

WINDHAM COMMUNITY MEMORIAL 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	\$7,575,725	\$6,754,329	(\$821,396)	-11%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$11,889,554	\$9,382,464	(\$2,507,090)	-21%
4	Current Assets Whose Use is Limited for Current Liabilities	\$560,838	\$563,637	\$2,799	0%
5	Due From Affiliates	\$1,047,418	\$689,258	(\$358,160)	-34%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,150,602	\$1,188,268	\$37,666	3%
8	Prepaid Expenses	\$315,818	\$492,503	\$176,685	56%
9	Other Current Assets	\$4,188,643	\$975,649	(\$3,212,994)	-77%
	Total Current Assets	\$26,728,598	\$20,046,108	(\$6,682,490)	-25%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$3,030,775	\$3,181,515	\$150,740	5%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$1,439,934	\$1,439,934	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$1,989,169	\$2,159,487	\$170,318	9%
	Total Noncurrent Assets Whose Use is Limited:	\$6,459,878	\$6,780,936	\$321,058	5%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$378,132	\$418,008	\$39,876	11%
7	Other Noncurrent Assets	\$2,434,811	\$2,628,082	\$193,271	8%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$117,975,072	\$120,610,311	\$2,635,239	2%
2	Less: Accumulated Depreciation	\$74,173,393	\$78,353,873	\$4,180,480	6%
	Property, Plant and Equipment, Net	\$43,801,679	\$42,256,438	(\$1,545,241)	-4%
3	Construction in Progress	\$346,011	\$109,031	(\$236,980)	-68%
	Total Net Fixed Assets	\$44,147,690	\$42,365,469	(\$1,782,221)	-4%
	Total Assets	\$80,149,109	\$72,238,603	(\$7,910,506)	-10%

WINDHAM COMMUNITY MEMORIAL HOSPITAL

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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
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$4,524,108	\$3,294,083	(\$1,230,025)	-27%
2	Salaries, Wages and Payroll Taxes	\$2,012,866	\$2,298,079	\$285,213	14%
3	Due To Third Party Payers	\$1,340,072	\$3,379,397	\$2,039,325	152%
4	Due To Affiliates	\$1,134,172	\$3,926,518	\$2,792,346	246%
5	Current Portion of Long Term Debt	\$15,681,512	\$4,421,510	(\$11,260,002)	-72%
6	Current Portion of Notes Payable	\$59,406	\$0	(\$59,406)	-100%
7	Other Current Liabilities	\$5,090,126	\$1,500,909	(\$3,589,217)	-71%
	Total Current Liabilities	\$29,842,262	\$18,820,496	(\$11,021,766)	-37%
B.	Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$19,355,130	\$31,550,036	\$12,194,906	63%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$19,355,130	\$31,550,036	\$12,194,906	63%
3	Accrued Pension Liability	\$26,560,346	\$42,664,520	\$16,104,174	61%
4	Other Long Term Liabilities	\$11,840,828	\$12,411,480	\$570,652	5%
	Total Long Term Liabilities	\$57,756,304	\$86,626,036	\$28,869,732	50%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C.	Net Assets:				
1	Unrestricted Net Assets or Equity	(\$13,430,049)	(\$39,450,280)	(\$26,020,231)	194%
2	Temporarily Restricted Net Assets	\$1,786,651	\$1,876,620	\$89,969	5%
3	Permanently Restricted Net Assets	\$4,193,941	\$4,365,731	\$171,790	4%
	Total Net Assets	(\$7,449,457)	(\$33,207,929)	(\$25,758,472)	346%
	Total Liabilities and Net Assets	\$80,149,109	\$72,238,603	(\$7,910,506)	-10%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$205,409,386	\$198,464,791	(\$6,944,595)	-3%
2	Less: Allowances	\$121,754,445	\$113,778,465	(\$7,975,980)	-7%
3	Less: Charity Care	\$2,861,240	\$2,630,961	(\$230,279)	-8%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$80,793,701	\$82,055,365	\$1,261,664	2%
5	Provision for Bad Debts	\$4,079,212	\$4,548,371	\$469,159	12%
	Net Patient Service Revenue less provision for bad debts	\$76,714,489	\$77,506,994	\$792,505	1%
6	Other Operating Revenue	\$5,866,110	\$5,365,283	(\$500,827)	-9%
7	Net Assets Released from Restrictions	\$0	\$126,404	\$126,404	0%
	Total Operating Revenue	\$82,580,599	\$82,998,681	\$418,082	1%
B. Operating Expenses:					
1	Salaries and Wages	\$41,730,362	\$38,236,090	(\$3,494,272)	-8%
2	Fringe Benefits	\$12,666,864	\$9,508,077	(\$3,158,787)	-25%
3	Physicians Fees	\$909,098	\$1,467,218	\$558,120	61%
4	Supplies and Drugs	\$7,826,904	\$7,523,986	(\$302,918)	-4%
5	Depreciation and Amortization	\$4,154,949	\$4,216,020	\$61,071	1%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$1,107,869	\$1,430,212	\$322,343	29%
8	Malpractice Insurance Cost	\$400,452	\$321,649	(\$78,803)	-20%
9	Other Operating Expenses	\$22,571,420	\$24,089,599	\$1,518,179	7%
	Total Operating Expenses	\$91,367,918	\$86,792,851	(\$4,575,067)	-5%
	Income/(Loss) From Operations	(\$8,787,319)	(\$3,794,170)	\$4,993,149	-57%
C. Non-Operating Revenue:					
1	Income from Investments	\$9,049	\$19,814	\$10,765	119%
2	Gifts, Contributions and Donations	\$449,084	\$170,626	(\$278,458)	-62%
3	Other Non-Operating Gains/(Losses)	\$1,084,113	(\$961,845)	(\$2,045,958)	-189%
	Total Non-Operating Revenue	\$1,542,246	(\$771,405)	(\$2,313,651)	-150%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$7,245,073)	(\$4,565,575)	\$2,679,498	-37%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$26,529	\$32,396	\$5,867	22%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
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REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2013 ACTUAL	FY 2014 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$26,529	\$32,396	\$5,867	22%
	Excess/(Deficiency) of Revenue Over Expenses	(\$7,218,544)	(\$4,533,179)	\$2,685,365	-37%
	Principal Payments	\$568,113	\$15,846,823	\$15,278,710	2689%

**WINDHAM COMMUNITY MEMORIAL 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. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$36,948,181	\$29,123,982	(\$7,824,199)	-21%
2	MEDICARE MANAGED CARE	\$6,567,170	\$6,598,150	\$30,980	0%
3	MEDICAID	\$11,232,147	\$9,098,596	(\$2,133,551)	-19%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$123,913	\$95,255	(\$28,658)	-23%
6	COMMERCIAL INSURANCE	\$11,638,160	\$9,991,925	(\$1,646,235)	-14%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$217,421	\$151,969	(\$65,452)	-30%
9	SELF- PAY/UNINSURED	\$760,706	\$540,965	(\$219,741)	-29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$582,135	\$256,635	(\$325,500)	-56%
	TOTAL INPATIENT GROSS REVENUE	\$68,069,833	\$55,857,477	(\$12,212,356)	-18%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$34,337,194	\$36,693,822	\$2,356,628	7%
2	MEDICARE MANAGED CARE	\$7,060,199	\$8,959,476	\$1,899,277	27%
3	MEDICAID	\$35,458,130	\$37,603,089	\$2,144,959	6%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$409,389	\$518,638	\$109,249	27%
6	COMMERCIAL INSURANCE	\$53,285,004	\$52,052,146	(\$1,232,858)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$2,466,684	\$2,714,192	\$247,508	10%
9	SELF- PAY/UNINSURED	\$4,026,998	\$3,764,363	(\$262,635)	-7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$295,954	\$301,587	\$5,633	2%
	TOTAL OUTPATIENT GROSS REVENUE	\$137,339,552	\$142,607,313	\$5,267,761	4%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$71,285,375	\$65,817,804	(\$5,467,571)	-8%
2	MEDICARE MANAGED CARE	\$13,627,369	\$15,557,626	\$1,930,257	14%
3	MEDICAID	\$46,690,277	\$46,701,685	\$11,408	0%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$533,302	\$613,893	\$80,591	15%
6	COMMERCIAL INSURANCE	\$64,923,164	\$62,044,071	(\$2,879,093)	-4%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$2,684,105	\$2,866,161	\$182,056	7%
9	SELF- PAY/UNINSURED	\$4,787,704	\$4,305,328	(\$482,376)	-10%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$878,089	\$558,222	(\$319,867)	-36%
	TOTAL GROSS REVENUE	\$205,409,385	\$198,464,790	(\$6,944,595)	-3%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$21,448,167	\$18,078,157	(\$3,370,010)	-16%
2	MEDICARE MANAGED CARE	\$3,346,918	\$3,456,264	\$109,346	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	\$4,108,612	\$3,408,843	(\$699,769)	-17%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$64,966	\$48,921	(\$16,045)	-25%
6	COMMERCIAL INSURANCE	\$7,012,271	\$6,854,157	(\$158,114)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$144,370	\$95,631	(\$48,739)	-34%
9	SELF- PAY/UNINSURED	\$14,644	\$15,509	\$865	6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$88,061	\$175,065	\$87,004	99%
	TOTAL INPATIENT NET REVENUE	\$36,228,009	\$32,132,547	(\$4,095,462)	-11%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$7,407,665	\$8,813,645	\$1,405,980	19%
2	MEDICARE MANAGED CARE	\$1,427,302	\$2,013,185	\$585,883	41%
3	MEDICAID	\$7,346,857	\$8,071,025	\$724,168	10%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$89,032	\$128,295	\$39,263	44%
6	COMMERCIAL INSURANCE	\$22,666,689	\$24,603,170	\$1,936,481	9%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$1,412,982	\$1,614,167	\$201,185	14%
9	SELF- PAY/UNINSURED	\$101,392	\$93,152	(\$8,240)	-8%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$34,562	\$37,809	\$3,247	9%
	TOTAL OUTPATIENT NET REVENUE	\$40,486,481	\$45,374,448	\$4,887,967	12%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$28,855,832	\$26,891,802	(\$1,964,030)	-7%
2	MEDICARE MANAGED CARE	\$4,774,220	\$5,469,449	\$695,229	15%
3	MEDICAID	\$11,455,469	\$11,479,868	\$24,399	0%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$153,998	\$177,216	\$23,218	15%
6	COMMERCIAL INSURANCE	\$29,678,960	\$31,457,327	\$1,778,367	6%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$1,557,352	\$1,709,798	\$152,446	10%
9	SELF- PAY/UNINSURED	\$116,036	\$108,661	(\$7,375)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$122,623	\$212,874	\$90,251	74%
	TOTAL NET REVENUE	\$76,714,490	\$77,506,995	\$792,505	1%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	1,864	1,459	(405)	-22%
2	MEDICARE MANAGED CARE	346	295	(51)	-15%
3	MEDICAID	965	826	(139)	-14%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	18	13	(5)	-28%
6	COMMERCIAL INSURANCE	865	781	(84)	-10%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	13	6	(7)	-54%

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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	48	37	(11)	-23%
10	SAGA	0	0	0	0%
11	OTHER	19	10	(9)	-47%
	TOTAL DISCHARGES	4,138	3,427	(711)	-17%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	9,356	6,594	(2,762)	-30%
2	MEDICARE MANAGED CARE	1,698	1,457	(241)	-14%
3	MEDICAID	3,237	2,594	(643)	-20%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	37	35	(2)	-5%
6	COMMERCIAL INSURANCE	2,684	2,351	(333)	-12%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	45	28	(17)	-38%
9	SELF- PAY/UNINSURED	147	115	(32)	-22%
10	SAGA	0	0	0	0%
11	OTHER	151	51	(100)	-66%
	TOTAL PATIENT DAYS	17,355	13,225	(4,130)	-24%
C.	<u>OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	30,606	24,041	(6,565)	-21%
2	MEDICARE MANAGED CARE	6,533	6,097	(436)	-7%
3	MEDICAID	31,625	26,727	(4,898)	-15%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	413	362	(51)	-12%
6	COMMERCIAL INSURANCE	52,358	37,030	(15,328)	-29%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	1,909	1,988	79	4%
9	SELF- PAY/UNINSURED	4,395	3,390	(1,005)	-23%
10	SAGA	0	0	0	0%
11	OTHER	192	203	11	6%
	TOTAL OUTPATIENT VISITS	128,031	99,838	(28,193)	-22%
IV.	<u>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</u>				
A.	<u>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</u>				
1	MEDICARE TRADITIONAL	\$7,349,455	\$8,031,464	\$682,009	9%
2	MEDICARE MANAGED CARE	\$1,201,544	\$1,628,395	\$426,851	36%
3	MEDICAID	\$20,784,251	\$21,815,883	\$1,031,632	5%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$225,818	\$261,637	\$35,819	16%
6	COMMERCIAL INSURANCE	\$12,758,376	\$13,039,118	\$280,742	2%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$736,834	\$748,489	\$11,655	2%
9	SELF- PAY/UNINSURED	\$2,825,283	\$2,513,241	(\$312,042)	-11%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$240,440	\$240,818	\$378	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$46,122,001	\$48,279,045	\$2,157,044	5%
B.	<u>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$1,643,924	\$2,002,895	\$358,971	22%

