

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$25,968,000	\$25,249,000	(\$719,000)	-3%
2	Short Term Investments	\$61,779,000	\$56,146,000	(\$5,633,000)	-9%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$54,662,000	\$53,543,000	(\$1,119,000)	-2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$679,000	\$715,000	\$36,000	5%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$4,349,000	\$5,720,000	\$1,371,000	32%
8	Prepaid Expenses	\$8,021,000	\$8,065,000	\$44,000	1%
9	Other Current Assets	\$13,630,000	\$14,392,000	\$762,000	6%
	Total Current Assets	\$169,088,000	\$163,830,000	(\$5,258,000)	-3%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$0	\$0	\$0	0%
5	Interest in Net Assets of Foundation	\$69,267,000	\$79,597,000	\$10,330,000	15%
6	Long Term Investments	\$22,585,000	\$23,795,000	\$1,210,000	5%
7	Other Noncurrent Assets	\$60,406,000	\$55,880,000	(\$4,526,000)	-7%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$430,427,000	\$554,467,000	\$124,040,000	29%
2	Less: Accumulated Depreciation	\$289,391,000	\$309,517,000	\$20,126,000	7%
	Property, Plant and Equipment, Net	\$141,036,000	\$244,950,000	\$103,914,000	74%
3	Construction in Progress	\$69,785,000	\$16,865,000	(\$52,920,000)	-76%
	Total Net Fixed Assets	\$210,821,000	\$261,815,000	\$50,994,000	24%
	Total Assets	\$532,167,000	\$584,917,000	\$52,750,000	10%

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LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$50,085,000	\$46,212,000	(\$3,873,000)	-8%
2	Salaries, Wages and Payroll Taxes	\$18,777,000	\$20,950,000	\$2,173,000	12%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$12,179,000	\$14,348,000	\$2,169,000	18%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$15,856,000	\$15,141,000	(\$715,000)	-5%
	Total Current Liabilities	\$96,897,000	\$96,651,000	(\$246,000)	0%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$73,372,000	\$64,747,000	(\$8,625,000)	-12%
2	Notes Payable (Net of Current Portion)	\$60,309,000	\$96,386,000	\$36,077,000	60%
	Total Long Term Debt	\$133,681,000	\$161,133,000	\$27,452,000	21%
3	Accrued Pension Liability	\$68,304,000	\$77,643,000	\$9,339,000	14%
4	Other Long Term Liabilities	\$64,721,000	\$67,265,000	\$2,544,000	4%
	Total Long Term Liabilities	\$266,706,000	\$306,041,000	\$39,335,000	15%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$110,843,000	\$116,790,000	\$5,947,000	5%
2	Temporarily Restricted Net Assets	\$34,845,000	\$42,302,000	\$7,457,000	21%
3	Permanently Restricted Net Assets	\$22,876,000	\$23,133,000	\$257,000	1%
	Total Net Assets	\$168,564,000	\$182,225,000	\$13,661,000	8%
	Total Liabilities and Net Assets	\$532,167,000	\$584,917,000	\$52,750,000	10%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2015 ACTUAL</u>	<u>FY 2016 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,759,987,000	\$1,767,448,000	\$7,461,000	0%
2	Less: Allowances	\$1,232,938,444	\$1,232,133,715	(\$804,729)	0%
3	Less: Charity Care	\$35,462,000	\$38,202,000	\$2,740,000	8%
4	Less: Other Deductions	\$10,095,556	\$8,681,285	(\$1,414,271)	-14%
	Total Net Patient Revenue	\$481,491,000	\$488,431,000	\$6,940,000	1%
5	Provision for Bad Debts	\$15,417,000	\$15,692,000	\$275,000	2%
	Net Patient Service Revenue less provision for bad debts	\$466,074,000	\$472,739,000	\$6,665,000	1%
6	Other Operating Revenue	\$31,305,000	\$37,462,500	\$6,157,500	20%
7	Net Assets Released from Restrictions	\$750,000	\$522,500	(\$227,500)	-30%
	Total Operating Revenue	\$498,129,000	\$510,724,000	\$12,595,000	3%
B. Operating Expenses:					
1	Salaries and Wages	\$156,621,000	\$158,654,000	\$2,033,000	1%
2	Fringe Benefits	\$50,585,000	\$45,301,000	(\$5,284,000)	-10%
3	Physicians Fees	\$27,676,000	\$34,941,000	\$7,265,000	26%
4	Supplies and Drugs	\$52,564,000	\$59,396,000	\$6,832,000	13%
5	Depreciation and Amortization	\$31,148,000	\$32,444,000	\$1,296,000	4%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$3,048,000	\$5,480,000	\$2,432,000	80%
8	Malpractice Insurance Cost	\$6,225,000	\$7,861,000	\$1,636,000	26%
9	Other Operating Expenses	\$115,589,000	\$126,117,000	\$10,528,000	9%
	Total Operating Expenses	\$443,456,000	\$470,194,000	\$26,738,000	6%
	Income/(Loss) From Operations	\$54,673,000	\$40,530,000	(\$14,143,000)	-26%
C. Non-Operating Revenue:					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$542,000)	(\$51,000)	\$491,000	-91%
	Total Non-Operating Revenue	(\$542,000)	(\$51,000)	\$491,000	-91%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$54,131,000	\$40,479,000	(\$13,652,000)	-25%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$1,486,000	\$6,195,000	\$4,709,000	317%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$1,486,000	\$6,195,000	\$4,709,000	317%
	Excess/(Deficiency) of Revenue Over Expenses	\$55,617,000	\$46,674,000	(\$8,943,000)	-16%
	Principal Payments	\$4,696,000	\$5,712,000	\$1,016,000	22%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$315,221,324	\$301,419,084	(\$13,802,240)	-4%
2	MEDICARE MANAGED CARE	\$123,172,907	\$135,482,629	\$12,309,722	10%
3	MEDICAID	\$222,828,904	\$233,980,593	\$11,151,689	5%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$410,349	\$911,152	\$500,803	122%
6	COMMERCIAL INSURANCE	\$73,860,848	\$75,224,165	\$1,363,317	2%
7	NON-GOVERNMENT MANAGED CARE	\$113,838,226	\$111,375,113	(\$2,463,113)	-2%
8	WORKER'S COMPENSATION	\$6,930,273	\$5,098,655	(\$1,831,618)	-26%
9	SELF- PAY/UNINSURED	\$20,207,327	\$10,924,791	(\$9,282,536)	-46%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$876,470,158	\$874,416,182	(\$2,053,976)	0%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$160,015,874	\$166,409,070	\$6,393,196	4%
2	MEDICARE MANAGED CARE	\$81,834,038	\$86,069,756	\$4,235,718	5%
3	MEDICAID	\$307,573,351	\$304,832,821	(\$2,740,530)	-1%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$836,199	\$1,072,941	\$236,742	28%
6	COMMERCIAL INSURANCE	\$119,227,133	\$117,502,855	(\$1,724,278)	-1%
7	NON-GOVERNMENT MANAGED CARE	\$174,364,989	\$172,682,743	(\$1,682,246)	-1%
8	WORKER'S COMPENSATION	\$6,494,074	\$5,665,761	(\$828,313)	-13%
9	SELF- PAY/UNINSURED	\$33,171,524	\$38,794,461	\$5,622,937	17%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$883,517,182	\$893,030,408	\$9,513,226	1%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$475,237,198	\$467,828,154	(\$7,409,044)	-2%
2	MEDICARE MANAGED CARE	\$205,006,945	\$221,552,385	\$16,545,440	8%
3	MEDICAID	\$530,402,255	\$538,813,414	\$8,411,159	2%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$1,246,548	\$1,984,093	\$737,545	59%
6	COMMERCIAL INSURANCE	\$193,087,981	\$192,727,020	(\$360,961)	0%
7	NON-GOVERNMENT MANAGED CARE	\$288,203,215	\$284,057,856	(\$4,145,359)	-1%
8	WORKER'S COMPENSATION	\$13,424,347	\$10,764,416	(\$2,659,931)	-20%
9	SELF- PAY/UNINSURED	\$53,378,851	\$49,719,252	(\$3,659,599)	-7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,759,987,340	\$1,767,446,590	\$7,459,250	0%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$102,871,768	\$96,855,799	(\$6,015,969)	-6%
2	MEDICARE MANAGED CARE	\$38,459,124	\$37,980,752	(\$478,372)	-1%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	\$40,320,958	\$51,084,429	\$10,763,471	27%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$91,862	\$168,167	\$76,305	83%
6	COMMERCIAL INSURANCE	\$34,767,627	\$35,590,859	\$823,232	2%
7	NON-GOVERNMENT MANAGED CARE	\$54,595,644	\$51,603,096	(\$2,992,548)	-5%
8	WORKER'S COMPENSATION	\$3,642,665	\$2,260,128	(\$1,382,537)	-38%
9	SELF- PAY/UNINSURED	\$10,449,109	\$5,502,869	(\$4,946,240)	-47%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$285,198,757	\$281,046,099	(\$4,152,658)	-1%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$27,226,592	\$30,358,717	\$3,132,125	12%
2	MEDICARE MANAGED CARE	\$12,392,980	\$13,409,202	\$1,016,222	8%
3	MEDICAID	\$43,186,014	\$48,056,138	\$4,870,124	11%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$181,050	\$117,668	(\$63,382)	-35%
6	COMMERCIAL INSURANCE	\$43,356,708	\$46,485,484	\$3,128,776	7%
7	NON-GOVERNMENT MANAGED CARE	\$61,553,145	\$65,714,339	\$4,161,194	7%
8	WORKER'S COMPENSATION	\$2,702,132	\$1,427,091	(\$1,275,041)	-47%
9	SELF- PAY/UNINSURED	\$16,413,766	\$5,014,778	(\$11,398,988)	-69%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$207,012,387	\$210,583,417	\$3,571,030	2%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$130,098,360	\$127,214,516	(\$2,883,844)	-2%
2	MEDICARE MANAGED CARE	\$50,852,104	\$51,389,954	\$537,850	1%
3	MEDICAID	\$83,506,972	\$99,140,567	\$15,633,595	19%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$272,912	\$285,835	\$12,923	5%
6	COMMERCIAL INSURANCE	\$78,124,335	\$82,076,343	\$3,952,008	5%
7	NON-GOVERNMENT MANAGED CARE	\$116,148,789	\$117,317,435	\$1,168,646	1%
8	WORKER'S COMPENSATION	\$6,344,797	\$3,687,219	(\$2,657,578)	-42%
9	SELF- PAY/UNINSURED	\$26,862,875	\$10,517,647	(\$16,345,228)	-61%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$492,211,144	\$491,629,516	(\$581,628)	0%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	5,686	5,808	122	2%
2	MEDICARE MANAGED CARE	2,234	2,352	118	5%
3	MEDICAID	6,240	6,767	527	8%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	16	36	20	125%
6	COMMERCIAL INSURANCE	1,937	2,322	385	20%
7	NON-GOVERNMENT MANAGED CARE	2,827	3,033	206	7%
8	WORKER'S COMPENSATION	90	78	(12)	-13%

