,132	\$2,967	\$2,815
4	Total Operating Expense per ED	\$12,911	\$12,054	\$11,617
5	Total Operating Expense per CMAEPD	\$2,266	\$2,099	\$1,996
6	Total Operating Expense per CMAED	\$9,339	\$8,530	\$8,236
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$16,612,248	\$16,446,079	\$14,893,505
2	Nursing Fringe Benefits Expense	\$6,871,624	\$5,577,143	\$4,202,695
3	Total Nursing Salary and Fringe Benefits Expense	\$23,483,872	\$22,023,222	\$19,096,200
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$5,506,935	\$5,633,239	\$4,236,141
2	Physician Fringe Benefits Expense	\$771,654	\$695,961	\$560,359
3	Total Physician Salary and Fringe Benefits Expense	\$6,278,589	\$6,329,200	\$4,796,500
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$15,846,036	\$15,739,752	\$16,557,712
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$6,895,421	\$5,907,420	\$4,576,268
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$22,741,457	\$21,647,172	\$21,133,980
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$37,965,219	\$37,819,070	\$35,687,358
2	Total Fringe Benefits Expense	\$14,538,699	\$12,180,524	\$9,339,322
3	Total Salary and Fringe Benefits Expense	\$52,503,918	\$49,999,594	\$45,026,680

MILFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2014				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	ACTUAL FY 2014
L. Total Full Time Equivalent Employees (FTEs)				
1	Total Nursing FTEs	195.0	170.7	195.0
2	Total Physician FTEs	18.0	20.6	13.0
3	Total Non-Nursing, Non-Physician FTEs	294.0	307.3	260.0
4	Total Full Time Equivalent Employees (FTEs)	507.0	498.6	468.0
M. Nursing Salaries and Fringe Benefits Expense per FTE				
1	Nursing Salary Expense per FTE	\$85,191	\$96,345	\$76,377
2	Nursing Fringe Benefits Expense per FTE	\$35,239	\$32,672	\$21,552
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$120,430	\$129,017	\$97,929
N. Physician Salary and Fringe Expense per FTE				
1	Physician Salary Expense per FTE	\$305,941	\$273,458	\$325,857
2	Physician Fringe Benefits Expense per FTE	\$42,870	\$33,785	\$43,105
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$348,811	\$307,243	\$368,962
O. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE				
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$53,898	\$51,219	\$63,684
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$23,454	\$19,224	\$17,601
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$77,352	\$70,443	\$81,285
P. Total Salary and Fringe Benefits Expense per FTE				
1	Total Salary Expense per FTE	\$74,882	\$75,851	\$76,255
2	Total Fringe Benefits Expense per FTE	\$28,676	\$24,429	\$19,956
3	Total Salary and Fringe Benefits Expense per FTE	\$103,558	\$100,280	\$96,211
Q. Total Salary and Fringe Ben. Expense per Statistic				
1	Total Salary and Fringe Benefits Expense per Patient Day	\$3,558	\$3,676	\$3,496
2	Total Salary and Fringe Benefits Expense per Discharge	\$14,666	\$14,934	\$14,427
3	Total Salary and Fringe Benefits Expense per EPD	\$1,814	\$1,851	\$1,759
4	Total Salary and Fringe Benefits Expense per ED	\$7,475	\$7,523	\$7,257
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,312	\$1,310	\$1,247
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,407	\$5,323	\$5,145