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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	\$259,897	\$405,155	\$145,258	56%
3	MEDICAID	\$3,967,572	\$4,097,465	\$129,893	3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$51,251	\$69,718	\$18,467	36%
6	COMMERCIAL INSURANCE	\$5,812,578	\$6,156,865	\$344,287	6%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$449,878	\$485,801	\$35,923	8%
9	SELF- PAY/UNINSURED	\$49,338	\$60,120	\$10,782	22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$26,916	\$27,482	\$566	2%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$12,261,354	\$13,305,501	\$1,044,147	9%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	4,291	4,244	(47)	-1%
2	MEDICARE MANAGED CARE	687	824	137	20%
3	MEDICAID	14,424	13,907	(517)	-4%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	208	188	(20)	-10%
6	COMMERCIAL INSURANCE	9,192	8,576	(616)	-7%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	748	689	(59)	-8%
9	SELF- PAY/UNINSURED	2,353	1,946	(407)	-17%
10	SAGA	0	0	0	0%
11	OTHER	151	153	2	1%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	32,054	30,527	(1,527)	-5%

WINDHAM COMMUNITY MEMORIAL 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	\$13,350,243	\$12,663,438	(\$686,805)	-5%
2	Physician Salaries	\$1,987,414	\$1,822,615	(\$164,799)	-8%
3	Non-Nursing, Non-Physician Salaries	\$26,392,705	\$23,750,037	(\$2,642,668)	-10%
	Total Salaries & Wages	\$41,730,362	\$38,236,090	(\$3,494,272)	-8%
B.	<u>Fringe Benefits:</u>				
1	Nursing Fringe Benefits	\$4,052,342	\$3,148,987	(\$903,355)	-22%
2	Physician Fringe Benefits	\$603,261	\$453,225	(\$150,036)	-25%
3	Non-Nursing, Non-Physician Fringe Benefits	\$8,011,261	\$5,905,865	(\$2,105,396)	-26%
	Total Fringe Benefits	\$12,666,864	\$9,508,077	(\$3,158,787)	-25%
C.	<u>Contractual Labor Fees:</u>				
1	Nursing Fees	\$315,513	\$7,792	(\$307,721)	-98%
2	Physician Fees	\$909,098	\$1,467,218	\$558,120	61%
3	Non-Nursing, Non-Physician Fees	\$11,539,663	\$12,175,550	\$635,887	6%
	Total Contractual Labor Fees	\$12,764,274	\$13,650,560	\$886,286	7%
D.	<u>Medical Supplies and Pharmaceutical Cost:</u>				
1	Medical Supplies	\$5,328,596	\$5,217,188	(\$111,408)	-2%
2	Pharmaceutical Costs	\$2,498,308	\$2,306,798	(\$191,510)	-8%
	Total Medical Supplies and Pharmaceutical Cost	\$7,826,904	\$7,523,986	(\$302,918)	-4%
E.	<u>Depreciation and Amortization:</u>				
1	Depreciation-Building	\$1,862,231	\$2,207,444	\$345,213	19%
2	Depreciation-Equipment	\$2,281,905	\$1,994,546	(\$287,359)	-13%
3	Amortization	\$10,813	\$14,030	\$3,217	30%
	Total Depreciation and Amortization	\$4,154,949	\$4,216,020	\$61,071	1%
F.	<u>Bad Debts:</u>				
1	Bad Debts	\$0	\$0	\$0	0%
G.	<u>Interest Expense:</u>				
1	Interest Expense	\$1,107,869	\$1,430,212	\$322,343	29%
H.	<u>Malpractice Insurance Cost:</u>				
1	Malpractice Insurance Cost	\$400,452	\$321,649	(\$78,803)	-20%
I.	<u>Utilities:</u>				
1	Water	\$63,933	\$73,668	\$9,735	15%
2	Natural Gas	\$402,573	\$634,143	\$231,570	58%
3	Oil	\$140,477	\$3,960	(\$136,517)	-97%
4	Electricity	\$641,799	\$772,710	\$130,911	20%
5	Telephone	\$152,902	\$161,948	\$9,046	6%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$1,401,684	\$1,646,429	\$244,745	17%
J.	<u>Business Expenses:</u>				
1	Accounting Fees	\$340,175	\$407,259	\$67,084	20%
2	Legal Fees	\$117,202	\$80,630	(\$36,572)	-31%
3	Consulting Fees	\$651,620	\$672,201	\$20,581	3%
4	Dues and Membership	\$320,060	\$344,756	\$24,696	8%
5	Equipment Leases	\$674,874	\$751,487	\$76,613	11%
6	Building Leases	\$374,367	\$424,906	\$50,539	13%
7	Repairs and Maintenance	\$3,267,550	\$3,311,220	\$43,670	1%
8	Insurance	\$142,573	\$234,574	\$92,001	65%
9	Travel	\$60,014	\$29,135	(\$30,879)	-51%
10	Conferences	\$115,046	\$60,413	(\$54,633)	-47%

WINDHAM COMMUNITY MEMORIAL 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	\$84,732	\$167,862	\$83,130	98%
12	General Supplies	\$1,322,909	\$1,374,778	\$51,869	4%
13	Licenses and Subscriptions	\$56,044	\$60,368	\$4,324	8%
14	Postage and Shipping	\$93,294	\$57,822	(\$35,472)	-38%
15	Advertising	\$713,666	\$70,555	(\$643,111)	-90%
16	Corporate parent/system fees	\$0	\$1,962,790	\$1,962,790	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$0	\$0	0%
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%
21	Billing & Collection / Bank Fees	\$0	\$0	\$0	0%
22	Recruiting / Employee Education & Recognition	\$0	\$0	\$0	0%
23	Laundry / Linen	\$0	\$0	\$0	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$0	\$0	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$0	\$0	\$0	0%
	Total Business Expenses	\$8,334,126	\$10,010,756	\$1,676,630	20%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$980,434	\$249,072	(\$731,362)	-75%
	Total Operating Expenses - All Expense Categories*	\$91,367,918	\$86,792,851	(\$4,575,067)	-5%
	*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	\$3,752,136	\$4,575,738	\$823,602	22%
2	General Accounting	\$1,223,522	\$1,216,782	(\$6,740)	-1%
3	Patient Billing & Collection	\$8,009	\$9,063	\$1,054	13%
4	Admitting / Registration Office	\$2,870,021	\$3,093,434	\$223,413	8%
5	Data Processing	\$4,912,598	\$4,994,874	\$82,276	2%
6	Communications	\$152,593	\$139,413	(\$13,180)	-9%
7	Personnel	\$984,923	\$632,869	(\$352,054)	-36%
8	Public Relations	\$1,143,366	\$239,965	(\$903,401)	-79%
9	Purchasing	\$335,970	\$191,084	(\$144,886)	-43%
10	Dietary and Cafeteria	\$1,857,622	\$1,704,310	(\$153,312)	-8%
11	Housekeeping	\$1,043,074	\$969,566	(\$73,508)	-7%
12	Laundry & Linen	\$593,647	\$465,321	(\$128,326)	-22%
13	Operation of Plant	\$1,640,103	\$1,625,692	(\$14,411)	-1%
14	Security	\$391,078	\$354,371	(\$36,707)	-9%
15	Repairs and Maintenance	\$1,558,755	\$1,946,023	\$387,268	25%
16	Central Sterile Supply	\$470,938	\$449,824	(\$21,114)	-4%
17	Pharmacy Department	\$3,684,057	\$3,228,064	(\$455,993)	-12%
18	Other General Services	\$288,864	\$293,903	\$5,039	2%
	Total General Services	\$26,911,276	\$26,130,296	(\$780,980)	-3%
B.	Professional Services:				
1	Medical Care Administration	\$127,357	\$100,266	(\$27,091)	-21%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$2,495,167	\$2,036,415	(\$458,752)	-18%
4	Medical Records	\$846,252	\$845,898	(\$354)	0%
5	Social Service	\$0	\$0	\$0	0%
6	Other Professional Services	\$599,338	\$221,193	(\$378,145)	-63%
	Total Professional Services	\$4,068,114	\$3,203,772	(\$864,342)	-21%
C.	Special Services:				

WINDHAM COMMUNITY MEMORIAL 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	\$4,140,444	\$4,417,582	\$277,138	7%
2	Recovery Room	\$228,259	\$202,639	(\$25,620)	-11%
3	Anesthesiology	\$0	\$0	\$0	0%
4	Delivery Room	\$783,266	\$801,201	\$17,935	2%
5	Diagnostic Radiology	\$2,689,041	\$2,718,990	\$29,949	1%
6	Diagnostic Ultrasound	\$500,625	\$539,198	\$38,573	8%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$502,078	\$571,656	\$69,578	14%
9	CT Scan	\$487,827	\$415,309	(\$72,518)	-15%
10	Laboratory	\$4,092,788	\$3,597,349	(\$495,439)	-12%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$599,641	\$618,567	\$18,926	3%
13	Electrocardiology	\$123,485	\$181,497	\$58,012	47%
14	Electroencephalography	\$333,205	\$380,753	\$47,548	14%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,040,122	\$1,245,161	\$205,039	20%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$5,962,324	\$5,860,036	(\$102,288)	-2%
25	MRI	\$491,459	\$518,453	\$26,994	5%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$701,201	\$668,528	(\$32,673)	-5%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,904,013	\$2,119,344	\$215,331	11%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$3,968,095	\$4,103,423	\$135,328	3%
	Total Special Services	\$28,547,873	\$28,959,686	\$411,813	1%
D.	Routine Services:				
1	Medical & Surgical Units	\$5,846,406	\$4,533,211	(\$1,313,195)	-22%
2	Intensive Care Unit	\$2,588,678	\$2,584,806	(\$3,872)	0%
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	\$619,327	\$721,746	\$102,419	17%
7	Newborn Nursery Unit	\$418,956	\$561,084	\$142,128	34%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$1,203,140	\$1,190,198	(\$12,942)	-1%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$999,845	\$1,119,493	\$119,648	12%
13	Other Routine Services	\$906,926	\$884,129	(\$22,797)	-3%
	Total Routine Services	\$12,583,278	\$11,594,667	(\$988,611)	-8%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$19,257,377	\$16,904,430	(\$2,352,947)	-12%
	Total Operating Expenses - All Departments*	\$91,367,918	\$86,792,851	(\$4,575,067)	-5%
	*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

WINDHAM COMMUNITY MEMORIAL 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	\$90,160,381	\$76,714,489	\$77,506,994
2	Other Operating Revenue	5,761,698	5,866,110	5,491,687
3	Total Operating Revenue	\$95,922,079	\$82,580,599	\$82,998,681
4	Total Operating Expenses	96,450,117	91,367,918	86,792,851
5	Income/(Loss) From Operations	(\$528,038)	(\$8,787,319)	(\$3,794,170)
6	Total Non-Operating Revenue	(185,298)	1,568,775	(739,009)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$713,336)	(\$7,218,544)	(\$4,533,179)
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	-0.55%	-10.44%	-4.61%
2	Hospital Non Operating Margin	-0.19%	1.86%	-0.90%
3	Hospital Total Margin	-0.75%	-8.58%	-5.51%
4	Income/(Loss) From Operations	(\$528,038)	(\$8,787,319)	(\$3,794,170)
5	Total Operating Revenue	\$95,922,079	\$82,580,599	\$82,998,681
6	Total Non-Operating Revenue	(\$185,298)	\$1,568,775	(\$739,009)
7	Total Revenue	\$95,736,781	\$84,149,374	\$82,259,672
8	Excess/(Deficiency) of Revenue Over Expenses	(\$713,336)	(\$7,218,544)	(\$4,533,179)
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	(\$47,943,489)	(\$13,430,049)	(\$39,450,280)
2	Hospital Total Net Assets	(\$42,522,947)	(\$7,449,457)	(\$33,207,929)
3	Hospital Change in Total Net Assets	(\$11,473,374)	\$35,073,490	(\$25,758,472)
4	Hospital Change in Total Net Assets %	137.0%	-82.5%	345.8%