**BRIDGEPORT HOSPITAL
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FISCAL YEAR 2016
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
9	SELF- PAY/UNINSURED	785	261	(524)	-67%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	19,815	20,657	842	4%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	41,277	37,682	(3,595)	-9%
2	MEDICARE MANAGED CARE	15,618	16,792	1,174	8%
3	MEDICAID	28,455	29,234	779	3%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	42	144	102	243%
6	COMMERCIAL INSURANCE	8,322	8,822	500	6%
7	NON-GOVERNMENT MANAGED CARE	12,217	11,744	(473)	-4%
8	WORKER'S COMPENSATION	466	293	(173)	-37%
9	SELF- PAY/UNINSURED	3,075	1,231	(1,844)	-60%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	109,472	105,942	(3,530)	-3%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	43,870	45,694	1,824	4%
2	MEDICARE MANAGED CARE	21,701	23,036	1,335	6%
3	MEDICAID	113,563	113,190	(373)	0%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	345	439	94	27%
6	COMMERCIAL INSURANCE	38,562	39,004	442	1%
7	NON-GOVERNMENT MANAGED CARE	54,879	56,970	2,091	4%
8	WORKER'S COMPENSATION	2,190	1,817	(373)	-17%
9	SELF- PAY/UNINSURED	12,967	14,175	1,208	9%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	288,077	294,325	6,248	2%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$22,827,748	\$21,987,909	(\$839,839)	-4%
2	MEDICARE MANAGED CARE	\$10,992,157	\$10,513,620	(\$478,537)	-4%
3	MEDICAID	\$120,439,985	\$116,611,292	(\$3,828,693)	-3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$279,649	\$334,699	\$55,050	20%
6	COMMERCIAL INSURANCE	\$22,751,435	\$21,541,113	(\$1,210,322)	-5%
7	NON-GOVERNMENT MANAGED CARE	\$29,609,688	\$30,442,866	\$833,178	3%
8	WORKER'S COMPENSATION	\$2,007,781	\$1,950,701	(\$57,080)	-3%
9	SELF- PAY/UNINSURED	\$14,490,390	\$15,686,604	\$1,196,214	8%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$223,398,833	\$219,068,804	(\$4,330,029)	-2%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$3,325,148	\$3,227,398	(\$97,750)	-3%

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	MEDICARE MANAGED CARE	\$1,436,701	\$1,407,975	(\$28,726)	-2%
3	MEDICAID	\$13,391,932	\$13,736,595	\$344,663	3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$53,649	\$42,041	(\$11,608)	-22%
6	COMMERCIAL INSURANCE	\$8,535,883	\$7,902,037	(\$633,846)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$9,468,979	\$10,409,412	\$940,433	10%
8	WORKER'S COMPENSATION	\$792,584	\$530,488	(\$262,096)	-33%
9	SELF- PAY/UNINSURED	\$3,947,603	\$3,050,367	(\$897,236)	-23%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$40,952,479	\$40,306,313	(\$646,166)	-2%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	5,750	5,740	(10)	0%
2	MEDICARE MANAGED CARE	2,802	2,745	(57)	-2%
3	MEDICAID	45,211	43,919	(1,292)	-3%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	121	147	26	21%
6	COMMERCIAL INSURANCE	7,050	6,719	(331)	-5%
7	NON-GOVERNMENT MANAGED CARE	9,111	9,522	411	5%
8	WORKER'S COMPENSATION	703	709	6	1%
9	SELF- PAY/UNINSURED	5,526	6,069	543	10%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	76,274	75,570	(704)	-1%

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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:				
1	Nursing Salaries	\$58,048,061	\$59,163,449	\$1,115,388	2%
2	Physician Salaries	\$14,415,875	\$15,535,039	\$1,119,164	8%
3	Non-Nursing, Non-Physician Salaries	\$84,157,064	\$83,955,512	(\$201,552)	0%
	Total Salaries & Wages	\$156,621,000	\$158,654,000	\$2,033,000	1%
B.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$15,773,784	\$14,121,639	(\$1,652,145)	-10%
2	Physician Fringe Benefits	\$2,895,000	\$2,621,112	(\$273,888)	-9%
3	Non-Nursing, Non-Physician Fringe Benefits	\$31,916,216	\$28,558,249	(\$3,357,967)	-11%
	Total Fringe Benefits	\$50,585,000	\$45,301,000	(\$5,284,000)	-10%
C.	Contractual Labor Fees:				
1	Nursing Fees	\$1,877,442	\$1,877,442	\$0	0%
2	Physician Fees	\$27,676,000	\$34,941,000	\$7,265,000	26%
3	Non-Nursing, Non-Physician Fees	\$49,765,859	\$49,765,859	\$0	0%
	Total Contractual Labor Fees	\$79,319,301	\$86,584,301	\$7,265,000	9%
D.	Medical Supplies and Pharmaceutical Cost:				
1	Medical Supplies	\$40,470,000	\$44,379,000	\$3,909,000	10%
2	Pharmaceutical Costs	\$12,094,000	\$15,017,000	\$2,923,000	24%
	Total Medical Supplies and Pharmaceutical Cost	\$52,564,000	\$59,396,000	\$6,832,000	13%
E.	Depreciation and Amortization:				
1	Depreciation-Building	\$16,206,000	\$16,880,000	\$674,000	4%
2	Depreciation-Equipment	\$14,942,000	\$15,564,000	\$622,000	4%
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$31,148,000	\$32,444,000	\$1,296,000	4%
F.	Bad Debts:				
1	Bad Debts	\$0	\$0	\$0	0%
G.	Interest Expense:				
1	Interest Expense	\$3,048,000	\$5,480,000	\$2,432,000	80%
H.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$6,225,000	\$7,861,000	\$1,636,000	26%
I.	Utilities:				
1	Water	\$426,410	\$401,138	(\$25,272)	-6%
2	Natural Gas	\$798,743	\$929,820	\$131,077	16%
3	Oil	\$0	\$0	\$0	0%
4	Electricity	\$4,025,277	\$3,501,189	(\$524,088)	-13%
5	Telephone	\$62,410	\$116,899	\$54,489	87%
6	Other Utilities	\$262	\$32,793	\$32,531	12416%
	Total Utilities	\$5,313,102	\$4,981,839	(\$331,263)	-6%
J.	Business Expenses:				
1	Accounting Fees	\$408,000	\$68,115	(\$339,885)	-83%
2	Legal Fees	\$148,411	\$84,948	(\$63,463)	-43%
3	Consulting Fees	\$633,481	\$500,330	(\$133,151)	-21%
4	Dues and Membership	\$762,801	\$891,205	\$128,404	17%
5	Equipment Leases	\$14,442	\$10,561	(\$3,881)	-27%
6	Building Leases	\$3,722,969	\$3,902,184	\$179,215	5%
7	Repairs and Maintenance	\$10,150,275	\$4,366,002	(\$5,784,273)	-57%
8	Insurance	\$631,621	\$668,311	\$36,690	6%
9	Travel	\$676,834	\$603,751	(\$73,083)	-11%
10	Conferences	\$5,740	\$8,258	\$2,518	44%
11	Property Tax	\$443,411	\$1,728,045	\$1,284,634	290%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
12	General Supplies	\$5,499,527	\$5,541,201	\$41,674	1%
13	Licenses and Subscriptions	\$484,662	\$532,429	\$47,767	10%
14	Postage and Shipping	\$407,476	\$328,273	(\$79,203)	-19%
15	Advertising	\$0	\$0	\$0	0%
16	Corporate parent/system fees	\$5,461,092	\$5,753,914	\$292,822	5%
17	Computer Software	\$179,524	\$133,545	(\$45,979)	-26%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$616,851	\$623,312	\$6,461	1%
20	Lab Fees / Red Cross charges	\$1,245,850	\$1,606,410	\$360,560	29%
21	Billing & Collection / Bank Fees	\$473,989	\$489,006	\$15,017	3%
22	Recruiting / Employee Education & Recognition	\$249,757	\$217,141	(\$32,616)	-13%
23	Laundry / Linen	\$2,446,103	\$2,391,134	(\$54,969)	-2%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$139,787	\$164,752	\$24,965	18%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$0	\$0	0%
28	Other Business Expenses	\$4,237,874	\$4,316,407	\$78,533	2%
	Total Business Expenses	\$39,040,477	\$34,929,234	(\$4,111,243)	-11%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$19,592,120	\$34,562,626	\$14,970,506	76%
	Total Operating Expenses - All Expense Categories*	\$443,456,000	\$470,194,000	\$26,738,000	6%
*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	\$34,776,450	\$42,704,541	\$7,928,091	23%
2	General Accounting	\$3,428,009	\$2,770,792	(\$657,217)	-19%
3	Patient Billing & Collection	\$15,975,168	\$16,592,257	\$617,089	4%
4	Admitting / Registration Office	\$72,425	\$6,638	(\$65,787)	-91%
5	Data Processing	\$21,261,779	\$22,726,467	\$1,464,688	7%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$53,082,174	\$47,859,951	(\$5,222,223)	-10%
8	Public Relations	\$0	\$0	\$0	0%
9	Purchasing	\$1,038,133	\$1,073,977	\$35,844	3%
10	Dietary and Cafeteria	\$5,010,086	\$5,207,642	\$197,556	4%
11	Housekeeping	\$4,707,580	\$5,442,174	\$734,594	16%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$4,770,394	\$4,900,473	\$130,079	3%
14	Security	\$2,677,637	\$2,679,155	\$1,518	0%
15	Repairs and Maintenance	\$7,519,375	\$13,329,024	\$5,809,649	77%
16	Central Sterile Supply	\$3,438,561	\$3,886,335	\$447,774	13%
17	Pharmacy Department	\$16,124,254	\$18,383,166	\$2,258,912	14%
18	Other General Services	\$35,206,796	\$37,007,873	\$1,801,077	5%
	Total General Services	\$209,088,821	\$224,570,465	\$15,481,644	7%
B.	Professional Services:				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$3,744,861	\$3,834,738	\$89,877	2%
4	Medical Records	\$160,474	\$159,664	(\$810)	-1%
5	Social Service	\$3,759,917	\$4,118,678	\$358,761	10%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$7,665,252	\$8,113,080	\$447,828	6%
C.	Special Services:				
1	Operating Room	\$24,696,802	\$27,708,435	\$3,011,633	12%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
2	Recovery Room	\$1,394,795	\$1,496,528	\$101,733	7%
3	Anesthesiology	\$1,333,226	\$1,197,259	(\$135,967)	-10%
4	Delivery Room	\$4,703,042	\$4,546,983	(\$156,059)	-3%
5	Diagnostic Radiology	\$9,407,369	\$9,052,578	(\$354,791)	-4%
6	Diagnostic Ultrasound	\$1,671,518	\$1,634,930	(\$36,588)	-2%
7	Radiation Therapy	\$4,756,287	\$3,632,452	(\$1,123,835)	-24%
8	Radioisotopes	\$1,142,824	\$935,115	(\$207,709)	-18%
9	CT Scan	\$1,510,592	\$1,407,209	(\$103,383)	-7%
10	Laboratory	\$13,920,082	\$14,249,225	\$329,143	2%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$14,147,335	\$15,442,915	\$1,295,580	9%
13	Electrocardiology	\$1,435,905	\$1,210,648	(\$225,257)	-16%
14	Electroencephalography	\$188,949	\$196,674	\$7,725	4%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$2,882,362	\$3,030,135	\$147,773	5%
19	Pulmonary Function	\$275,942	\$259,963	(\$15,979)	-6%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,939,830	\$1,935,138	(\$4,692)	0%
23	Renal Dialysis	\$746,311	\$888,679	\$142,368	19%
24	Emergency Room	\$24,100,559	\$26,130,057	\$2,029,498	8%
25	MRI	\$827,041	\$721,884	(\$105,157)	-13%
26	PET Scan	\$341,242	\$0	(\$341,242)	-100%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$2,827,175	\$2,880,181	\$53,006	2%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$5,355,777	\$5,606,061	\$250,284	5%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$0	\$0	0%
	Total Special Services	\$119,604,965	\$124,163,049	\$4,558,084	4%
D.	Routine Services:				
1	Medical & Surgical Units	\$47,670,718	\$50,511,060	\$2,840,342	6%
2	Intensive Care Unit	\$3,613,750	\$3,563,040	(\$50,710)	-1%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,649,098	\$2,935,218	\$286,120	11%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$2,158,616	\$390,590	(\$1,768,026)	-82%
10	Ambulatory Surgery	\$9,725,496	\$11,577,924	\$1,852,428	19%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$3,240,969	\$3,430,408	\$189,439	6%
13	Other Routine Services	\$1,900,426	\$1,932,807	\$32,381	2%
	Total Routine Services	\$70,959,073	\$74,341,047	\$3,381,974	5%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$36,137,889	\$39,006,359	\$2,868,470	8%
	Total Operating Expenses - All Departments*	\$443,456,000	\$470,194,000	\$26,738,000	6%
	*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$439,375,000	\$466,074,000	\$472,739,000
2	Other Operating Revenue	24,165,000	32,055,000	37,985,000
3	Total Operating Revenue	\$463,540,000	\$498,129,000	\$510,724,000
4	Total Operating Expenses	426,496,000	443,456,000	470,194,000
5	Income/(Loss) From Operations	\$37,044,000	\$54,673,000	\$40,530,000
6	Total Non-Operating Revenue	5,852,000	944,000	6,144,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$42,896,000	\$55,617,000	\$46,674,000
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	7.89%	10.95%	7.84%
2	Hospital Non Operating Margin	1.25%	0.19%	1.19%
3	Hospital Total Margin	9.14%	11.14%	9.03%
4	Income/(Loss) From Operations	\$37,044,000	\$54,673,000	\$40,530,000
5	Total Operating Revenue	\$463,540,000	\$498,129,000	\$510,724,000
6	Total Non-Operating Revenue	\$5,852,000	\$944,000	\$6,144,000
7	Total Revenue	\$469,392,000	\$499,073,000	\$516,868,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$42,896,000	\$55,617,000	\$46,674,000
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$100,811,000	\$110,843,000	\$116,790,000
2	Hospital Total Net Assets	\$155,833,000	\$168,564,000	\$182,225,000
3	Hospital Change in Total Net Assets	(\$20,027,000)	\$12,731,000	\$13,661,000
4	Hospital Change in Total Net Assets %	88.6%	8.2%	8.1%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
D.	<u>Cost Data Summary</u>			
1	<u>Ratio of Cost to Charges</u>	0.25	0.25	0.27
2	Total Operating Expenses	\$426,496,000	\$443,456,000	\$470,194,000
3	Total Gross Revenue	\$1,693,079,737	\$1,759,987,340	\$1,767,446,590
4	Total Other Operating Revenue	\$5,236,454	\$6,414,248	\$6,473,222
5	<u>Private Payment to Cost Ratio</u>	1.47	1.62	1.57
6	Total Non-Government Payments	\$198,001,904	\$227,480,796	\$213,598,644
7	Total Uninsured Payments	\$13,867,244	\$26,862,875	\$10,517,647
8	Total Non-Government Charges	\$544,853,123	\$548,094,394	\$537,268,544
9	Total Uninsured Charges	\$45,956,006	\$53,378,851	\$49,719,252
10	<u>Medicare Payment to Cost Ratio</u>	1.01	1.06	0.98
11	Total Medicare Payments	\$159,487,014	\$180,950,464	\$178,604,470
12	Total Medicare Charges	\$629,169,018	\$680,244,143	\$689,380,539
13	<u>Medicaid Payment to Cost Ratio</u>	0.71	0.63	0.69
14	Total Medicaid Payments	\$92,516,930	\$83,506,972	\$99,140,567
15	Total Medicaid Charges	\$516,578,722	\$530,402,255	\$538,813,414
16	<u>Uncompensated Care Cost</u>	\$17,291,595	\$12,584,936	\$14,146,676
17	Charity Care	\$13,389,500	\$13,728,345	\$16,129,090
18	Bad Debts	\$55,466,000	\$36,400,755	\$37,242,642
19	Total Uncompensated Care	\$68,855,500	\$50,129,100	\$53,371,732
20	<u>Uncompensated Care % of Total Expenses</u>	4.1%	2.8%	3.0%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
21	Total Operating Expenses	\$426,496,000	\$443,456,000	\$470,194,000
E. Liquidity Measures Summary				
1	Current Ratio	2	2	2
2	Total Current Assets	\$146,801,000	\$169,088,000	\$163,830,000
3	Total Current Liabilities	\$90,997,000	\$96,897,000	\$96,651,000
4	Days Cash on Hand	61	78	68
5	Cash and Cash Equivalents	\$28,527,000	\$25,968,000	\$25,249,000
6	Short Term Investments	37,860,000	61,779,000	56,146,000
7	Total Cash and Short Term Investments	\$66,387,000	\$87,747,000	\$81,395,000
8	Total Operating Expenses	\$426,496,000	\$443,456,000	\$470,194,000
9	Depreciation Expense	\$30,957,000	\$31,148,000	\$32,444,000
10	Operating Expenses less Depreciation Expense	\$395,539,000	\$412,308,000	\$437,750,000
11	Days Revenue in Patient Accounts Receivable	41	43	41
12	Net Patient Accounts Receivable	\$49,732,000	\$54,662,000	\$53,543,000
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$0	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$49,732,000	\$54,662,000	\$53,543,000
16	Total Net Patient Revenue	\$439,375,000	\$466,074,000	\$472,739,000
17	Average Payment Period	84	86	81
18	Total Current Liabilities	\$90,997,000	\$96,897,000	\$96,651,000
19	Total Operating Expenses	\$426,496,000	\$443,456,000	\$470,194,000
20	Depreciation Expense	\$30,957,000	\$31,148,000	\$32,444,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
21	Total Operating Expenses less Depreciation Expense	\$395,539,000	\$412,308,000	\$437,750,000
F. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	33.0	31.7	31.2
2	Total Net Assets	\$155,833,000	\$168,564,000	\$182,225,000
3	Total Assets	\$472,575,000	\$532,167,000	\$584,917,000
4	<u>Cash Flow to Total Debt Ratio</u>	38.7	37.6	30.7
5	Excess/(Deficiency) of Revenues Over Expenses	\$42,896,000	\$55,617,000	\$46,674,000
6	Depreciation Expense	\$30,957,000	\$31,148,000	\$32,444,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$73,853,000	\$86,765,000	\$79,118,000
8	Total Current Liabilities	\$90,997,000	\$96,897,000	\$96,651,000
9	Total Long Term Debt	\$100,042,000	\$133,681,000	\$161,133,000
10	Total Current Liabilities and Total Long Term Debt	\$191,039,000	\$230,578,000	\$257,784,000
11	<u>Long Term Debt to Capitalization Ratio</u>	39.1	44.2	46.9
12	Total Long Term Debt	\$100,042,000	\$133,681,000	\$161,133,000
13	Total Net Assets	\$155,833,000	\$168,564,000	\$182,225,000
14	Total Long Term Debt and Total Net Assets	\$255,875,000	\$302,245,000	\$343,358,000
15	<u>Debt Service Coverage Ratio</u>	11.7	11.6	7.6
16	Excess Revenues over Expenses	42,896,000	\$55,617,000	\$46,674,000
17	Interest Expense	2,566,000	\$3,048,000	\$5,480,000
18	Depreciation and Amortization Expense	30,957,000	\$31,148,000	\$32,444,000
19	Principal Payments	3,948,000	\$4,696,000	\$5,712,000
G. <u>Other Financial Ratios</u>				