WINDHAM COMMUNITY MEMORIAL 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>	0.45	0.43	0.43
2	Total Operating Expenses	\$96,450,117	\$91,367,918	\$86,792,851
3	Total Gross Revenue	\$210,150,088	\$205,409,385	\$198,464,792
4	Total Other Operating Revenue	\$5,761,698	\$5,866,110	\$5,491,687
5	<u>Private Payment to Cost Ratio</u>	1.09	1.07	1.20
6	Total Non-Government Payments	\$36,903,765	\$31,352,348	\$33,275,786
7	Total Uninsured Payments	\$123,782	\$116,036	\$108,661
8	Total Non-Government Charges	\$80,476,865	\$72,394,973	\$69,215,560
9	Total Uninsured Charges	\$5,038,239	\$4,787,704	\$4,305,328
10	<u>Medicare Payment to Cost Ratio</u>	0.98	0.92	0.93
11	Total Medicare Payments	\$37,802,303	\$33,630,052	\$32,361,251
12	Total Medicare Charges	\$86,571,977	\$84,912,744	\$81,375,430
13	<u>Medicaid Payment to Cost Ratio</u>	0.64	0.57	0.58
14	Total Medicaid Payments	\$11,928,801	\$11,455,469	\$11,479,868
15	Total Medicaid Charges	\$41,990,453	\$46,690,277	\$46,701,685
16	<u>Uncompensated Care Cost</u>	\$3,050,367	\$3,001,459	\$3,055,135
17	Charity Care	\$3,573,641	\$2,699,812	\$2,523,150
18	Bad Debts	\$3,254,865	\$4,240,640	\$4,656,180
19	Total Uncompensated Care	\$6,828,506	\$6,940,452	\$7,179,330
20	<u>Uncompensated Care % of Total Expenses</u>	3.2%	3.3%	3.5%

WINDHAM COMMUNITY MEMORIAL 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	\$96,450,117	\$91,367,918	\$86,792,851
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	1	1	1
2	Total Current Assets	\$31,100,964	\$26,728,598	\$20,046,108
3	Total Current Liabilities	\$31,013,163	\$29,842,262	\$18,820,496
4	<u>Days Cash on Hand</u>	16	32	30
5	Cash and Cash Equivalents	\$4,122,969	\$7,575,725	\$6,754,329
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$4,122,969	\$7,575,725	\$6,754,329
8	Total Operating Expenses	\$96,450,117	\$91,367,918	\$86,792,851
9	Depreciation Expense	\$4,147,105	\$4,154,949	\$4,216,020
10	Operating Expenses less Depreciation Expense	\$92,303,012	\$87,212,969	\$82,576,831
11	<u>Days Revenue in Patient Accounts Receivable</u>	78	50	28
12	Net Patient Accounts Receivable	\$20,670,040	\$11,889,554	\$9,382,464
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,499,004	\$1,340,072	\$3,379,397
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$19,171,036	\$10,549,482	\$6,003,067
16	Total Net Patient Revenue	\$90,160,381	\$76,714,489	\$77,506,994
17	<u>Average Payment Period</u>	123	125	83
18	Total Current Liabilities	\$31,013,163	\$29,842,262	\$18,820,496
19	Total Operating Expenses	\$96,450,117	\$91,367,918	\$86,792,851
20	Depreciation Expense	\$4,147,105	\$4,154,949	\$4,216,020

WINDHAM COMMUNITY MEMORIAL 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 less Depreciation Expense	\$92,303,012	\$87,212,969	\$82,576,831
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	(53.1)	(9.3)	(46.0)
2	Total Net Assets	(\$42,522,947)	(\$7,449,457)	(\$33,207,929)
3	Total Assets	\$80,146,199	\$80,149,109	\$72,238,603
4	<u>Cash Flow to Total Debt Ratio</u>	6.8	(6.2)	(0.6)
5	Excess/(Deficiency) of Revenues Over Expenses	(\$713,336)	(\$7,218,544)	(\$4,533,179)
6	Depreciation Expense	\$4,147,105	\$4,154,949	\$4,216,020
7	Excess of Revenues Over Expenses and Depreciation Expense	\$3,433,769	(\$3,063,595)	(\$317,159)
8	Total Current Liabilities	\$31,013,163	\$29,842,262	\$18,820,496
9	Total Long Term Debt	\$19,433,376	\$19,355,130	\$31,550,036
10	Total Current Liabilities and Total Long Term Debt	\$50,446,539	\$49,197,392	\$50,370,532
11	<u>Long Term Debt to Capitalization Ratio</u>	(84.2)	162.6	(1,903.0)
12	Total Long Term Debt	\$19,433,376	\$19,355,130	\$31,550,036
13	Total Net Assets	(\$42,522,947)	(\$7,449,457)	(\$33,207,929)
14	Total Long Term Debt and Total Net Assets	(\$23,089,571)	\$11,905,673	(\$1,657,893)
15	<u>Debt Service Coverage Ratio</u>	0.7	(1.2)	0.1
16	Excess Revenues over Expenses	(713,336)	(\$7,218,544)	(\$4,533,179)
17	Interest Expense	1,325,543	\$1,107,869	\$1,430,212
18	Depreciation and Amortization Expense	4,147,105	\$4,154,949	\$4,216,020
19	Principal Payments	5,571,922	\$568,113	\$15,846,823
G.	<u>Other Financial Ratios</u>			

WINDHAM COMMUNITY MEMORIAL 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	Average Age of Plant	16.9	17.9	18.6
21	Accumulated Depreciation	70,034,957	74,173,393	78,353,873
22	Depreciation and Amortization Expense	4,147,105	4,154,949	4,216,020
H. Utilization Measures Summary				
1	Patient Days	18,673	17,355	13,225
2	Discharges	4,506	4,137	3,427
3	ALOS	4.1	4.2	3.9
4	Staffed Beds	87	87	87
5	Available Beds	-	144	144
6	Licensed Beds	144	144	144
7	Occupancy of Staffed Beds	58.8%	54.7%	41.6%
8	Occupancy of Available Beds	35.5%	33.0%	25.2%
9	Full Time Equivalent Employees	601.6	577.1	501.0
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	35.9%	32.9%	32.7%
2	Medicare Gross Revenue Payer Mix Percentage	41.2%	41.3%	41.0%
3	Medicaid Gross Revenue Payer Mix Percentage	20.0%	22.7%	23.5%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.2%	0.4%	0.3%
5	Uninsured Gross Revenue Payer Mix Percentage	2.4%	2.3%	2.2%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.3%	0.3%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$75,438,626	\$67,607,269	\$64,910,232
9	Medicare Gross Revenue (Charges)	\$86,571,977	\$84,912,744	\$81,375,430
10	Medicaid Gross Revenue (Charges)	\$41,990,453	\$46,690,277	\$46,701,685
11	Other Medical Assistance Gross Revenue (Charges)	\$439,443	\$878,089	\$558,224
12	Uninsured Gross Revenue (Charges)	\$5,038,239	\$4,787,704	\$4,305,328
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$671,350	\$533,302	\$613,893
14	Total Gross Revenue (Charges)	\$210,150,088	\$205,409,385	\$198,464,792
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	42.3%	40.7%	42.8%
2	Medicare Net Revenue Payer Mix Percentage	43.5%	43.8%	41.8%

WINDHAM COMMUNITY MEMORIAL 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	13.7%	14.9%	14.8%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.2%	0.3%
5	Uninsured Net Revenue Payer Mix Percentage	0.1%	0.2%	0.1%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.2%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$36,779,983	\$31,236,312	\$33,167,125
9	Medicare Net Revenue (Payments)	\$37,802,303	\$33,630,052	\$32,361,251
10	Medicaid Net Revenue (Payments)	\$11,928,801	\$11,455,469	\$11,479,868
11	Other Medical Assistance Net Revenue (Payments)	\$74,115	\$122,623	\$212,873
12	Uninsured Net Revenue (Payments)	\$123,782	\$116,036	\$108,661
13	CHAMPUS / TRICARE Net Revenue Payments)	\$196,531	\$153,998	\$177,216
14	Total Net Revenue (Payments)	\$86,905,515	\$76,714,490	\$77,506,994
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	1,178	926	824
2	Medicare	2,326	2,210	1,754
3	Medical Assistance	985	983	836
4	Medicaid	970	965	826
5	Other Medical Assistance	15	18	10
6	CHAMPUS / TRICARE	17	18	13
7	Uninsured (Included In Non-Government)	56	48	37
8	Total	4,506	4,137	3,427
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	0.95456	0.96785	1.01016
2	Medicare	1.37894	1.39802	1.43212
3	Medical Assistance	0.91871	0.98361	0.99981
4	Medicaid	0.91643	0.96308	0.99155
5	Other Medical Assistance	1.06624	2.08431	1.68189
6	CHAMPUS / TRICARE	0.94453	0.83612	0.87679
7	Uninsured (Included In Non-Government)	0.93178	1.08940	1.05609
8	Total Case Mix Index	1.16575	1.20082	1.22310
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	3,244	3,028	2,489
2	Emergency Room - Treated and Discharged	33,618	32,054	30,527
3	Total Emergency Room Visits	36,862	35,082	33,016

**WINDHAM COMMUNITY MEMORIAL 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	\$186,648	\$86,542	(\$100,106)	-54%
2	Inpatient Payments	\$136,187	\$37,892	(\$98,295)	-72%
3	Outpatient Charges	\$205,152	\$103,314	(\$101,838)	-50%
4	Outpatient Payments	\$70,930	\$36,119	(\$34,811)	-49%
5	Discharges	14	3	(11)	-79%
6	Patient Days	52	18	(34)	-65%
7	Outpatient Visits (Excludes ED Visits)	138	56	(82)	-59%
8	Emergency Department Outpatient Visits	30	8	(22)	-73%
9	Emergency Department Inpatient Admissions	14	3	(11)	-79%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$391,800	\$189,856	(\$201,944)	-52%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$207,117	\$74,011	(\$133,106)	-64%
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	\$3,125,667	\$2,858,342	(\$267,325)	-9%
2	Inpatient Payments	\$1,482,903	\$1,461,872	(\$21,031)	-1%
3	Outpatient Charges	\$3,195,687	\$4,140,870	\$945,183	30%
4	Outpatient Payments	\$628,473	\$963,298	\$334,825	53%
5	Discharges	152	133	(19)	-13%
6	Patient Days	814	636	(178)	-22%
7	Outpatient Visits (Excludes ED Visits)	2,575	2,299	(276)	-11%
8	Emergency Department Outpatient Visits	216	305	89	41%
9	Emergency Department Inpatient Admissions	134	124	(10)	-7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,321,354	\$6,999,212	\$677,858	11%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,111,376	\$2,425,170	\$313,794	15%

**WINDHAM COMMUNITY MEMORIAL 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	\$11,681	\$0	(\$11,681)	-100%
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)	4	0	(4)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,681	\$0	(\$11,681)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$422,487	\$442,312	\$19,825	5%
2	Inpatient Payments	\$239,121	\$231,228	(\$7,893)	-3%
3	Outpatient Charges	\$704,583	\$587,804	(\$116,779)	-17%
4	Outpatient Payments	\$125,714	\$127,800	\$2,086	2%
5	Discharges	28	20	(8)	-29%
6	Patient Days	112	85	(27)	-24%
7	Outpatient Visits (Excludes ED Visits)	521	333	(188)	-36%
8	Emergency Department Outpatient Visits	75	82	7	9%
9	Emergency Department Inpatient Admissions	24	19	(5)	-21%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,127,070	\$1,030,116	(\$96,954)	-9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$364,835	\$359,028	(\$5,807)	-2%
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%