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
20	<u>Average Age of Plant</u>	9.8	9.3	9.5
21	Accumulated Depreciation	303,677,000	289,391,000	309,517,000
22	Depreciation and Amortization Expense	30,957,000	31,148,000	32,444,000
H.	<u>Utilization Measures Summary</u>			
1	Patient Days	101,235	109,472	105,942
2	Discharges	18,207	19,815	20,657
3	ALOS	5.6	5.5	5.1
4	Staffed Beds	281	302	294
5	Available Beds	-	383	383
6	Licensed Beds	368	383	383
7	Occupancy of Staffed Beds	98.7%	99.3%	98.7%
8	Occupancy of Available Beds	75.4%	78.3%	75.8%
9	Full Time Equivalent Employees	2,151.0	2,137.9	2,159.5
I.	<u>Hospital Gross Revenue Payer Mix Percentage</u>			
1	Non-Government Gross Revenue Payer Mix Percentage	29.5%	28.1%	27.6%
2	Medicare Gross Revenue Payer Mix Percentage	37.2%	38.7%	39.0%
3	Medicaid Gross Revenue Payer Mix Percentage	30.5%	30.1%	30.5%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.7%	3.0%	2.8%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$498,897,117	\$494,715,543	\$487,549,292
9	Medicare Gross Revenue (Charges)	\$629,169,018	\$680,244,143	\$689,380,539
10	Medicaid Gross Revenue (Charges)	\$516,578,722	\$530,402,255	\$538,813,414
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$45,956,006	\$53,378,851	\$49,719,252
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$2,478,874	\$1,246,548	\$1,984,093
14	Total Gross Revenue (Charges)	\$1,693,079,737	\$1,759,987,340	\$1,767,446,590
J.	<u>Hospital Net Revenue Payer Mix Percentage</u>			
1	Non-Government Net Revenue Payer Mix Percentage	40.9%	40.8%	41.3%
2	Medicare Net Revenue Payer Mix Percentage	35.4%	36.8%	36.3%
3	Medicaid Net Revenue Payer Mix Percentage	20.5%	17.0%	20.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	3.1%	5.5%	2.1%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
8	Non-Government Net Revenue (Payments)	\$184,134,660	\$200,617,921	\$203,080,997
9	Medicare Net Revenue (Payments)	\$159,487,014	\$180,950,464	\$178,604,470
10	Medicaid Net Revenue (Payments)	\$92,516,930	\$83,506,972	\$99,140,567
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$13,867,244	\$26,862,875	\$10,517,647
13	CHAMPUS / TRICARE Net Revenue Payments)	\$731,387	\$272,912	\$285,835
14	Total Net Revenue (Payments)	\$450,737,235	\$492,211,144	\$491,629,516
K. Discharges				
1	Non-Government (Including Self Pay / Uninsured)	5,161	5,639	5,694
2	Medicare	6,958	7,920	8,160
3	Medical Assistance	6,057	6,240	6,767
4	Medicaid	6,057	6,240	6,767
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	31	16	36
7	Uninsured (Included In Non-Government)	215	785	261
8	Total	18,207	19,815	20,657
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.27940	1.28301	1.29208
2	Medicare	1.59206	1.64680	1.67246
3	Medical Assistance	1.07163	1.06882	1.12961
4	Medicaid	1.07163	1.06882	1.12961
5	Other Medical Assistance	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.13051	0.86005	0.92450
7	Uninsured (Included In Non-Government)	1.18129	1.03671	1.28950
8	Total Case Mix Index	1.32951	1.36062	1.38848
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	13,334	15,012	12,434
2	Emergency Room - Treated and Discharged	73,906	76,274	75,570
3	Total Emergency Room Visits	87,240	91,286	88,004

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	MEDICARE MANAGED CARE				
A.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$2,365,699	\$10,650,859	\$8,285,160	350%
2	Inpatient Payments	\$712,886	\$3,980,855	\$3,267,969	458%
3	Outpatient Charges	\$1,541,489	\$7,979,088	\$6,437,599	418%
4	Outpatient Payments	\$212,917	\$1,173,222	\$960,305	451%
5	Discharges	43	177	134	312%
6	Patient Days	353	1,461	1,108	314%
7	Outpatient Visits (Excludes ED Visits)	300	1,787	1,487	496%
8	Emergency Department Outpatient Visits	57	299	242	425%
9	Emergency Department Inpatient Admissions	41	147	106	259%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,907,188	\$18,629,947	\$14,722,759	377%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$925,803	\$5,154,077	\$4,228,274	457%
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	\$38,006,441	\$37,167,354	(\$839,087)	-2%
2	Inpatient Payments	\$12,007,762	\$10,094,834	(\$1,912,928)	-16%
3	Outpatient Charges	\$22,144,110	\$20,848,144	(\$1,295,966)	-6%
4	Outpatient Payments	\$3,351,672	\$3,428,442	\$76,770	2%
5	Discharges	653	632	(21)	-3%
6	Patient Days	4,592	4,260	(332)	-7%
7	Outpatient Visits (Excludes ED Visits)	5,339	5,402	63	1%
8	Emergency Department Outpatient Visits	543	494	(49)	-9%
9	Emergency Department Inpatient Admissions	563	503	(60)	-11%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$60,150,551	\$58,015,498	(\$2,135,053)	-4%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$15,359,434	\$13,523,276	(\$1,836,158)	-12%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$47,168,458	\$46,816,183	(\$352,275)	-1%
2	Inpatient Payments	\$14,837,086	\$12,646,682	(\$2,190,404)	-15%
3	Outpatient Charges	\$25,547,603	\$26,960,377	\$1,412,774	6%
4	Outpatient Payments	\$3,456,876	\$4,070,470	\$613,594	18%
5	Discharges	864	828	(36)	-4%
6	Patient Days	6,310	5,942	(368)	-6%
7	Outpatient Visits (Excludes ED Visits)	6,129	6,442	313	5%
8	Emergency Department Outpatient Visits	931	859	(72)	-8%
9	Emergency Department Inpatient Admissions	874	728	(146)	-17%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$72,716,061	\$73,776,560	\$1,060,499	1%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$18,293,962	\$16,717,152	(\$1,576,810)	-9%
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%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 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	\$19,838,815	\$20,054,658	\$215,843	1%
2	Inpatient Payments	\$6,094,036	\$5,522,821	(\$571,215)	-9%
3	Outpatient Charges	\$17,081,399	\$13,110,130	(\$3,971,269)	-23%
4	Outpatient Payments	\$2,371,095	\$1,939,978	(\$431,117)	-18%
5	Discharges	397	377	(20)	-5%
6	Patient Days	2,517	2,776	259	10%
7	Outpatient Visits (Excludes ED Visits)	3,934	3,153	(781)	-20%
8	Emergency Department Outpatient Visits	954	703	(251)	-26%
9	Emergency Department Inpatient Admissions	431	348	(83)	-19%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$36,920,214	\$33,164,788	(\$3,755,426)	-10%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,465,131	\$7,462,799	(\$1,002,332)	-12%
I.	AETNA				
1	Inpatient Charges	\$15,793,494	\$20,793,575	\$5,000,081	32%
2	Inpatient Payments	\$4,807,354	\$5,735,560	\$928,206	19%
3	Outpatient Charges	\$15,519,437	\$17,172,017	\$1,652,580	11%
4	Outpatient Payments	\$3,000,420	\$2,797,090	(\$203,330)	-7%
5	Discharges	277	338	61	22%
6	Patient Days	1,846	2,353	507	27%
7	Outpatient Visits (Excludes ED Visits)	3,197	3,507	310	10%
8	Emergency Department Outpatient Visits	317	390	73	23%
9	Emergency Department Inpatient Admissions	291	275	(16)	-5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$31,312,931	\$37,965,592	\$6,652,661	21%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,807,774	\$8,532,650	\$724,876	9%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J.	HUMANA				
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%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$123,172,907	\$135,482,629	\$12,309,722	10%
	TOTAL INPATIENT PAYMENTS	\$38,459,124	\$37,980,752	(\$478,372)	-1%
	TOTAL OUTPATIENT CHARGES	\$81,834,038	\$86,069,756	\$4,235,718	5%
	TOTAL OUTPATIENT PAYMENTS	\$12,392,980	\$13,409,202	\$1,016,222	8%
	TOTAL DISCHARGES	2,234	2,352	118	5%
	TOTAL PATIENT DAYS	15,618	16,792	1,174	8%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	18,899	20,291	1,392	7%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	2,802	2,745	(57)	-2%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	2,200	2,001	(199)	-9%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$205,006,945	\$221,552,385	\$16,545,440	8%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$50,852,104	\$51,389,954	\$537,850	1%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2015 ACTUAL	(4) FY 2016 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%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2015 ACTUAL	(4) FY 2016 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%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2016
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2015 ACTUAL	(4) FY 2016 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%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2016

REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$194,946,000	\$169,479,000	(\$25,467,000)	-13%
2	Short Term Investments	\$1,160,670,000	\$1,371,905,000	\$211,235,000	18%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$405,694,000	\$370,868,000	(\$34,826,000)	-9%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$45,816,000	\$47,064,000	\$1,248,000	3%
8	Prepaid Expenses	\$25,580,000	\$34,938,000	\$9,358,000	37%
9	Other Current Assets	\$57,779,000	\$52,599,000	(\$5,180,000)	-9%
	Total Current Assets	\$1,890,485,000	\$2,046,853,000	\$156,368,000	8%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$30,531,000	\$18,342,000	(\$12,189,000)	-40%
2	Board Designated for Capital Acquisition	\$96,951,000	\$83,216,000	(\$13,735,000)	-14%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$78,837,000	\$85,175,000	\$6,338,000	8%
	Total Noncurrent Assets Whose Use is Limited:	\$206,319,000	\$186,733,000	(\$19,586,000)	-9%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$420,800,000	\$538,193,000	\$117,393,000	28%
7	Other Noncurrent Assets	\$421,351,000	\$695,367,000	\$274,016,000	65%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$2,940,033,000	\$3,227,815,000	\$287,782,000	10%
2	Less: Accumulated Depreciation	\$1,551,286,000	\$1,720,124,000	\$168,838,000	\$0
	Property, Plant and Equipment, Net	\$1,388,747,000	\$1,507,691,000	\$118,944,000	9%
3	Construction in Progress	\$157,101,000	\$112,959,000	(\$44,142,000)	-28%
	Total Net Fixed Assets	\$1,545,848,000	\$1,620,650,000	\$74,802,000	5%
	Total Assets	\$4,484,803,000	\$5,087,796,000	\$602,993,000	13%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2016

REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$377,319,000	\$391,690,000	\$14,371,000	4%
2	Salaries, Wages and Payroll Taxes	\$122,564,000	\$178,547,000	\$55,983,000	46%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$51,101,000	\$63,467,000	\$12,366,000	24%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$92,866,000	\$85,004,000	(\$7,862,000)	-8%
	Total Current Liabilities	\$643,850,000	\$718,708,000	\$74,858,000	12%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$906,150,000	\$867,555,000	(\$38,595,000)	-4%
2	Notes Payable (Net of Current Portion)	\$107,159,000	\$141,110,000	\$33,951,000	32%
	Total Long Term Debt	\$1,013,309,000	\$1,008,665,000	(\$4,644,000)	0%
3	Accrued Pension Liability	\$339,901,000	\$401,409,000	\$61,508,000	18%
4	Other Long Term Liabilities	\$495,824,000	\$537,958,000	\$42,134,000	8%
	Total Long Term Liabilities	\$1,849,034,000	\$1,948,032,000	\$98,998,000	5%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$1,750,995,000	\$2,147,552,000	\$396,557,000	23%
2	Temporarily Restricted Net Assets	\$147,568,000	\$163,535,000	\$15,967,000	11%
3	Permanently Restricted Net Assets	\$93,356,000	\$109,969,000	\$16,613,000	18%
	Total Net Assets	\$1,991,919,000	\$2,421,056,000	\$429,137,000	22%
	Total Liabilities and Net Assets	\$4,484,803,000	\$5,087,796,000	\$602,993,000	13%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$12,297,458,000	\$12,486,307,000	\$188,849,000	2%
2	Less: Allowances	\$8,479,889,000	\$8,535,501,000	\$55,612,000	1%
3	Less: Charity Care	\$184,456,000	\$197,173,000	\$12,717,000	7%
4	Less: Other Deductions	\$58,900,000	\$70,278,000	\$11,378,000	19%
	Total Net Patient Revenue	\$3,574,213,000	\$3,683,355,000	\$109,142,000	3%
5	Provision for Bad Debts	\$81,528,000	\$104,084,000	\$22,556,000	28%
	Net Patient Service Revenue less provision for bad debts	\$3,492,685,000	\$3,579,271,000	\$86,586,000	2%
6	Other Operating Revenue	\$104,061,000	\$181,390,000	\$77,329,000	74%
7	Net Assets Released from Restrictions	\$5,534,000	\$26,243,000	\$20,709,000	374%
	Total Operating Revenue	\$3,602,280,000	\$3,786,904,000	\$184,624,000	5%
B. Operating Expenses:					
1	Salaries and Wages	\$1,390,520,000	\$1,436,675,000	\$46,155,000	3%
2	Fringe Benefits	\$467,952,000	\$467,576,000	(\$376,000)	0%
3	Physicians Fees	\$127,505,000	\$141,028,000	\$13,523,000	11%
4	Supplies and Drugs	\$572,515,000	\$626,422,203	\$53,907,203	9%
5	Depreciation and Amortization	\$185,944,000	\$191,544,000	\$5,600,000	3%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$24,188,000	\$28,912,000	\$4,724,000	20%
8	Malpractice Insurance Cost	\$64,096,000	\$81,093,078	\$16,997,078	27%
9	Other Operating Expenses	\$609,904,000	\$674,315,719	\$64,411,719	11%
	Total Operating Expenses	\$3,442,624,000	\$3,647,566,000	\$204,942,000	6%
	Income/(Loss) From Operations	\$159,656,000	\$139,338,000	(\$20,318,000)	-13%
C. Non-Operating Revenue:					
1	Income from Investments	\$5,099,000	\$14,692,000	\$9,593,000	188%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$35,200,000)	\$208,476,000	\$243,676,000	-692%
	Total Non-Operating Revenue	(\$30,101,000)	\$223,168,000	\$253,269,000	-841%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$129,555,000	\$362,506,000	\$232,951,000	180%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$14,536,000	\$97,402,000	\$82,866,000	570%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$14,536,000	\$97,402,000	\$82,866,000	570%
	Excess/(Deficiency) of Revenue Over Expenses	\$144,091,000	\$459,908,000	\$315,817,000	219%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2016

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$3,287,692,000	\$3,492,685,000	\$3,579,271,000
2	Other Operating Revenue	106,994,000	109,595,000	207,633,000
3	Total Operating Revenue	\$3,394,686,000	\$3,602,280,000	\$3,786,904,000
4	Total Operating Expenses	3,224,574,000	3,442,624,000	3,647,566,000
5	Income/(Loss) From Operations	\$170,112,000	\$159,656,000	\$139,338,000
6	Total Non-Operating Revenue	34,189,000	(15,565,000)	320,570,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$204,301,000	\$144,091,000	\$459,908,000
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	4.96%	4.45%	3.39%
2	Parent Corporation Non-Operating Margin	1.00%	-0.43%	7.80%
3	Parent Corporation Total Margin	5.96%	4.02%	11.20%
4	Income/(Loss) From Operations	\$170,112,000	\$159,656,000	\$139,338,000
5	Total Operating Revenue	\$3,394,686,000	\$3,602,280,000	\$3,786,904,000
6	Total Non-Operating Revenue	\$34,189,000	(\$15,565,000)	\$320,570,000
7	Total Revenue	\$3,428,875,000	\$3,586,715,000	\$4,107,474,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$204,301,000	\$144,091,000	\$459,908,000
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$1,644,056,000	\$1,750,995,000	\$2,147,552,000
2	Parent Corporation Total Net Assets	\$1,866,624,000	\$1,991,919,000	\$2,421,056,000
3	Parent Corporation Change in Total Net Assets	\$1,693,513,000	\$125,295,000	\$429,137,000
4	Parent Corporation Change in Total Net Assets %	1078.3%	6.7%	21.5%

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2016

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	2.97	2.94	2.85
2	Total Current Assets	\$1,683,007,000	\$1,890,485,000	\$2,046,853,000
3	Total Current Liabilities	\$567,557,000	\$643,850,000	\$718,708,000
4	<u>Days Cash on Hand</u>	145	152	163
5	Cash and Cash Equivalents	\$161,059,000	\$194,946,000	\$169,479,000
6	Short Term Investments	\$1,040,882,000	\$1,160,670,000	\$1,371,905,000
7	Total Cash and Short Term Investments	\$1,201,941,000	\$1,355,616,000	\$1,541,384,000
8	Total Operating Expenses	\$3,224,574,000	\$3,442,624,000	\$3,647,566,000
9	Depreciation Expense	\$192,072,000	\$185,944,000	\$191,544,000
10	Operating Expenses less Depreciation Expense	\$3,032,502,000	\$3,256,680,000	\$3,456,022,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	41	42	38
12	Net Patient Accounts Receivable	\$ 368,342,000	\$ 405,694,000	\$ 370,868,000
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$0	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 368,342,000	\$ 405,694,000	\$ 370,868,000
16	Total Net Patient Revenue	\$3,287,692,000	\$3,492,685,000	\$3,579,271,000
17	<u>Average Payment Period</u>	68	72	76
18	Total Current Liabilities	\$567,557,000	\$643,850,000	\$718,708,000
19	Total Operating Expenses	\$3,224,574,000	\$3,442,624,000	\$3,647,566,000
20	Depreciation Expense	\$192,072,000	\$185,944,000	\$191,544,000
20	Total Operating Expenses less Depreciation Expense	\$3,032,502,000	\$3,256,680,000	\$3,456,022,000

YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2016

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2014</u>	<u>FY 2015</u>	<u>FY 2016</u>
E. Solvency Measures Summary				
1	<u>Equity Financing Ratio</u>	44.1	44.4	47.6
2	Total Net Assets	\$1,866,624,000	\$1,991,919,000	\$2,421,056,000
3	Total Assets	\$4,233,177,000	\$4,484,803,000	\$5,087,796,000
4	<u>Cash Flow to Total Debt Ratio</u>	25.5	19.9	37.7
5	Excess/(Deficiency) of Revenues Over Expenses	\$204,301,000	\$144,091,000	\$459,908,000
6	Depreciation Expense	\$192,072,000	\$185,944,000	\$191,544,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$396,373,000	\$330,035,000	\$651,452,000
8	Total Current Liabilities	\$567,557,000	\$643,850,000	\$718,708,000
9	Total Long Term Debt	\$988,109,000	\$1,013,309,000	\$1,008,665,000
10	Total Current Liabilities and Total Long Term Debt	\$1,555,666,000	\$1,657,159,000	\$1,727,373,000
11	<u>Long Term Debt to Capitalization Ratio</u>	34.6	33.7	29.4
12	Total Long Term Debt	\$988,109,000	\$1,013,309,000	\$1,008,665,000
13	Total Net Assets	\$1,866,624,000	\$1,991,919,000	\$2,421,056,000
14	Total Long Term Debt and Total Net Assets	\$2,854,733,000	\$3,005,228,000	\$3,429,721,000

BRIDGEPORT HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2016								
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	73,697	14,670	15,847	202	254	100.0%	79.5%
2	ICU/CCU (Excludes Neonatal ICU)	7,000	353	0	20	32	95.9%	59.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	10,784	1,032	259	30	39	98.5%	75.8%
	TOTAL PSYCHIATRIC	10,784	1,032	259	30	39	98.5%	75.8%
5	Rehabilitation	851	58	42	3	3	77.7%	77.7%
6	Maternity	8,411	2,878	2,481	24	39	96.0%	59.1%
7	Newborn	5,199	2,019	2,040	15	16	95.0%	89.0%
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	100,743	18,638	18,629	279	367	98.9%	75.2%
	TOTAL INPATIENT BED UTILIZATION	105,942	20,657	20,669	294	383	98.7%	75.8%
	TOTAL INPATIENT REPORTED YEAR	105,942	20,657	20,669	294	383	98.7%	75.8%
	TOTAL INPATIENT PRIOR YEAR	109,472	19,815	19,135	302	383	99.3%	78.3%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-3,530	842	1,534	-8	0	-0.6%	-2.5%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-3%	4%	8%	-3%	0%	-1%	-3%
	Total Licensed Beds and Bassinets	383						
(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.								

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	11,258	12,506	1,248	11%
2	Outpatient Scans (Excluding Emergency Department Scans)	7,245	7,916	671	9%
3	Emergency Department Scans	8,601	7,869	-732	-9%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	27,104	28,291	1,187	4%
B. MRI Scans (A)					
1	Inpatient Scans	1,759	1,804	45	3%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,806	4,125	319	8%
3	Emergency Department Scans	237	152	-85	-36%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	5,802	6,081	279	5%
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	3	5	2	67%
2	Outpatient Scans (Excluding Emergency Department Scans)	406	616	210	52%
3	Emergency Department Scans	0	1	1	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	409	622	213	52%
(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	244	298	54	22%
2	Outpatient Procedures	11,349	10,929	-420	-4%
	Total Linear Accelerator Procedures	11,593	11,227	-366	-3%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	442	497	55	12%
2	Outpatient Procedures	497	596	99	20%
	Total Cardiac Catheterization Procedures	939	1,093	154	16%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	92	83	-9	-10%
2	Elective Procedures	67	54	-13	-19%
	Total Cardiac Angioplasty Procedures	159	137	-22	-14%
H. Electrophysiology Studies					
1	Inpatient Studies	124	118	-6	-5%
2	Outpatient Studies	359	421	62	17%
	Total Electrophysiology Studies	483	539	56	12%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	3,852	3,614	-238	-6%
2	Outpatient Surgical Procedures	8,900	9,096	196	2%
	Total Surgical Procedures	12,752	12,710	-42	0%
J. Endoscopy Procedures					
1	Inpatient Endoscopy Procedures	362	366	4	1%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
2	Outpatient Endoscopy Procedures	4,145	4,253	108	3%
	Total Endoscopy Procedures	4,507	4,619	112	2%
	K. Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	15,012	12,434	-2,578	-17%
2	Emergency Room Visits: Treated and Discharged	76,274	75,570	-704	-1%
	Total Emergency Room Visits	91,286	88,004	-3,282	-4%
	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	2	0	-2	-100%
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	19,056	14,521	-4,535	-24%
9	Specialty Clinic Visits	0	0	0	0%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	8,406	7,817	-589	-7%
13	Specialty Clinic Visits - Other Speciality Clinics	2,905	2,799	-106	-4%
	Total Hospital Clinic Visits	30,369	25,137	-5,232	-17%
	M. Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	80,298	78,899	-1,399	-2%
2	Cardiac Rehabilitation	4,202	4,146	-56	-1%
3	Chemotherapy	1,478	1,170	-308	-21%
4	Gastroenterology	7,062	7,265	203	3%
5	Other Outpatient Visits	88,394	102,139	13,745	16%
	Total Other Hospital Outpatient Visits	181,434	193,619	12,185	7%
	N. Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	666.6	677.8	11.2	2%
2	Total Physician FTEs	122.4	125.8	3.4	3%
3	Total Non-Nursing and Non-Physician FTEs	1,348.9	1,355.9	7.0	1%
	Total Hospital Full Time Equivalent Employees	2,137.9	2,159.5	21.6	1%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Bridgeport Hospital	8,900	9,096	196	2%
	Total Outpatient Surgical Procedures(A)	8,900	9,096	196	2%
B. Outpatient Endoscopy Procedures					
1	Bridgeport Hospital	4,145	4,253	108	3%
	Total Outpatient Endoscopy Procedures(B)	4,145	4,253	108	3%
C. Outpatient Hospital Emergency Room Visits					
1	Bridgeport Hospital	76,274	75,570	-704	-1%
	Total Outpatient Hospital Emergency Room Visits(C)	76,274	75,570	-704	-1%
(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.					

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$438,394,231	\$436,901,713	(\$1,492,518)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$141,330,892	\$134,836,551	(\$6,494,341)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	32.24%	30.86%	-1.38%	-4%
4	DISCHARGES	7,920	8,160	240	3%
5	CASE MIX INDEX (CMI)	1.64680	1.67246	0.02566	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	13,042.65600	13,647.27360	604.61760	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$10,836.05	\$9,880.11	(\$955.94)	-9%
8	PATIENT DAYS	56,895	54,474	(2,421)	-4%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,484.07	\$2,475.25	(\$8.82)	0%
10	AVERAGE LENGTH OF STAY	7.2	6.7	(0.5)	-7%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$241,849,912	\$252,478,826	\$10,628,914	4%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$39,619,572	\$43,767,919	\$4,148,347	10%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.38%	17.34%	0.95%	6%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	55.17%	57.79%	2.62%	5%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,369.24386	4,715.53935	346.29549	8%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,067.83	\$9,281.64	\$213.80	2%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$680,244,143	\$689,380,539	\$9,136,396	1%
18	TOTAL ACCRUED PAYMENTS	\$180,950,464	\$178,604,470	(\$2,345,994)	-1%
19	TOTAL ALLOWANCES	\$499,293,679	\$510,776,069	\$11,482,390	2%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
<u>NON-GOVERNMENT INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$214,836,674	\$202,622,724	(\$12,213,950)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$103,455,045	\$94,956,952	(\$8,498,093)	-8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	48.16%	46.86%	-1.29%	-3%
4	DISCHARGES	5,639	5,694	55	1%
5	CASE MIX INDEX (CMI)	1.28301	1.29208	0.00907	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,234.89339	7,357.10352	122.21013	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$14,299.46	\$12,906.84	(\$1,392.62)	-10%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,463.41)	(\$3,026.73)	\$436.68	-13%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$25,057,368)	(\$22,267,967)	\$2,789,401	-11%
10	PATIENT DAYS	24,080	22,090	(1,990)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,296.31	\$4,298.64	\$2.33	0%
12	AVERAGE LENGTH OF STAY	4.3	3.9	(0.4)	-9%
<u>NON-GOVERNMENT OUTPATIENT</u>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$333,257,720	\$334,645,820	\$1,388,100	0%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$124,025,751	\$118,641,692	(\$5,384,059)	-4%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	37.22%	35.45%	-1.76%	-5%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	155.12%	165.16%	10.04%	6%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	8,747.29741	9,404.04542	656.74800	8%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$14,178.75	\$12,616.03	(\$1,562.72)	-11%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$5,110.92)	(\$3,334.39)	\$1,776.53	-35%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$44,706,722)	(\$31,356,767)	\$13,349,955	-30%
<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>					
21	TOTAL ACCRUED CHARGES	\$548,094,394	\$537,268,544	(\$10,825,850)	-2%
22	TOTAL ACCRUED PAYMENTS	\$227,480,796	\$213,598,644	(\$13,882,152)	-6%
23	TOTAL ALLOWANCES	\$320,613,598	\$323,669,900	\$3,056,302	1%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$69,764,090)	(\$53,624,734)	\$16,139,356	-23%
<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$481,291,196	\$476,784,876	(\$4,506,320)	-1%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$287,018,071	\$277,391,098	(\$9,626,973)	-3%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$194,273,125	\$199,393,778	\$5,120,653	3%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	40.36%	41.82%	1.46%	