**WINDHAM COMMUNITY MEMORIAL 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	\$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.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$1,983	\$1,983	0%
4	Outpatient Payments	\$0	\$466	\$466	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	3	3	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$1,983	\$1,983	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$466	\$466	0%
I.	AETNA				
1	Inpatient Charges	\$348,253	\$414,326	\$66,073	19%
2	Inpatient Payments	\$186,248	\$195,576	\$9,328	5%
3	Outpatient Charges	\$411,250	\$628,161	\$216,911	53%
4	Outpatient Payments	\$92,428	\$136,256	\$43,828	47%
5	Discharges	19	16	(3)	-16%
6	Patient Days	92	82	(10)	-11%
7	Outpatient Visits (Excludes ED Visits)	276	372	96	35%
8	Emergency Department Outpatient Visits	26	38	12	46%
9	Emergency Department Inpatient Admissions	19	14	(5)	-26%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$759,503	\$1,042,487	\$282,984	37%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$278,676	\$331,832	\$53,156	19%

**WINDHAM COMMUNITY MEMORIAL 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	\$44,685	\$35,853	(\$8,832)	-20%
2	Inpatient Payments	\$25,292	\$26,745	\$1,453	6%
3	Outpatient Charges	\$4,612	\$10,750	\$6,138	133%
4	Outpatient Payments	\$448	\$2,981	\$2,533	565%
5	Discharges	3	2	(1)	-33%
6	Patient Days	8	15	7	88%
7	Outpatient Visits (Excludes ED Visits)	2	2	0	0%
8	Emergency Department Outpatient Visits	2	8	6	300%
9	Emergency Department Inpatient Admissions	3	2	(1)	-33%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$49,297	\$46,603	(\$2,694)	-5%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$25,740	\$29,726	\$3,986	15%
K. SECURE HORIZONS					
1	Inpatient Charges	\$1,445,637	\$1,790,658	\$345,021	24%
2	Inpatient Payments	\$787,288	\$985,400	\$198,112	25%
3	Outpatient Charges	\$1,058,613	\$2,289,349	\$1,230,736	116%
4	Outpatient Payments	\$212,878	\$509,055	\$296,177	139%
5	Discharges	69	83	14	20%
6	Patient Days	345	416	71	21%
7	Outpatient Visits (Excludes ED Visits)	803	1,149	346	43%
8	Emergency Department Outpatient Visits	152	234	82	54%
9	Emergency Department Inpatient Admissions	65	83	18	28%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,504,250	\$4,080,007	\$1,575,757	63%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,000,166	\$1,494,455	\$494,289	49%
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%

**WINDHAM COMMUNITY MEMORIAL 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	\$993,793	\$970,117	(\$23,676)	-2%
2	Inpatient Payments	\$489,879	\$517,551	\$27,672	6%
3	Outpatient Charges	\$1,468,621	\$1,197,245	(\$271,376)	-18%
4	Outpatient Payments	\$296,431	\$237,210	(\$59,221)	-20%
5	Discharges	61	38	(23)	-38%
6	Patient Days	275	205	(70)	-25%
7	Outpatient Visits (Excludes ED Visits)	1,527	1,059	(468)	-31%
8	Emergency Department Outpatient Visits	186	149	(37)	-20%
9	Emergency Department Inpatient Admissions	57	35	(22)	-39%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,462,414	\$2,167,362	(\$295,052)	-12%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$786,310	\$754,761	(\$31,549)	-4%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$6,567,170	\$6,598,150	\$30,980	0%
	TOTAL INPATIENT PAYMENTS	\$3,346,918	\$3,456,264	\$109,346	3%
	TOTAL OUTPATIENT CHARGES	\$7,060,199	\$8,959,476	\$1,899,277	27%
	TOTAL OUTPATIENT PAYMENTS	\$1,427,302	\$2,013,185	\$585,883	41%
	TOTAL DISCHARGES	346	295	(51)	-15%
	TOTAL PATIENT DAYS	1,698	1,457	(241)	-14%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	5,846	5,273	(573)	-10%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	687	824	137	20%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	316	280	(36)	-11%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,627,369	\$15,557,626	\$1,930,257	14%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,774,220	\$5,469,449	\$695,229	15%

**WINDHAM COMMUNITY MEMORIAL 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%

**WINDHAM COMMUNITY MEMORIAL 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	\$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. 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%

**WINDHAM COMMUNITY MEMORIAL 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	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
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	\$7,575,725	\$6,754,329	(\$821,396)	-11%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$11,889,554	\$9,382,464	(\$2,507,090)	-21%
4	Current Assets Whose Use is Limited for Current Liabilities	\$560,838	\$563,637	\$2,799	0%
5	Due From Affiliates	\$1,047,418	\$689,258	(\$358,160)	-34%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,150,602	\$1,188,268	\$37,666	3%
8	Prepaid Expenses	\$315,818	\$492,503	\$176,685	56%
9	Other Current Assets	\$4,188,643	\$975,649	(\$3,212,994)	-77%
	Total Current Assets	\$26,728,598	\$20,046,108	(\$6,682,490)	-25%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$3,030,775	\$3,181,515	\$150,740	5%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$1,439,934	\$1,439,934	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$1,989,169	\$2,159,487	\$170,318	9%
	Total Noncurrent Assets Whose Use is Limited:	\$6,459,878	\$6,780,936	\$321,058	5%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$378,132	\$418,008	\$39,876	11%
7	Other Noncurrent Assets	\$2,434,811	\$2,628,082	\$193,271	8%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$117,975,072	\$120,610,311	\$2,635,239	2%
2	Less: Accumulated Depreciation	\$74,173,393	\$78,353,873	\$4,180,480	\$0
	Property, Plant and Equipment, Net	\$43,801,679	\$42,256,438	(\$1,545,241)	-4%
3	Construction in Progress	\$346,011	\$109,031	(\$236,980)	-68%
	Total Net Fixed Assets	\$44,147,690	\$42,365,469	(\$1,782,221)	-4%
	Total Assets	\$80,149,109	\$72,238,603	(\$7,910,506)	-10%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
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. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$4,524,108	\$3,294,083	(\$1,230,025)	-27%
2	Salaries, Wages and Payroll Taxes	\$2,012,866	\$2,298,079	\$285,213	14%
3	Due To Third Party Payers	\$1,340,072	\$3,379,397	\$2,039,325	152%
4	Due To Affiliates	\$1,134,172	\$3,926,518	\$2,792,346	246%
5	Current Portion of Long Term Debt	\$15,681,512	\$4,421,510	(\$11,260,002)	-72%
6	Current Portion of Notes Payable	\$59,406	\$0	(\$59,406)	-100%
7	Other Current Liabilities	\$5,090,126	\$1,500,909	(\$3,589,217)	-71%
	Total Current Liabilities	\$29,842,262	\$18,820,496	(\$11,021,766)	-37%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$19,355,130	\$31,550,036	\$12,194,906	63%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$19,355,130	\$31,550,036	\$12,194,906	63%
3	Accrued Pension Liability	\$26,560,346	\$42,664,520	\$16,104,174	61%
4	Other Long Term Liabilities	\$11,840,828	\$12,411,480	\$570,652	5%
	Total Long Term Liabilities	\$57,756,304	\$86,626,036	\$28,869,732	50%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	(\$13,430,049)	(\$39,450,280)	(\$26,020,231)	194%
2	Temporarily Restricted Net Assets	\$1,786,651	\$1,876,620	\$89,969	5%
3	Permanently Restricted Net Assets	\$4,193,941	\$4,365,731	\$171,790	4%
	Total Net Assets	(\$7,449,457)	(\$33,207,929)	(\$25,758,472)	346%
	Total Liabilities and Net Assets	\$80,149,109	\$72,238,603	(\$7,910,506)	-10%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2013	FY 2014	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$205,409,386	\$198,464,791	(\$6,944,595)	-3%
2	Less: Allowances	\$121,754,445	\$113,778,465	(\$7,975,980)	-7%
3	Less: Charity Care	\$2,861,240	\$2,630,961	(\$230,279)	-8%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$80,793,701	\$82,055,365	\$1,261,664	2%
5	Provision for Bad Debts	\$4,079,212	\$4,548,371	\$469,159	12%
	Net Patient Service Revenue less provision for bad debts	\$76,714,489	\$77,506,994	\$792,505	1%
6	Other Operating Revenue	\$5,866,110	\$5,365,283	(\$500,827)	-9%
7	Net Assets Released from Restrictions	\$0	\$126,404	\$126,404	0%
	Total Operating Revenue	\$82,580,599	\$82,998,681	\$418,082	1%
B. Operating Expenses:					
1	Salaries and Wages	\$41,730,362	\$38,236,090	(\$3,494,272)	-8%
2	Fringe Benefits	\$12,666,864	\$9,508,077	(\$3,158,787)	-25%
3	Physicians Fees	\$909,098	\$1,467,218	\$558,120	61%
4	Supplies and Drugs	\$7,826,904	\$7,523,986	(\$302,918)	-4%
5	Depreciation and Amortization	\$4,154,949	\$4,216,020	\$61,071	1%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$1,107,869	\$1,430,212	\$322,343	29%
8	Malpractice Insurance Cost	\$400,452	\$321,649	(\$78,803)	-20%
9	Other Operating Expenses	\$22,571,420	\$24,089,599	\$1,518,179	7%
	Total Operating Expenses	\$91,367,918	\$86,792,851	(\$4,575,067)	-5%
	Income/(Loss) From Operations	(\$8,787,319)	(\$3,794,170)	\$4,993,149	-57%
C. Non-Operating Revenue:					
1	Income from Investments	\$9,049	\$19,814	\$10,765	119%
2	Gifts, Contributions and Donations	\$449,084	\$170,626	(\$278,458)	-62%
3	Other Non-Operating Gains/(Losses)	\$1,084,113	(\$961,845)	(\$2,045,958)	-189%
	Total Non-Operating Revenue	\$1,542,246	(\$771,405)	(\$2,313,651)	-150%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$7,245,073)	(\$4,565,575)	\$2,679,498	-37%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$26,529	\$32,396	\$5,867	22%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$26,529	\$32,396	\$5,867	22%
	Excess/(Deficiency) of Revenue Over Expenses	(\$7,218,544)	(\$4,533,179)	\$2,685,365	-37%

WINDHAM COMMUNITY MEMORIAL HOSPITAL

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	\$90,160,381	\$76,714,489	\$77,506,994
2	Other Operating Revenue	5,761,698	5,866,110	5,491,687
3	Total Operating Revenue	\$95,922,079	\$82,580,599	\$82,998,681
4	Total Operating Expenses	96,450,117	91,367,918	86,792,851
5	Income/(Loss) From Operations	(\$528,038)	(\$8,787,319)	(\$3,794,170)
6	Total Non-Operating Revenue	(185,298)	1,568,775	(739,009)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$713,336)	(\$7,218,544)	(\$4,533,179)
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-0.55%	-10.44%	-4.61%
2	Parent Corporation Non-Operating Margin	-0.19%	1.86%	-0.90%
3	Parent Corporation Total Margin	-0.75%	-8.58%	-5.51%
4	Income/(Loss) From Operations	(\$528,038)	(\$8,787,319)	(\$3,794,170)
5	Total Operating Revenue	\$95,922,079	\$82,580,599	\$82,998,681
6	Total Non-Operating Revenue	(\$185,298)	\$1,568,775	(\$739,009)
7	Total Revenue	\$95,736,781	\$84,149,374	\$82,259,672
8	Excess/(Deficiency) of Revenue Over Expenses	(\$713,336)	(\$7,218,544)	(\$4,533,179)
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	(\$47,943,489)	(\$13,430,049)	(\$39,450,280)
2	Parent Corporation Total Net Assets	(\$42,522,947)	(\$7,449,457)	(\$33,207,929)
3	Parent Corporation Change in Total Net Assets	(\$11,473,374)	\$35,073,490	(\$25,758,472)
4	Parent Corporation Change in Total Net Assets %	137.0%	-82.5%	345.8%

WINDHAM COMMUNITY MEMORIAL HOSPITAL

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
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	0.94	0.90	1.07
2	Total Current Assets	\$31,097,898	\$26,728,598	\$20,046,108
3	Total Current Liabilities	\$33,145,097	\$29,842,262	\$18,820,496
4	<u>Days Cash on Hand</u>	16	32	30
5	Cash and Cash Equivalents	\$4,122,969	\$7,575,725	\$6,754,329
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$4,122,969	\$7,575,725	\$6,754,329
8	Total Operating Expenses	\$96,450,117	\$91,367,918	\$86,792,851
9	Depreciation Expense	\$4,147,105	\$4,154,949	\$4,216,020
10	Operating Expenses less Depreciation Expense	\$92,303,012	\$87,212,969	\$82,576,831
11	<u>Days Revenue in Patient Accounts Receivable</u>	78	50	28
12	Net Patient Accounts Receivable	\$ 20,670,040	\$ 11,889,554	\$ 9,382,464
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$1,499,004	\$1,340,072	\$3,379,397
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 19,171,036	\$ 10,549,482	\$ 6,003,067
16	Total Net Patient Revenue	\$90,160,381	\$76,714,489	\$77,506,994
17	<u>Average Payment Period</u>	131	125	83
18	Total Current Liabilities	\$33,145,097	\$29,842,262	\$18,820,496
19	Total Operating Expenses	\$96,450,117	\$91,367,918	\$86,792,851
20	Depreciation Expense	\$4,147,105	\$4,154,949	\$4,216,020
20	Total Operating Expenses less Depreciation Expense	\$92,303,012	\$87,212,969	\$82,576,831

WINDHAM COMMUNITY MEMORIAL HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2014

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>FY 2014</u>
E. Solvency Measures Summary				
1	<u>Equity Financing Ratio</u>	(53.1)	(9.3)	(46.0)
2	Total Net Assets	(\$42,522,947)	(\$7,449,457)	(\$33,207,929)
3	Total Assets	\$80,143,133	\$80,149,109	\$72,238,603
4	<u>Cash Flow to Total Debt Ratio</u>	6.5	(6.2)	(0.6)
5	Excess/(Deficiency) of Revenues Over Expenses	(\$713,336)	(\$7,218,544)	(\$4,533,179)
6	Depreciation Expense	\$4,147,105	\$4,154,949	\$4,216,020
7	Excess of Revenues Over Expenses and Depreciation Expense	\$3,433,769	(\$3,063,595)	(\$317,159)
8	Total Current Liabilities	\$33,145,097	\$29,842,262	\$18,820,496
9	Total Long Term Debt	\$19,376,083	\$19,355,130	\$31,550,036
10	Total Current Liabilities and Total Long Term Debt	\$52,521,180	\$49,197,392	\$50,370,532
11	<u>Long Term Debt to Capitalization Ratio</u>	(83.7)	162.6	(1,903.0)
12	Total Long Term Debt	\$19,376,083	\$19,355,130	\$31,550,036
13	Total Net Assets	(\$42,522,947)	(\$7,449,457)	(\$33,207,929)
14	Total Long Term Debt and Total Net Assets	(\$23,146,864)	\$11,905,673	(\$1,657,893)

WINDHAM COMMUNITY MEMORIAL 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	8,126	2,625	2,698	53	104	42.0%	21.4%
2	ICU/CCU (Excludes Neonatal ICU)	3,180	546	0	12	12	72.6%	72.6%
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	1,019	413	410	14	14	19.9%	19.9%
7	Newborn	900	389	385	8	14	30.8%	17.6%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	12,325	3,038	3,108	79	130	42.7%	26.0%
	TOTAL INPATIENT BED UTILIZATION	13,225	3,427	3,493	87	144	41.6%	25.2%
	TOTAL INPATIENT REPORTED YEAR	13,225	3,427	3,493	87	144	41.6%	25.2%
	TOTAL INPATIENT PRIOR YEAR	17,355	4,137	4,190	87	144	54.7%	33.0%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-4,130	-710	-697	0	0	-13.0%	-7.9%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-24%	-17%	-17%	0%	0%	-24%	-24%
	Total Licensed Beds and Bassinets	144						
(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.								

WINDHAM COMMUNITY MEMORIAL 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	2,323	1,895	-428	-18%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,179	3,631	452	14%
3	Emergency Department Scans	4,273	4,266	-7	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	9,775	9,792	17	0%
B. MRI Scans (A)					
1	Inpatient Scans	430	364	-66	-15%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,533	3,627	94	3%
3	Emergency Department Scans	82	90	8	10%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	4,045	4,081	36	1%
C. PET 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 Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	5	0	-5	-100%
2	Outpatient Scans (Excluding Emergency Department Scans)	97	111	14	14%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	102	111	9	9%
(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	1,053	939	-114	-11%
2	Outpatient Surgical Procedures	5,010	5,411	401	8%
	Total Surgical Procedures	6,063	6,350	287	5%
J. Endoscopy Procedures					

WINDHAM COMMUNITY MEMORIAL 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	289	198	-91	-31%
2	Outpatient Endoscopy Procedures	2,684	3,529	845	31%
	Total Endoscopy Procedures	2,973	3,727	754	25%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	3,028	2,489	-539	-18%
2	Emergency Room Visits: Treated and Discharged	32,054	30,527	-1,527	-5%
	Total Emergency Room Visits	35,082	33,016	-2,066	-6%
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	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	1,679	1,472	-207	-12%
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	219	478	259	118%
12	Specialty Clinic Visits - OB-GYN Clinic	1,144	1,270	126	11%
13	Specialty Clinic Visits - Other Speciality Clinics	0	0	0	0%
	Total Hospital Clinic Visits	3,042	3,220	178	6%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	20,463	23,394	2,931	14%
2	Cardiac Rehabilitation	1,775	2,004	229	13%
3	Chemotherapy	382	270	-112	-29%
4	Gastroenterology	246	286	40	16%
5	Other Outpatient Visits	50,802	49,618	-1,184	-2%
	Total Other Hospital Outpatient Visits	73,668	75,572	1,904	3%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	170.0	147.0	-23.0	-14%
2	Total Physician FTEs	9.4	9.8	0.4	4%
3	Total Non-Nursing and Non-Physician FTEs	397.7	344.2	-53.5	-13%
	Total Hospital Full Time Equivalent Employees	577.1	501.0	-76.1	-13%

WINDHAM COMMUNITY MEMORIAL 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)
LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Windham Hospital	5,010	5,411	401	8%
	Total Outpatient Surgical Procedures(A)	5,010	5,411	401	8%
B. Outpatient Endoscopy Procedures					
1	Windham Hospital	2,684	3,529	845	31%
	Total Outpatient Endoscopy Procedures(B)	2,684	3,529	845	31%
C. Outpatient Hospital Emergency Room Visits					
1	Windham Hospital	32,054	30,527	-1,527	-5%
	Total Outpatient Hospital Emergency Room Visits(C)	32,054	30,527	-1,527	-5%
(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.					

WINDHAM COMMUNITY MEMORIAL 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
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$43,515,351	\$35,722,132	(\$7,793,219)	-18%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$24,795,085	\$21,534,421	(\$3,260,664)	-13%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	56.98%	60.28%	3.30%	6%
4	DISCHARGES	2,210	1,754	(456)	-21%
5	CASE MIX INDEX (CMI)	1.39802	1.43212	0.03410	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,089.62420	2,511.93848	(577.68572)	-19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,025.28	\$8,572.83	\$547.55	7%
8	PATIENT DAYS	11,054	8,051	(3,003)	-27%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,243.09	\$2,674.75	\$431.66	19%
10	AVERAGE LENGTH OF STAY	5.0	4.6	(0.4)	-8%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$41,397,393	\$45,653,298	\$4,255,905	10%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$8,834,967	\$10,826,830	\$1,991,863	23%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.34%	23.72%	2.37%	11%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	95.13%	127.80%	32.67%	34%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,102.43595	2,241.63229	139.19634	7%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,202.25	\$4,829.89	\$627.63	15%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$84,912,744	\$81,375,430	(\$3,537,314)	-4%
18	TOTAL ACCRUED PAYMENTS	\$33,630,052	\$32,361,251	(\$1,268,801)	-4%
19	TOTAL ALLOWANCES	\$51,282,692	\$49,014,179	(\$2,268,513)	-4%

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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	\$12,616,287	\$10,684,859	(\$1,931,428)	-15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$7,171,285	\$6,965,297	(\$205,988)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	56.84%	65.19%	8.35%	15%
4	DISCHARGES	926	824	(102)	-11%
5	CASE MIX INDEX (CMI)	0.96785	1.01016	0.04231	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	896.22910	832.37184	(63.85726)	-7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,001.62	\$8,368.01	\$366.39	5%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$23.66	\$204.82	\$181.16	766%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$21,200	\$170,485	\$149,285	704%
10	PATIENT DAYS	2,876	2,494	(382)	-13%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,493.49	\$2,792.82	\$299.33	12%
12	AVERAGE LENGTH OF STAY	3.1	3.0	(0.1)	-3%
<u>NON-GOVERNMENT OUTPATIENT</u>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$59,778,686	\$58,530,701	(\$1,247,985)	-2%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$24,181,063	\$26,310,489	\$2,129,426	9%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	40.45%	44.95%	4.50%	11%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	473.82%	547.79%	73.97%	16%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,387.58751	4,513.79823	126.21072	3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,511.24	\$5,828.90	\$317.66	6%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$1,308.99)	(\$999.02)	\$309.98	-24%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,743,312)	(\$4,509,355)	\$1,233,957	-21%
<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>					
21	TOTAL ACCRUED CHARGES	\$72,394,973	\$69,215,560	(\$3,179,413)	-4%
22	TOTAL ACCRUED PAYMENTS	\$31,352,348	\$33,275,786	\$1,923,438	6%
23	TOTAL ALLOWANCES	\$41,042,625	\$35,939,774	(\$5,102,851)	-12%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$5,722,112)	(\$4,338,870)	\$1,383,242	-24%
<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$62,017,893	\$68,452,589	\$6,434,696	10%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$31,236,312	\$33,167,125	\$1,930,813	6%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$30,781,581	\$35,285,464	\$4,503,883	15%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.63%	51.55%	1.91%	

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C.	<u>UNINSURED</u>				
	<u>UNINSURED INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$760,706	\$540,965	(\$219,741)	-29%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,644	\$15,509	\$865	6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.93%	2.87%	0.94%	49%
4	DISCHARGES	48	37	(11)	-23%
5	CASE MIX INDEX (CMI)	1.08940	1.05609	(0.03331)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	52.29120	39.07533	(13.21587)	-25%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$280.05	\$396.90	\$116.85	42%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,721.57	\$7,971.11	\$249.54	3%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$7,745.23	\$8,175.93	\$430.70	6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$405,007	\$319,477	(\$85,530)	-21%
11	PATIENT DAYS	147	115	(32)	-22%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$99.62	\$134.86	\$35.24	35%
13	AVERAGE LENGTH OF STAY	3.1	3.1	0.0	1%
	<u>UNINSURED OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$4,026,998	\$3,764,363	(\$262,635)	-7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$101,392	\$93,152	(\$8,240)	-8%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	2.52%	2.47%	-0.04%	-2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	529.38%	695.86%	166.48%	31%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	254.10067	257.46847	3.36780	1%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$399.02	\$361.80	(\$37.22)	-9%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,112.22	\$5,467.10	\$354.88	7%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,803.23	\$4,468.09	\$664.86	17%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$966,403	\$1,150,392	\$183,988	19%
	<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$4,787,704	\$4,305,328	(\$482,376)	-10%
24	TOTAL ACCRUED PAYMENTS	\$116,036	\$108,661	(\$7,375)	-6%
25	TOTAL ALLOWANCES	\$4,671,668	\$4,196,667	(\$475,001)	-10%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,371,410	\$1,469,869	\$98,458	7%

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LINE	DESCRIPTION	ACTUAL FY 2013	ACTUAL FY 2014	AMOUNT DIFFERENCE	% DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$11,232,147	\$9,098,596	(\$2,133,551)	-19%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,108,612	\$3,408,843	(\$699,769)	-17%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	36.58%	37.47%	0.89%	2%
4	DISCHARGES	965	826	(139)	-14%
5	CASE MIX INDEX (CMI)	0.96308	0.99155	0.02847	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	929.37220	819.02030	(110.35190)	-12%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,420.85	\$4,162.10	(\$258.75)	-6%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,580.77	\$4,205.91	\$625.14	17%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,604.43	\$4,410.73	\$806.30	22%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,349,856	\$3,612,479	\$262,623	8%
11	PATIENT DAYS	3,237	2,594	(643)	-20%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,269.27	\$1,314.13	\$44.86	4%
13	AVERAGE LENGTH OF STAY	3.4	3.1	(0.2)	-6%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$35,458,130	\$37,603,089	\$2,144,959	6%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,346,857	\$8,071,025	\$724,168	10%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.72%	21.46%	0.74%	4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	315.68%	413.28%	97.60%	31%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,046.35396	3,413.73015	367.37620	12%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,411.69	\$2,364.28	(\$47.41)	-2%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$3,099.55	\$3,464.62	\$365.06	12%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,790.56	\$2,465.60	\$675.04	38%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,454,692	\$8,416,905	\$2,962,213	54%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$46,690,277	\$46,701,685	\$11,408	0%
24	TOTAL ACCRUED PAYMENTS	\$11,455,469	\$11,479,868	\$24,399	0%
25	TOTAL ALLOWANCES	\$35,234,808	\$35,221,817	(\$12,991)	0%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,804,548	\$12,029,383	\$3,224,836	37%