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
C.	<u>UNINSURED</u>				
	<u>UNINSURED INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$20,207,327	\$10,924,791	(\$9,282,536)	-46%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$10,449,109	\$5,502,869	(\$4,946,240)	-47%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	51.71%	50.37%	-1.34%	-3%
4	DISCHARGES	785	261	(524)	-67%
5	CASE MIX INDEX (CMI)	1.03671	1.28950	0.25279	24%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	813.81735	336.55950	(477.25785)	-59%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$12,839.62	\$16,350.36	\$3,510.74	27%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$1,459.83	(\$3,443.52)	(\$4,903.35)	-336%
9	MEDICARE - UNINSURED IP PMT / CMAD	(\$2,003.57)	(\$6,470.25)	(\$4,466.68)	223%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,630,542)	(\$2,177,624)	(\$547,082)	34%
11	PATIENT DAYS	3,075	1,231	(1,844)	-60%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,398.08	\$4,470.24	\$1,072.16	32%
13	AVERAGE LENGTH OF STAY	3.9	4.7	0.8	20%
	<u>UNINSURED OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$33,171,524	\$38,794,461	\$5,622,937	17%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$16,413,766	\$5,014,778	(\$11,398,988)	-69%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	49.48%	12.93%	-36.55%	-74%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	164.16%	355.10%	190.95%	116%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,288.62399	926.82362	(361.80037)	-28%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,737.44	\$5,410.71	(\$7,326.72)	-58%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$1,441.31	\$7,205.31	\$5,764.00	400%
21	MEDICARE - UNINSURED OP PMT / OPED	(\$3,669.60)	\$3,870.92	\$7,540.53	-205%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$4,728,739)	\$3,587,661	\$8,316,401	-176%
	<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$53,378,851	\$49,719,252	(\$3,659,599)	-7%
24	TOTAL ACCRUED PAYMENTS	\$26,862,875	\$10,517,647	(\$16,345,228)	-61%
25	TOTAL ALLOWANCES	\$26,515,976	\$39,201,605	\$12,685,629	48%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,359,282)	\$1,410,037	\$7,769,319	-122%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$222,828,904	\$233,980,593	\$11,151,689	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$40,320,958	\$51,084,429	\$10,763,471	27%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	18.10%	21.83%	3.74%	21%
4	DISCHARGES	6,240	6,767	527	8%
5	CASE MIX INDEX (CMI)	1.06882	1.12961	0.06079	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,669.43680	7,644.07087	974.63407	15%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,045.63	\$6,682.88	\$637.25	11%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$8,253.83	\$6,223.96	(\$2,029.87)	-25%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$4,790.42	\$3,197.23	(\$1,593.19)	-33%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$31,949,403	\$24,439,825	(\$7,509,578)	-24%
11	PATIENT DAYS	28,455	29,234	779	3%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,417.01	\$1,747.43	\$330.42	23%
13	AVERAGE LENGTH OF STAY	4.6	4.3	(0.2)	-5%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$307,573,351	\$304,832,821	(\$2,740,530)	-1%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$43,186,014	\$48,056,138	\$4,870,124	11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.04%	15.76%	1.72%	12%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	138.03%	130.28%	-7.75%	-6%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	8,613.14522	8,816.13160	202.98638	2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,013.97	\$5,450.93	\$436.97	9%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$9,164.79	\$7,165.09	(\$1,999.69)	-22%
21	MEDICARE - MEDICAID OP PMT / OPED	\$4,053.87	\$3,830.70	(\$223.16)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$34,916,545	\$33,771,985	(\$1,144,560)	-3%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$530,402,255	\$538,813,414	\$8,411,159	2%
24	TOTAL ACCRUED PAYMENTS	\$83,506,972	\$99,140,567	\$15,633,595	19%
25	TOTAL ALLOWANCES	\$446,895,283	\$439,672,847	(\$7,222,436)	-2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$66,865,948	\$58,211,809	(\$8,654,138)	-13%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$14,299.46	\$12,906.84	(\$1,392.62)	-10%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$10,836.05	\$9,880.11	(\$955.94)	-9%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$14,178.75	\$12,616.03	(\$1,562.72)	-11%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$9,067.83	\$9,281.64	\$213.80	2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>					
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$222,828,904	\$233,980,593	\$11,151,689	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$40,320,958	\$51,084,429	\$10,763,471	27%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	18.10%	21.83%	3.74%	21%
4	DISCHARGES	6,240	6,767	527	8%
5	CASE MIX INDEX (CMI)	1.06882	1.12961	0.06079	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	6,669.43680	7,644.07087	974.63407	15%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,045.63	\$6,682.88	\$637.25	11%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$8,253.83	\$6,223.96	(\$2,029.87)	-25%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,790.42	\$3,197.23	(\$1,593.19)	-33%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$31,949,403	\$24,439,825	(\$7,509,578)	-24%
11	PATIENT DAYS	28,455	29,234	779	3%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,417.01	\$1,747.43	\$330.42	23%
13	AVERAGE LENGTH OF STAY	4.6	4.3	(0.2)	-5%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$307,573,351	\$304,832,821	(\$2,740,530)	-1%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$43,186,014	\$48,056,138	\$4,870,124	11%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.04%	15.76%	1.72%	12%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	138.03%	130.28%	-7.75%	-6%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	8,613.14522	8,816.13160	202.98638	2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,013.97	\$5,450.93	\$436.97	9%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$9,164.79	\$7,165.09	(\$1,999.69)	-22%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,053.87	\$3,830.70	(\$223.16)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$34,916,545	\$33,771,985	(\$1,144,560)	-3%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$530,402,255	\$538,813,414	\$8,411,159	2%
24	TOTAL ACCRUED PAYMENTS	\$83,506,972	\$99,140,567	\$15,633,595	19%
25	TOTAL ALLOWANCES	\$446,895,283	\$439,672,847	(\$7,222,436)	-2%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
G. <u>CHAMPUS / TRICARE</u>					
<u>CHAMPUS / TRICARE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$410,349	\$911,152	\$500,803	122%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$91,862	\$168,167	\$76,305	83%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.39%	18.46%	-3.93%	-18%
4	DISCHARGES	16	36	20	125%
5	CASE MIX INDEX (CMI)	0.86005	0.92450	0.06445	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	13.76080	33.28200	19.52120	142%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,675.63	\$5,052.79	(\$1,622.84)	-24%
8	PATIENT DAYS	42	144	102	243%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,187.19	\$1,167.83	(\$1,019.36)	-47%
10	AVERAGE LENGTH OF STAY	2.6	4.0	1.4	52%
<u>CHAMPUS / TRICARE OUTPATIENT</u>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$836,199	\$1,072,941	\$236,742	28%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$181,050	\$117,668	(\$63,382)	-35%
<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>					
13	TOTAL ACCRUED CHARGES	\$1,246,548	\$1,984,093	\$737,545	59%
14	TOTAL ACCRUED PAYMENTS	\$272,912	\$285,835	\$12,923	5%
15	TOTAL ALLOWANCES	\$973,636	\$1,698,258	\$724,622	74%
H. <u>OTHER DATA</u>					
1	OTHER OPERATING REVENUE	\$6,414,248	\$6,473,222	\$58,974	1%
2	TOTAL OPERATING EXPENSES	\$443,456,000	\$470,194,000	\$26,738,000	6%
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)	\$13,728,345	\$16,129,090	\$2,400,745	17%
5	BAD DEBTS (CHARGES)	\$36,400,755	\$37,242,642	\$841,887	2%
6	UNCOMPENSATED CARE (CHARGES)	\$50,129,100	\$53,371,732	\$3,242,632	6%
7	COST OF UNCOMPENSATED CARE	\$16,190,179	\$16,986,883	\$796,705	5%
<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>					
8	TOTAL ACCRUED CHARGES	\$530,402,255	\$538,813,414	\$8,411,159	2%
9	TOTAL ACCRUED PAYMENTS	\$83,506,972	\$99,140,567	\$15,633,595	19%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$171,303,837	\$171,490,791	\$186,954	0%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$87,796,865	\$72,350,224	(\$15,446,641)	-18%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$876,470,158	\$874,416,182	(\$2,053,976)	0%
2	TOTAL INPATIENT PAYMENTS	\$285,198,757	\$281,046,099	(\$4,152,658)	-1%
3	TOTAL INPATIENT PAYMENTS / CHARGES	32.54%	32.14%	-0.40%	-1%
4	TOTAL DISCHARGES	19,815	20,657	842	4%
5	TOTAL CASE MIX INDEX	1.36062	1.38848	0.02785	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	26,960.74699	28,681.72999	1,720.98300	6%
7	TOTAL OUTPATIENT CHARGES	\$883,517,182	\$893,030,408	\$9,513,226	1%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	100.80%	102.13%	1.32%	1%
9	TOTAL OUTPATIENT PAYMENTS	\$207,012,387	\$210,583,417	\$3,571,030	2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.43%	23.58%	0.15%	1%
11	TOTAL CHARGES	\$1,759,987,340	\$1,767,446,590	\$7,459,250	0%
12	TOTAL PAYMENTS	\$492,211,144	\$491,629,516	(\$581,628)	0%
13	TOTAL PAYMENTS / TOTAL CHARGES	27.97%	27.82%	-0.15%	-1%
14	PATIENT DAYS	109,472	105,942	(3,530)	-3%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$661,633,484	\$671,793,458	\$10,159,974	2%
2	INPATIENT PAYMENTS	\$181,743,712	\$186,089,147	\$4,345,435	2%
3	GOVT. INPATIENT PAYMENTS / CHARGES	27.47%	27.70%	0.23%	1%
4	DISCHARGES	14,176	14,963	787	6%
5	CASE MIX INDEX	1.39150	1.42516	0.03366	2%
6	CASE MIX ADJUSTED DISCHARGES	19,725.85360	21,324.62647	1,598.77287	8%
7	OUTPATIENT CHARGES	\$550,259,462	\$558,384,588	\$8,125,126	1%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	83.17%	83.12%	-0.05%	0%
9	OUTPATIENT PAYMENTS	\$82,986,636	\$91,941,725	\$8,955,089	11%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.08%	16.47%	1.38%	9%
11	TOTAL CHARGES	\$1,211,892,946	\$1,230,178,046	\$18,285,100	2%
12	TOTAL PAYMENTS	\$264,730,348	\$278,030,872	\$13,300,524	5%
13	TOTAL PAYMENTS / CHARGES	21.84%	22.60%	0.76%	3%
14	PATIENT DAYS	85,392	83,852	(1,540)	-2%
15	TOTAL GOVERNMENT DEDUCTIONS	\$947,162,598	\$952,147,174	\$4,984,576	1%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	7.2	6.7	(0.5)	-7%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.3	3.9	(0.4)	-9%
3	UNINSURED	3.9	4.7	0.8	20%
4	MEDICAID	4.6	4.3	(0.2)	-5%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	2.6	4.0	1.4	52%
7	TOTAL AVERAGE LENGTH OF STAY	5.5	5.1	(0.4)	-7%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,759,987,340	\$1,767,446,590	\$7,459,250	0%
2	TOTAL GOVERNMENT DEDUCTIONS	\$947,162,598	\$952,147,174	\$4,984,576	1%
3	UNCOMPENSATED CARE	\$50,129,100	\$53,371,732	\$3,242,632	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$194,273,125	\$199,393,778	\$5,120,653	3%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0	0%
6	TOTAL ADJUSTMENTS	\$1,191,564,823	\$1,204,912,684	\$13,347,861	1%
7	TOTAL ACCRUED PAYMENTS	\$568,422,517	\$562,533,906	(\$5,888,611)	-1%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$568,422,517	\$562,533,906	(\$5,888,611)	-1%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3229696624	0.3182749109	(0.0046947515)	-1%
11	COST OF UNCOMPENSATED CARE	\$16,190,179	\$16,986,883	\$796,705	5%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$87,796,865	\$72,350,224	(\$15,446,641)	-18%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$103,987,044	\$89,337,108	(\$14,649,936)	-14%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$34,916,545	\$33,771,985	(\$1,144,560)	-3%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$6,359,282)	\$1,410,037	\$7,769,319	-122%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$28,557,264	\$35,182,022	\$6,624,758	23%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0	0.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$26,136,895)	(\$18,891,199)	\$7,245,696	-27.72%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$466,074,249	\$472,738,316	\$6,664,067	1.43%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,759,987,341	\$1,767,446,590	\$7,459,249	0.42%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$750,000	\$522,500	(\$227,500)	-30.33%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$50,879,100	\$53,894,232	\$3,015,132	5.93%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$214,836,674	\$202,622,724	(\$12,213,950)
2	MEDICARE	\$438,394,231	436,901,713	(\$1,492,518)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$222,828,904	233,980,593	\$11,151,689
4	MEDICAID	\$222,828,904	233,980,593	\$11,151,689
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$410,349	911,152	\$500,803
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$20,207,327	10,924,791	(\$9,282,536)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$661,633,484	\$671,793,458	\$10,159,974
	TOTAL INPATIENT CHARGES	\$876,470,158	\$874,416,182	(\$2,053,976)
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$333,257,720	\$334,645,820	\$1,388,100
2	MEDICARE	\$241,849,912	252,478,826	\$10,628,914
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$307,573,351	304,832,821	(\$2,740,530)
4	MEDICAID	\$307,573,351	304,832,821	(\$2,740,530)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$836,199	1,072,941	\$236,742
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$33,171,524	38,794,461	\$5,622,937
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$550,259,462	\$558,384,588	\$8,125,126
	TOTAL OUTPATIENT CHARGES	\$883,517,182	\$893,030,408	\$9,513,226
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$548,094,394	\$537,268,544	(\$10,825,850)
2	TOTAL MEDICARE	\$680,244,143	\$689,380,539	\$9,136,396
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$530,402,255	\$538,813,414	\$8,411,159
4	TOTAL MEDICAID	\$530,402,255	\$538,813,414	\$8,411,159
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$1,246,548	\$1,984,093	\$737,545
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$53,378,851	\$49,719,252	(\$3,659,599)
	TOTAL GOVERNMENT CHARGES	\$1,211,892,946	\$1,230,178,046	\$18,285,100
	TOTAL CHARGES	\$1,759,987,340	\$1,767,446,590	\$7,459,250
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$103,455,045	\$94,956,952	(\$8,498,093)
2	MEDICARE	\$141,330,892	134,836,551	(\$6,494,341)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$40,320,958	51,084,429	\$10,763,471
4	MEDICAID	\$40,320,958	51,084,429	\$10,763,471
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$91,862	168,167	\$76,305
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,449,109	5,502,869	(\$4,946,240)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$181,743,712	\$186,089,147	\$4,345,435
	TOTAL INPATIENT PAYMENTS	\$285,198,757	\$281,046,099	(\$4,152,658)
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$124,025,751	\$118,641,692	(\$5,384,059)
2	MEDICARE	\$39,619,572	43,767,919	\$4,148,347
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$43,186,014	48,056,138	\$4,870,124
4	MEDICAID	\$43,186,014	48,056,138	\$4,870,124
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$181,050	117,668	(\$63,382)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$16,413,766	5,014,778	(\$11,398,988)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$82,986,636	\$91,941,725	\$8,955,089
	TOTAL OUTPATIENT PAYMENTS	\$207,012,387	\$210,583,417	\$3,571,030
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$227,480,796	\$213,598,644	(\$13,882,152)
2	TOTAL MEDICARE	\$180,950,464	\$178,604,470	(\$2,345,994)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$83,506,972	\$99,140,567	\$15,633,595
4	TOTAL MEDICAID	\$83,506,972	\$99,140,567	\$15,633,595
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$272,912	\$285,835	\$12,923
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$26,862,875	\$10,517,647	(\$16,345,228)
	TOTAL GOVERNMENT PAYMENTS	\$264,730,348	\$278,030,872	\$13,300,524
	TOTAL PAYMENTS	\$492,211,144	\$491,629,516	(\$581,628)