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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	\$582,134	\$256,636	(\$325,498)	-56%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$88,061	\$175,065	\$87,004	99%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	15.13%	68.22%	53.09%	351%
4	DISCHARGES	18	10	(8)	-44%
5	CASE MIX INDEX (CMI)	2.08431	1.68189	(0.40242)	-19%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	37.51758	16.81890	(20.69868)	-55%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,347.19	\$10,408.83	\$8,061.63	343%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$5,654.43	(\$2,040.81)	(\$7,695.24)	-136%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$5,678.08	(\$1,836.00)	(\$7,514.08)	-132%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$213,028	(\$30,879)	(\$243,907)	-114%
11	PATIENT DAYS	151	51	(100)	-66%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$583.19	\$3,432.65	\$2,849.46	489%
13	AVERAGE LENGTH OF STAY	8.4	5.1	(3.3)	-39%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$295,955	\$301,588	\$5,633	2%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$34,562	\$37,808	\$3,246	9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	11.68%	12.54%	0.86%	7%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	50.84%	117.52%	66.68%	131%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	9.15114	11.75159	2.60045	28%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,776.80	\$3,217.27	(\$559.53)	-15%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$1,734.45	\$2,611.63	\$877.19	51%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$425.46	\$1,612.62	\$1,187.16	279%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,893	\$18,951	\$15,057	387%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$878,089	\$558,224	(\$319,865)	-36%
24	TOTAL ACCRUED PAYMENTS	\$122,623	\$212,873	\$90,250	74%
25	TOTAL ALLOWANCES	\$755,466	\$345,351	(\$410,115)	-54%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$216,921	(\$11,929)	(\$228,850)	-105%

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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	\$11,814,281	\$9,355,232	(\$2,459,049)	-21%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,196,673	\$3,583,908	(\$612,765)	-15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.52%	38.31%	2.79%	8%
4	DISCHARGES	983	836	(147)	-15%
5	CASE MIX INDEX (CMI)	0.98361	0.99981	0.01620	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	966.88978	835.83920	(131.05058)	-14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,340.38	\$4,287.80	(\$52.59)	-1%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,661.24	\$4,080.22	\$418.98	11%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,684.89	\$4,285.03	\$600.14	16%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,562,884	\$3,581,599	\$18,715	1%
11	PATIENT DAYS	3,388	2,645	(743)	-22%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,238.69	\$1,354.97	\$116.29	9%
13	AVERAGE LENGTH OF STAY	3.4	3.2	(0.3)	-8%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$35,754,085	\$37,904,677	\$2,150,592	6%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,381,419	\$8,108,833	\$727,414	10%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.64%	21.39%	0.75%	4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	302.63%	405.17%	102.54%	34%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,055.50510	3,425.48174	369.97664	12%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,415.78	\$2,367.21	(\$48.57)	-2%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,095.47	\$3,461.69	\$366.23	12%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,786.48	\$2,462.68	\$676.20	38%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,458,585	\$8,435,856	\$2,977,270	55%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$47,568,366	\$47,259,909	(\$308,457)	-1%
24	TOTAL ACCRUED PAYMENTS	\$11,578,092	\$11,692,741	\$114,649	1%
25	TOTAL ALLOWANCES	\$35,990,274	\$35,567,168	(\$423,106)	-1%

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G. <u>CHAMPUS / TRICARE</u>					
<u>CHAMPUS / TRICARE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$123,913	\$95,255	(\$28,658)	-23%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$64,966	\$48,921	(\$16,045)	-25%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	52.43%	51.36%	-1.07%	-2%
4	DISCHARGES	18	13	(5)	-28%
5	CASE MIX INDEX (CMI)	0.83612	0.87679	0.04067	5%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	15.05016	11.39827	(3.65189)	-24%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,316.63	\$4,291.97	(\$24.66)	-1%
8	PATIENT DAYS	37	35	(2)	-5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,755.84	\$1,397.74	(\$358.09)	-20%
10	AVERAGE LENGTH OF STAY	2.1	2.7	0.6	31%
<u>CHAMPUS / TRICARE OUTPATIENT</u>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$409,389	\$518,638	\$109,249	27%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$89,032	\$128,295	\$39,263	44%
<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>					
13	TOTAL ACCRUED CHARGES	\$533,302	\$613,893	\$80,591	15%
14	TOTAL ACCRUED PAYMENTS	\$153,998	\$177,216	\$23,218	15%
15	TOTAL ALLOWANCES	\$379,304	\$436,677	\$57,373	15%
H. <u>OTHER DATA</u>					
1	OTHER OPERATING REVENUE	\$5,866,110	\$5,491,687	(\$374,423)	-6%
2	TOTAL OPERATING EXPENSES	\$91,367,918	\$86,792,851	(\$4,575,067)	-5%
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)	\$2,699,812	\$2,523,150	(\$176,662)	-7%
5	BAD DEBTS (CHARGES)	\$4,240,640	\$4,656,180	\$415,540	10%
6	UNCOMPENSATED CARE (CHARGES)	\$6,940,452	\$7,179,330	\$238,878	3%
7	COST OF UNCOMPENSATED CARE	\$2,664,761	\$2,523,884	(\$140,876)	-5%
<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>					
8	TOTAL ACCRUED CHARGES	\$47,568,366	\$47,259,909	(\$308,457)	-1%
9	TOTAL ACCRUED PAYMENTS	\$11,578,092	\$11,692,741	\$114,649	1%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$18,263,698	\$16,614,162	(\$1,649,536)	-9%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$6,685,606	\$4,921,421	(\$1,764,185)	-26%

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II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$68,069,832	\$55,857,478	(\$12,212,354)	-18%
2	TOTAL INPATIENT PAYMENTS	\$36,228,009	\$32,132,547	(\$4,095,462)	-11%
3	TOTAL INPATIENT PAYMENTS / CHARGES	53.22%	57.53%	4.30%	8%
4	TOTAL DISCHARGES	4,137	3,427	(710)	-17%
5	TOTAL CASE MIX INDEX	1.20082	1.22310	0.02228	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	4,967.79324	4,191.54779	(776.24545)	-16%
7	TOTAL OUTPATIENT CHARGES	\$137,339,553	\$142,607,314	\$5,267,761	4%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	201.76%	255.31%	53.54%	27%
9	TOTAL OUTPATIENT PAYMENTS	\$40,486,481	\$45,374,447	\$4,887,966	12%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.48%	31.82%	2.34%	8%
11	TOTAL CHARGES	\$205,409,385	\$198,464,792	(\$6,944,593)	-3%
12	TOTAL PAYMENTS	\$76,714,490	\$77,506,994	\$792,504	1%
13	TOTAL PAYMENTS / TOTAL CHARGES	37.35%	39.05%	1.71%	5%
14	PATIENT DAYS	17,355	13,225	(4,130)	-24%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$55,453,545	\$45,172,619	(\$10,280,926)	-19%
2	INPATIENT PAYMENTS	\$29,056,724	\$25,167,250	(\$3,889,474)	-13%
3	GOVT. INPATIENT PAYMENTS / CHARGES	52.40%	55.71%	3.32%	6%
4	DISCHARGES	3,211	2,603	(608)	-19%
5	CASE MIX INDEX	1.26801	1.29050	0.02250	2%
6	CASE MIX ADJUSTED DISCHARGES	4,071.56414	3,359.17595	(712.38819)	-17%
7	OUTPATIENT CHARGES	\$77,560,867	\$84,076,613	\$6,515,746	8%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	139.87%	186.12%	46.26%	33%
9	OUTPATIENT PAYMENTS	\$16,305,418	\$19,063,958	\$2,758,540	17%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.02%	22.67%	1.65%	8%
11	TOTAL CHARGES	\$133,014,412	\$129,249,232	(\$3,765,180)	-3%
12	TOTAL PAYMENTS	\$45,362,142	\$44,231,208	(\$1,130,934)	-2%
13	TOTAL PAYMENTS / CHARGES	34.10%	34.22%	0.12%	0%
14	PATIENT DAYS	14,479	10,731	(3,748)	-26%
15	TOTAL GOVERNMENT DEDUCTIONS	\$87,652,270	\$85,018,024	(\$2,634,246)	-3%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	5.0	4.6	(0.4)	-8%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.0	(0.1)	-3%
3	UNINSURED	3.1	3.1	0.0	1%
4	MEDICAID	3.4	3.1	(0.2)	-6%
5	OTHER MEDICAL ASSISTANCE	8.4	5.1	(3.3)	-39%
6	CHAMPUS / TRICARE	2.1	2.7	0.6	31%
7	TOTAL AVERAGE LENGTH OF STAY	4.2	3.9	(0.3)	-8%

WINDHAM COMMUNITY MEMORIAL 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	\$205,409,385	\$198,464,792	(\$6,944,593)	-3%
2	TOTAL GOVERNMENT DEDUCTIONS	\$87,652,270	\$85,018,024	(\$2,634,246)	-3%
3	UNCOMPENSATED CARE	\$6,940,452	\$7,179,330	\$238,878	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$30,781,581	\$35,285,464	\$4,503,883	15%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,168,909	\$1,211,925	\$43,016	4%
6	TOTAL ADJUSTMENTS	\$126,543,212	\$128,694,743	\$2,151,531	2%
7	TOTAL ACCRUED PAYMENTS	\$78,866,173	\$69,770,049	(\$9,096,124)	-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.	\$78,866,173	\$69,770,049	(\$9,096,124)	-12%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3839462983	0.3515487472	(0.0323975510)	-8%
11	COST OF UNCOMPENSATED CARE	\$2,664,761	\$2,523,884	(\$140,876)	-5%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$6,685,606	\$4,921,421	(\$1,764,185)	-26%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$9,350,367	\$7,445,305	(\$1,905,062)	-20%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$5,454,692	\$8,416,905	\$2,962,213	54%
2	OTHER MEDICAL ASSISTANCE	\$216,921	(\$11,929)	(\$228,850)	-105%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,371,410	\$1,469,869	\$98,458	7%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,043,024	\$9,874,845	\$2,831,821	40%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,159,164	\$2,679,529	(\$479,635)	-15.18%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$0	\$0	\$0	0.00%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$76,714,489	\$77,506,994	\$792,505	1.03%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$205,409,386	\$198,464,791	(\$6,944,595)	-3.38%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$6,940,452	\$7,179,332	\$238,880	3.44%

WINDHAM COMMUNITY MEMORIAL 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	ACTUAL	FY	AMOUNT
		2013		2014		DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS						
A. INPATIENT ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,616,287		\$10,684,859		(\$1,931,428)
2	MEDICARE	\$43,515,351		35,722,132		(\$7,793,219)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,814,281		9,355,232		(\$2,459,049)
4	MEDICAID	\$11,232,147		9,098,596		(\$2,133,551)
5	OTHER MEDICAL ASSISTANCE	\$582,134		256,636		(\$325,498)
6	CHAMPUS / TRICARE	\$123,913		95,255		(\$28,658)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$760,706		540,965		(\$219,741)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$55,453,545		\$45,172,619		(\$10,280,926)
	TOTAL INPATIENT CHARGES	\$68,069,832		\$55,857,478		(\$12,212,354)
B. OUTPATIENT ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$59,778,686		\$58,530,701		(\$1,247,985)
2	MEDICARE	\$41,397,393		45,653,298		\$4,255,905
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$35,754,085		37,904,677		\$2,150,592
4	MEDICAID	\$35,458,130		37,603,089		\$2,144,959
5	OTHER MEDICAL ASSISTANCE	\$295,955		301,588		\$5,633
6	CHAMPUS / TRICARE	\$409,389		518,638		\$109,249
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,026,998		3,764,363		(\$262,635)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$77,560,867		\$84,076,613		\$6,515,746
	TOTAL OUTPATIENT CHARGES	\$137,339,553		\$142,607,314		\$5,267,761
C. TOTAL ACCRUED CHARGES						
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$72,394,973		\$69,215,560		(\$3,179,413)
2	TOTAL MEDICARE	\$84,912,744		\$81,375,430		(\$3,537,314)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$47,568,366		\$47,259,909		(\$308,457)
4	TOTAL MEDICAID	\$46,690,277		\$46,701,685		\$11,408
5	TOTAL OTHER MEDICAL ASSISTANCE	\$878,089		\$558,224		(\$319,865)
6	TOTAL CHAMPUS / TRICARE	\$533,302		\$613,893		\$80,591
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,787,704		\$4,305,328		(\$482,376)
	TOTAL GOVERNMENT CHARGES	\$133,014,412		\$129,249,232		(\$3,765,180)
	TOTAL CHARGES	\$205,409,385		\$198,464,792		(\$6,944,593)
D. INPATIENT ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,171,285		\$6,965,297		(\$205,988)
2	MEDICARE	\$24,795,085		21,534,421		(\$3,260,664)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,196,673		3,583,908		(\$612,765)
4	MEDICAID	\$4,108,612		3,408,843		(\$699,769)
5	OTHER MEDICAL ASSISTANCE	\$88,061		175,065		\$87,004
6	CHAMPUS / TRICARE	\$64,966		48,921		(\$16,045)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$14,644		15,509		\$865
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$29,056,724		\$25,167,250		(\$3,889,474)
	TOTAL INPATIENT PAYMENTS	\$36,228,009		\$32,132,547		(\$4,095,462)
E. OUTPATIENT ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$24,181,063		\$26,310,489		\$2,129,426
2	MEDICARE	\$8,834,967		10,826,830		\$1,991,863
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,381,419		8,108,833		\$727,414
4	MEDICAID	\$7,346,857		8,071,025		\$724,168
5	OTHER MEDICAL ASSISTANCE	\$34,562		37,808		\$3,246
6	CHAMPUS / TRICARE	\$89,032		128,295		\$39,263
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$101,392		93,152		(\$8,240)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$16,305,418		\$19,063,958		\$2,758,540
	TOTAL OUTPATIENT PAYMENTS	\$40,486,481		\$45,374,447		\$4,887,966
F. TOTAL ACCRUED PAYMENTS						
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$31,352,348		\$33,275,786		\$1,923,438
2	TOTAL MEDICARE	\$33,630,052		\$32,361,251		(\$1,268,801)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,578,092		\$11,692,741		\$114,649
4	TOTAL MEDICAID	\$11,455,469		\$11,479,868		\$24,399
5	TOTAL OTHER MEDICAL ASSISTANCE	\$122,623		\$212,873		\$90,250
6	TOTAL CHAMPUS / TRICARE	\$153,998		\$177,216		\$23,218
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$116,036		\$108,661		(\$7,375)
	TOTAL GOVERNMENT PAYMENTS	\$45,362,142		\$44,231,208		(\$1,130,934)
	TOTAL PAYMENTS	\$76,714,490		\$77,506,994		\$792,504

WINDHAM COMMUNITY MEMORIAL 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 2013	FY	ACTUAL 2014	FY	AMOUNT DIFFERENCE
II. PAYER MIX						
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6.14%		5.38%		-0.76%
2	MEDICARE	21.18%		18.00%		-3.19%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.75%		4.71%		-1.04%
4	MEDICAID	5.47%		4.58%		-0.88%
5	OTHER MEDICAL ASSISTANCE	0.28%		0.13%		-0.15%
6	CHAMPUS / TRICARE	0.06%		0.05%		-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.37%		0.27%		-0.10%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	27.00%		22.76%		-4.24%
	TOTAL INPATIENT PAYER MIX	33.14%		28.14%		-4.99%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29.10%		29.49%		0.39%
2	MEDICARE	20.15%		23.00%		2.85%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17.41%		19.10%		1.69%
4	MEDICAID	17.26%		18.95%		1.68%
5	OTHER MEDICAL ASSISTANCE	0.14%		0.15%		0.01%
6	CHAMPUS / TRICARE	0.20%		0.26%		0.06%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.96%		1.90%		-0.06%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	37.76%		42.36%		4.60%
	TOTAL OUTPATIENT PAYER MIX	66.86%		71.86%		4.99%
	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)	9.35%		8.99%		-0.36%
2	MEDICARE	32.32%		27.78%		-4.54%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.47%		4.62%		-0.85%
4	MEDICAID	5.36%		4.40%		-0.96%
5	OTHER MEDICAL ASSISTANCE	0.11%		0.23%		0.11%
6	CHAMPUS / TRICARE	0.08%		0.06%		-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.02%		0.02%		0.00%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	37.88%		32.47%		-5.41%
	TOTAL INPATIENT PAYER MIX	47.22%		41.46%		-5.77%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS						
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.52%		33.95%		2.43%
2	MEDICARE	11.52%		13.97%		2.45%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.62%		10.46%		0.84%
4	MEDICAID	9.58%		10.41%		0.84%
5	OTHER MEDICAL ASSISTANCE	0.05%		0.05%		0.00%
6	CHAMPUS / TRICARE	0.12%		0.17%		0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.13%		0.12%		-0.01%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	21.25%		24.60%		3.34%
	TOTAL OUTPATIENT PAYER MIX	52.78%		58.54%		5.77%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%		100.00%		0.00%

WINDHAM COMMUNITY MEMORIAL 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 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	926	824	(102)
2	MEDICARE	2,210	1,754	(456)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	983	836	(147)
4	MEDICAID	965	826	(139)
5	OTHER MEDICAL ASSISTANCE	18	10	(8)
6	CHAMPUS / TRICARE	18	13	(5)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	48	37	(11)
	TOTAL GOVERNMENT DISCHARGES	3,211	2,603	(608)
	TOTAL DISCHARGES	4,137	3,427	(710)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,876	2,494	(382)
2	MEDICARE	11,054	8,051	(3,003)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,388	2,645	(743)
4	MEDICAID	3,237	2,594	(643)
5	OTHER MEDICAL ASSISTANCE	151	51	(100)
6	CHAMPUS / TRICARE	37	35	(2)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	147	115	(32)
	TOTAL GOVERNMENT PATIENT DAYS	14,479	10,731	(3,748)
	TOTAL PATIENT DAYS	17,355	13,225	(4,130)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.0	(0.1)
2	MEDICARE	5.0	4.6	(0.4)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.4	3.2	(0.3)
4	MEDICAID	3.4	3.1	(0.2)
5	OTHER MEDICAL ASSISTANCE	8.4	5.1	(3.3)
6	CHAMPUS / TRICARE	2.1	2.7	0.6
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.1	3.1	0.0
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.5	4.1	(0.4)
	TOTAL AVERAGE LENGTH OF STAY	4.2	3.9	(0.3)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96785	1.01016	0.04231
2	MEDICARE	1.39802	1.43212	0.03410
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.98361	0.99981	0.01620
4	MEDICAID	0.96308	0.99155	0.02847
5	OTHER MEDICAL ASSISTANCE	2.08431	1.68189	(0.40242)
6	CHAMPUS / TRICARE	0.83612	0.87679	0.04067
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.08940	1.05609	(0.03331)
	TOTAL GOVERNMENT CASE MIX INDEX	1.26801	1.29050	0.02250
	TOTAL CASE MIX INDEX	1.20082	1.22310	0.02228
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$62,017,893	\$68,452,589	\$6,434,696
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$31,236,312	\$33,167,125	\$1,930,813
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$30,781,581	\$35,285,464	\$4,503,883
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.63%	51.55%	1.91%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,159,164	\$2,679,529	(\$479,635)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,168,909	\$1,211,925	\$43,016
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$2,699,812	\$2,523,150	(\$176,662)
9	BAD DEBTS	\$4,240,640	\$4,656,180	\$415,540
10	TOTAL UNCOMPENSATED CARE	\$6,940,452	\$7,179,330	\$238,878
11	TOTAL OTHER OPERATING REVENUE	\$5,866,110	\$5,491,687	(\$374,423)
12	TOTAL OPERATING EXPENSES	\$91,367,918	\$86,792,851	(\$4,575,067)

WINDHAM COMMUNITY MEMORIAL 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 2013	FY ACTUAL 2014	FY AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	896.22910	832.37184	(63.85726)
2	MEDICARE	3,089.62420	2,511.93848	(577.68572)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	966.88978	835.83920	(131.05058)
4	MEDICAID	929.37220	819.02030	(110.35190)
5	OTHER MEDICAL ASSISTANCE	37.51758	16.81890	(20.69868)
6	CHAMPUS / TRICARE	15.05016	11.39827	(3.65189)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	52.29120	39.07533	(13.21587)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	4,071.56414	3,359.17595	(712.38819)
	TOTAL CASE MIX ADJUSTED DISCHARGES	4,967.79324	4,191.54779	(776.24545)
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,387.58751	4,513.79823	126.21072
2	MEDICARE	2,102.43595	2,241.63229	139.19634
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,055.50510	3,425.48174	369.97664
4	MEDICAID	3,046.35396	3,413.73015	367.37620
5	OTHER MEDICAL ASSISTANCE	9.15114	11.75159	2.60045
6	CHAMPUS / TRICARE	59.46916	70.78152	11.31236
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	254.10067	257.46847	3.36780
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	5,217.41021	5,737.89556	520.48534
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	9,604.99772	10,251.69378	646.69606
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,001.62	\$8,368.01	\$366.39
2	MEDICARE	\$8,025.28	\$8,572.83	\$547.55
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,340.38	\$4,287.80	(\$52.59)
4	MEDICAID	\$4,420.85	\$4,162.10	(\$258.75)
5	OTHER MEDICAL ASSISTANCE	\$2,347.19	\$10,408.83	\$8,061.63
6	CHAMPUS / TRICARE	\$4,316.63	\$4,291.97	(\$24.66)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$280.05	\$396.90	\$116.85
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,136.50	\$7,492.09	\$355.59
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,292.58	\$7,666.03	\$373.46
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,511.24	\$5,828.90	\$317.66
2	MEDICARE	\$4,202.25	\$4,829.89	\$627.63
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,415.78	\$2,367.21	(\$48.57)
4	MEDICAID	\$2,411.69	\$2,364.28	(\$47.41)
5	OTHER MEDICAL ASSISTANCE	\$3,776.80	\$3,217.27	(\$559.53)
6	CHAMPUS / TRICARE	\$1,497.11	\$1,812.55	\$315.44
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$399.02	\$361.80	(\$37.22)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$3,125.19	\$3,322.47	\$197.27
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,215.15	\$4,426.04	\$210.90

WINDHAM COMMUNITY MEMORIAL 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 2013	FY ACTUAL 2014	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$5,454,692	\$8,416,905	\$2,962,213
2	OTHER MEDICAL ASSISTANCE	\$216,921	(\$11,929)	(\$228,850)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,371,410	\$1,469,869	\$98,458
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,043,024	\$9,874,845	\$2,831,821
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$205,409,385	\$198,464,792	(\$6,944,593)
2	TOTAL GOVERNMENT DEDUCTIONS	\$87,652,270	\$85,018,024	(\$2,634,246)
3	UNCOMPENSATED CARE	\$6,940,452	\$7,179,330	\$238,878
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$30,781,581	\$35,285,464	\$4,503,883
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,168,909	\$1,211,925	\$43,016
6	TOTAL ADJUSTMENTS	\$126,543,212	\$128,694,743	\$2,151,531
7	TOTAL ACCRUED PAYMENTS	\$78,866,173	\$69,770,049	(\$9,096,124)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$78,866,173	\$69,770,049	(\$9,096,124)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3839462983	0.3515487472	(0.0323975510)
11	COST OF UNCOMPENSATED CARE	\$2,664,761	\$2,523,884	(\$140,876)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$6,685,606	\$4,921,421	(\$1,764,185)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$9,350,367	\$7,445,305	(\$1,905,062)
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	56.84%	65.19%	8.35%
2	MEDICARE	56.98%	60.28%	3.30%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	35.52%	38.31%	2.79%
4	MEDICAID	36.58%	37.47%	0.89%
5	OTHER MEDICAL ASSISTANCE	15.13%	68.22%	53.09%
6	CHAMPUS / TRICARE	52.43%	51.36%	-1.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.93%	2.87%	0.94%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	52.40%	55.71%	3.32%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	53.22%	57.53%	4.30%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	40.45%	44.95%	4.50%
2	MEDICARE	21.34%	23.72%	2.37%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	20.64%	21.39%	0.75%
4	MEDICAID	20.72%	21.46%	0.74%
5	OTHER MEDICAL ASSISTANCE	11.68%	12.54%	0.86%
6	CHAMPUS / TRICARE	21.75%	24.74%	2.99%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.52%	2.47%	-0.04%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	21.02%	22.67%	1.65%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	29.48%	31.82%	2.34%

WINDHAM COMMUNITY MEMORIAL 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 2013	FY ACTUAL 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	\$76,714,490	\$77,506,994	\$792,504
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$76,714,490	\$77,506,994	\$792,504
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$0	\$0	\$0
4	CALCULATED NET REVENUE	\$82,945,385	\$77,506,994	(\$5,438,391)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$76,714,489	\$77,506,994	\$792,505
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$6,230,896	\$0	(\$6,230,896)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$205,409,385	\$198,464,792	(\$6,944,593)
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$205,409,385	\$198,464,792	(\$6,944,593)
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$205,409,386	\$198,464,791	(\$6,944,595)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	\$1	\$2
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,940,452	\$7,179,330	\$238,878
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,940,452	\$7,179,330	\$238,878
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,940,452	\$7,179,332	\$238,880
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$2)	(\$2)

WINDHAM COMMUNITY MEMORIAL 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)	\$10,684,859
2	MEDICARE	35,722,132
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,355,232
4	MEDICAID	9,098,596
5	OTHER MEDICAL ASSISTANCE	256,636
6	CHAMPUS / TRICARE	95,255
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	540,965
	TOTAL INPATIENT GOVERNMENT CHARGES	\$45,172,619
	TOTAL INPATIENT CHARGES	\$55,857,478
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$58,530,701
2	MEDICARE	45,653,298
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	37,904,677
4	MEDICAID	37,603,089
5	OTHER MEDICAL ASSISTANCE	301,588
6	CHAMPUS / TRICARE	518,638
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,764,363
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$84,076,613
	TOTAL OUTPATIENT CHARGES	\$142,607,314
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$69,215,560
2	TOTAL GOVERNMENT ACCRUED CHARGES	129,249,232
	TOTAL ACCRUED CHARGES	\$198,464,792
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$6,965,297
2	MEDICARE	21,534,421
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,583,908
4	MEDICAID	3,408,843
5	OTHER MEDICAL ASSISTANCE	175,065
6	CHAMPUS / TRICARE	48,921
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	15,509
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$25,167,250
	TOTAL INPATIENT PAYMENTS	\$32,132,547
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$26,310,489
2	MEDICARE	10,826,830
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,108,833
4	MEDICAID	8,071,025
5	OTHER MEDICAL ASSISTANCE	37,808
6	CHAMPUS / TRICARE	128,295
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	93,152
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$19,063,958
	TOTAL OUTPATIENT PAYMENTS	\$45,374,447
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$33,275,786
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	44,231,208
	TOTAL ACCRUED PAYMENTS	\$77,506,994

WINDHAM COMMUNITY MEMORIAL 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)	824
2	MEDICARE	1,754
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	836
4	MEDICAID	826
5	OTHER MEDICAL ASSISTANCE	10
6	CHAMPUS / TRICARE	13
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	37
	TOTAL GOVERNMENT DISCHARGES	2,603
	TOTAL DISCHARGES	3,427
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.01016
2	MEDICARE	1.43212
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.99981
4	MEDICAID	0.99155
5	OTHER MEDICAL ASSISTANCE	1.68189
6	CHAMPUS / TRICARE	0.87679
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.05609
	TOTAL GOVERNMENT CASE MIX INDEX	1.29050
	TOTAL CASE MIX INDEX	1.22310
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,452,589
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$33,167,125
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,285,464
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.55%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,679,529
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,211,925
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$2,523,150
9	BAD DEBTS	\$4,656,180
10	TOTAL UNCOMPENSATED CARE	\$7,179,330
11	TOTAL OTHER OPERATING REVENUE	\$5,491,687
12	TOTAL OPERATING EXPENSES	\$86,792,851

WINDHAM COMMUNITY MEMORIAL 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	\$77,506,994
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$77,506,994
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$0
	CALCULATED NET REVENUE	\$77,506,994
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$77,506,994
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$198,464,792
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$198,464,792
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$198,464,791
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,179,330
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,179,330
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,179,332
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$2)

WINDHAM COMMUNITY MEMORIAL 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	1,068	1,296	228	21%
2	Number of Approved Applicants	1,039	872	(167)	-16%
3	Total Charges (A)	\$2,699,812	\$2,523,150	(\$176,662)	-7%
4	Average Charges	\$2,598	\$2,894	\$295	11%
5	Ratio of Cost to Charges (RCC)	0.446711	0.432459	(0.014252)	-3%
6	Total Cost	\$1,206,036	\$1,091,159	(\$114,877)	-10%
7	Average Cost	\$1,161	\$1,251	\$91	8%
8	Charity Care - Inpatient Charges	\$585,726	\$426,189	(\$159,537)	-27%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,035,783	1,155,449	119,666	12%
10	Charity Care - Emergency Department Charges	1,078,303	941,512	(136,791)	-13%
11	Total Charges (A)	\$2,699,812	\$2,523,150	(\$176,662)	-7%
12	Charity Care - Number of Patient Days	146	106	(40)	-27%
13	Charity Care - Number of Discharges	44	35	(9)	-20%
14	Charity Care - Number of Outpatient ED Visits	885	768	(117)	-13%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,399	999	(400)	-29%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$505,890	\$833,666	\$327,776	65%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,125,174	1,275,705	150,531	13%
3	Bad Debts - Emergency Department	2,609,576	2,546,809	(62,767)	-2%
4	Total Bad Debts (A)	\$4,240,640	\$4,656,180	\$415,540	10%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$2,699,812	\$2,523,150	(\$176,662)	-7%
2	Bad Debts (A)	4,240,640	4,656,180	415,540	10%
3	Total Uncompensated Care (A)	\$6,940,452	\$7,179,330	\$238,878	3%
4	Uncompensated Care - Inpatient Services	\$1,091,616	\$1,259,855	\$168,239	15%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	2,160,957	2,431,154	270,197	13%
6	Uncompensated Care - Emergency Department	3,687,879	3,488,321	(199,558)	-5%
7	Total Uncompensated Care (A)	\$6,940,452	\$7,179,330	\$238,878	3%

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

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2014					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED 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	\$62,017,893	\$68,452,589	\$6,434,696	10%
2	Total Contractual Allowances	\$30,781,581	\$35,285,464	\$4,503,883	15%
	Total Accrued Payments (A)	\$31,236,312	\$33,167,125	\$1,930,813	6%
	Total Discount Percentage	49.63%	51.55%	1.91%	4%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

WINDHAM COMMUNITY MEMORIAL 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. Gross and Net Revenue				
1	Inpatient Gross Revenue	\$68,939,980	\$68,069,832	\$55,857,478
2	Outpatient Gross Revenue	\$141,210,108	\$137,339,553	\$142,607,314
3	Total Gross Patient Revenue	\$210,150,088	\$205,409,385	\$198,464,792
4	Net Patient Revenue	\$90,160,381	\$76,714,489	\$77,506,994
B. Total Operating Expenses				
1	Total Operating Expense	\$96,450,117	\$91,367,918	\$86,792,851
C. Utilization Statistics				
1	Patient Days	18,673	17,355	13,225
2	Discharges	4,506	4,137	3,427
3	Average Length of Stay	4.1	4.2	3.9
4	Equivalent (Adjusted) Patient Days (EPD)	56,921	52,371	46,989
0	Equivalent (Adjusted) Discharges (ED)	13,736	12,484	12,176
D. Case Mix Statistics				
1	Case Mix Index	1.16575	1.20082	1.22310
2	Case Mix Adjusted Patient Days (CMAPD)	21,768	20,840	16,175
3	Case Mix Adjusted Discharges (CMAD)	5,253	4,968	4,192
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	66,356	62,888	57,472
5	Case Mix Adjusted Equivalent Discharges (CMAED)	16,012	14,991	14,893
E. Gross Revenue Per Statistic				
1	Total Gross Revenue per Patient Day	\$11,254	\$11,836	\$15,007
2	Total Gross Revenue per Discharge	\$46,638	\$49,652	\$57,912
3	Total Gross Revenue per EPD	\$3,692	\$3,922	\$4,224
4	Total Gross Revenue per ED	\$15,300	\$16,454	\$16,299
5	Total Gross Revenue per CMAEPD	\$3,167	\$3,266	\$3,453
6	Total Gross Revenue per CMAED	\$13,124	\$13,702	\$13,326
7	Inpatient Gross Revenue per EPD	\$1,211	\$1,300	\$1,189
8	Inpatient Gross Revenue per ED	\$5,019	\$5,453	\$4,587

WINDHAM COMMUNITY MEMORIAL 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	\$4,828	\$4,420	\$5,861
2	Net Patient Revenue per Discharge	\$20,009	\$18,544	\$22,617
3	Net Patient Revenue per EPD	\$1,584	\$1,465	\$1,649
4	Net Patient Revenue per ED	\$6,564	\$6,145	\$6,365
5	Net Patient Revenue per CMAEPD	\$1,359	\$1,220	\$1,349
6	Net Patient Revenue per CMAED	\$5,631	\$5,117	\$5,204
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$5,165	\$5,265	\$6,563
2	Total Operating Expense per Discharge	\$21,405	\$22,086	\$25,326
3	Total Operating Expense per EPD	\$1,694	\$1,745	\$1,847
4	Total Operating Expense per ED	\$7,022	\$7,319	\$7,128
5	Total Operating Expense per CMAEPD	\$1,454	\$1,453	\$1,510
6	Total Operating Expense per CMAED	\$6,023	\$6,095	\$5,828
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$13,759,500	\$13,350,243	\$12,663,438
2	Nursing Fringe Benefits Expense	\$4,918,084	\$4,052,342	\$3,148,987
3	Total Nursing Salary and Fringe Benefits Expense	\$18,677,584	\$17,402,585	\$15,812,425
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$2,572,919	\$1,987,414	\$1,822,615
2	Physician Fringe Benefits Expense	\$919,643	\$603,261	\$453,225
3	Total Physician Salary and Fringe Benefits Expense	\$3,492,562	\$2,590,675	\$2,275,840
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$26,574,906	\$26,392,705	\$23,750,037
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$9,498,719	\$8,011,261	\$5,905,865
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$36,073,625	\$34,403,966	\$29,655,902
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$42,907,325	\$41,730,362	\$38,236,090
2	Total Fringe Benefits Expense	\$15,336,446	\$12,666,864	\$9,508,077
3	Total Salary and Fringe Benefits Expense	\$58,243,771	\$54,397,226	\$47,744,167

WINDHAM COMMUNITY MEMORIAL 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	179.4	170.0	147.0
2	Total Physician FTEs	11.4	9.4	9.8
3	Total Non-Nursing, Non-Physician FTEs	410.8	397.7	344.2
4	Total Full Time Equivalent Employees (FTEs)	601.6	577.1	501.0
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$76,697	\$78,531	\$86,146
2	Nursing Fringe Benefits Expense per FTE	\$27,414	\$23,837	\$21,422
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$104,111	\$102,368	\$107,568
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$225,695	\$211,427	\$185,981
2	Physician Fringe Benefits Expense per FTE	\$80,670	\$64,177	\$46,247
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$306,365	\$275,604	\$232,229
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$64,691	\$66,363	\$69,001
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$23,122	\$20,144	\$17,158
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$87,813	\$86,507	\$86,159
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$71,322	\$72,310	\$76,320
2	Total Fringe Benefits Expense per FTE	\$25,493	\$21,949	\$18,978
3	Total Salary and Fringe Benefits Expense per FTE	\$96,815	\$94,260	\$95,298
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$3,119	\$3,134	\$3,610
2	Total Salary and Fringe Benefits Expense per Discharge	\$12,926	\$13,149	\$13,932
3	Total Salary and Fringe Benefits Expense per EPD	\$1,023	\$1,039	\$1,016
4	Total Salary and Fringe Benefits Expense per ED	\$4,240	\$4,357	\$3,921
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$878	\$865	\$831
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,637	\$3,629	\$3,206