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12.21%	11.46%	-0.74%
2	MEDICARE	24.91%	24.72%	-0.19%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.66%	13.24%	0.58%
4	MEDICAID	12.66%	13.24%	0.58%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.02%	0.05%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.15%	0.62%	-0.53%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	37.59%	38.01%	0.42%
	TOTAL INPATIENT PAYER MIX	49.80%	49.47%	-0.33%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.94%	18.93%	0.00%
2	MEDICARE	13.74%	14.28%	0.54%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17.48%	17.25%	-0.23%
4	MEDICAID	17.48%	17.25%	-0.23%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.05%	0.06%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.88%	2.19%	0.31%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	31.26%	31.59%	0.33%
	TOTAL OUTPATIENT PAYER MIX	50.20%	50.53%	0.33%
	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)	21.02%	19.31%	-1.70%
2	MEDICARE	28.71%	27.43%	-1.29%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.19%	10.39%	2.20%
4	MEDICAID	8.19%	10.39%	2.20%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.02%	0.03%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.12%	1.12%	-1.00%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	36.92%	37.85%	0.93%
	TOTAL INPATIENT PAYER MIX	57.94%	57.17%	-0.78%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.20%	24.13%	-1.07%
2	MEDICARE	8.05%	8.90%	0.85%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.77%	9.77%	1.00%
4	MEDICAID	8.77%	9.77%	1.00%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.04%	0.02%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.33%	1.02%	-2.31%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	16.86%	18.70%	1.84%
	TOTAL OUTPATIENT PAYER MIX	42.06%	42.83%	0.78%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,639	5,694	55
2	MEDICARE	7,920	8,160	240
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,240	6,767	527
4	MEDICAID	6,240	6,767	527
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	16	36	20
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	785	261	(524)
	TOTAL GOVERNMENT DISCHARGES	14,176	14,963	787
	TOTAL DISCHARGES	19,815	20,657	842
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24,080	22,090	(1,990)
2	MEDICARE	56,895	54,474	(2,421)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28,455	29,234	779
4	MEDICAID	28,455	29,234	779
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	42	144	102
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,075	1,231	(1,844)
	TOTAL GOVERNMENT PATIENT DAYS	85,392	83,852	(1,540)
	TOTAL PATIENT DAYS	109,472	105,942	(3,530)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.3	3.9	(0.4)
2	MEDICARE	7.2	6.7	(0.5)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.6	4.3	(0.2)
4	MEDICAID	4.6	4.3	(0.2)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	2.6	4.0	1.4
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.9	4.7	0.8
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	6.0	5.6	(0.4)
	TOTAL AVERAGE LENGTH OF STAY	5.5	5.1	(0.4)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.28301	1.29208	0.00907
2	MEDICARE	1.64680	1.67246	0.02566
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.06882	1.12961	0.06079
4	MEDICAID	1.06882	1.12961	0.06079
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.86005	0.92450	0.06445
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.03671	1.28950	0.25279
	TOTAL GOVERNMENT CASE MIX INDEX	1.39150	1.42516	0.03366
	TOTAL CASE MIX INDEX	1.36062	1.38848	0.02785
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$481,291,196	\$476,784,876	(\$4,506,320)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$287,018,071	\$277,391,098	(\$9,626,973)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$194,273,125	\$199,393,778	\$5,120,653
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	40.36%	41.82%	1.46%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0	\$0	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$13,728,345	\$16,129,090	\$2,400,745
9	BAD DEBTS	\$36,400,755	\$37,242,642	\$841,887
10	TOTAL UNCOMPENSATED CARE	\$50,129,100	\$53,371,732	\$3,242,632
11	TOTAL OTHER OPERATING REVENUE	\$6,414,248	\$6,473,222	\$58,974
12	TOTAL OPERATING EXPENSES	\$443,456,000	\$470,194,000	\$26,738,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,234.89339	7,357.10352	122.21013
2	MEDICARE	13,042.65600	13,647.27360	604.61760
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,669.43680	7,644.07087	974.63407
4	MEDICAID	6,669.43680	7,644.07087	974.63407
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	13.76080	33.28200	19.52120
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	813.81735	336.55950	(477.25785)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	19,725.85360	21,324.62647	1,598.77287
	TOTAL CASE MIX ADJUSTED DISCHARGES	26,960.74699	28,681.72999	1,720.98300
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,747.29741	9,404.04542	656.74800
2	MEDICARE	4,369.24386	4,715.53935	346.29549
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,613.14522	8,816.13160	202.98638
4	MEDICAID	8,613.14522	8,816.13160	202.98638
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	32.60440	42.39235	9.78795
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,288.62399	926.82362	-361.80037
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	13,014.99349	13,574.06330	559.06981
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	21,762.29090	22,978.10872	1,215.81782
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,299.46	\$12,906.84	(\$1,392.62)
2	MEDICARE	\$10,836.05	\$9,880.11	(\$955.94)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,045.63	\$6,682.88	\$637.25
4	MEDICAID	\$6,045.63	\$6,682.88	\$637.25
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$6,675.63	\$5,052.79	(\$1,622.84)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,839.62	\$16,350.36	\$3,510.74
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$9,213.48	\$8,726.49	(\$486.99)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$10,578.30	\$9,798.78	(\$779.51)
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,178.75	\$12,616.03	(\$1,562.72)
2	MEDICARE	\$9,067.83	\$9,281.64	\$213.80
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,013.97	\$5,450.93	\$436.97
4	MEDICAID	\$5,013.97	\$5,450.93	\$436.97
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,552.93	\$2,775.69	(\$2,777.24)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,737.44	\$5,410.71	(\$7,326.72)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,376.23	\$6,773.34	\$397.11
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,512.44	\$9,164.52	(\$347.91)

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$34,916,545	\$33,771,985	(\$1,144,560)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$6,359,282)	\$1,410,037	\$7,769,319
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$28,557,264	\$35,182,022	\$6,624,758
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,759,987,340	\$1,767,446,590	\$7,459,250
2	TOTAL GOVERNMENT DEDUCTIONS	\$947,162,598	\$952,147,174	\$4,984,576
3	UNCOMPENSATED CARE	\$50,129,100	\$53,371,732	\$3,242,632
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$194,273,125	\$199,393,778	\$5,120,653
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0	\$0	\$0
6	TOTAL ADJUSTMENTS	\$1,191,564,823	\$1,204,912,684	\$13,347,861
7	TOTAL ACCRUED PAYMENTS	\$568,422,517	\$562,533,906	(\$5,888,611)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$568,422,517	\$562,533,906	(\$5,888,611)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3229696624	0.3182749109	(0.0046947515)
11	COST OF UNCOMPENSATED CARE	\$16,190,179	\$16,986,883	\$796,705
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$87,796,865	\$72,350,224	(\$15,446,641)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$103,987,044	\$89,337,108	(\$14,649,936)
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	48.16%	46.86%	-1.29%
2	MEDICARE	32.24%	30.86%	-1.38%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	18.10%	21.83%	3.74%
4	MEDICAID	18.10%	21.83%	3.74%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	22.39%	18.46%	-3.93%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	51.71%	50.37%	-1.34%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	27.47%	27.70%	0.23%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	32.54%	32.14%	-0.40%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	37.22%	35.45%	-1.76%
2	MEDICARE	16.38%	17.34%	0.95%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.04%	15.76%	1.72%
4	MEDICAID	14.04%	15.76%	1.72%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	21.65%	10.97%	-10.68%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	49.48%	12.93%	-36.55%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	15.08%	16.47%	1.38%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	23.43%	23.58%	0.15%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	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	\$492,211,144	\$491,629,516	(\$581,628)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$492,211,144	\$491,629,516	(\$581,628)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$26,136,895)	(\$18,891,199)	\$7,245,696
4	CALCULATED NET REVENUE	\$502,475,004	\$472,738,317	(\$29,736,687)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$466,074,249	\$472,738,316	\$6,664,067
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$36,400,755	\$1	(\$36,400,754)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,759,987,340	\$1,767,446,590	\$7,459,250
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,759,987,340	\$1,767,446,590	\$7,459,250
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,759,987,341	\$1,767,446,590	\$7,459,249
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	\$0	\$1
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$50,129,100	\$53,371,732	\$3,242,632
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$750,000	\$522,500	(\$227,500)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$50,879,100	\$53,894,232	\$3,015,132
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$50,879,100	\$53,894,232	\$3,015,132
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

BRIDGEPORT HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2016		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2016
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$202,622,724
2	MEDICARE	436,901,713
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	233,980,593
4	MEDICAID	233,980,593
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	911,152
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	10,924,791
	TOTAL INPATIENT GOVERNMENT CHARGES	\$671,793,458
	TOTAL INPATIENT CHARGES	\$874,416,182
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$334,645,820
2	MEDICARE	252,478,826
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	304,832,821
4	MEDICAID	304,832,821
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,072,941
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	38,794,461
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$558,384,588
	TOTAL OUTPATIENT CHARGES	\$893,030,408
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$537,268,544
2	TOTAL GOVERNMENT ACCRUED CHARGES	1,230,178,046
	TOTAL ACCRUED CHARGES	\$1,767,446,590
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$94,956,952
2	MEDICARE	134,836,551
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	51,084,429
4	MEDICAID	51,084,429
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	168,167
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,502,869
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$186,089,147
	TOTAL INPATIENT PAYMENTS	\$281,046,099
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$118,641,692
2	MEDICARE	43,767,919
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	48,056,138
4	MEDICAID	48,056,138
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	117,668
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,014,778
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$91,941,725
	TOTAL OUTPATIENT PAYMENTS	\$210,583,417
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$213,598,644
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	278,030,872
	TOTAL ACCRUED PAYMENTS	\$491,629,516

BRIDGEPORT HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2016		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2016
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,694
2	MEDICARE	8,160
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,767
4	MEDICAID	6,767
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	36
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	261
	TOTAL GOVERNMENT DISCHARGES	14,963
	TOTAL DISCHARGES	20,657
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,29208
2	MEDICARE	1,67246
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,12961
4	MEDICAID	1,12961
5	OTHER MEDICAL ASSISTANCE	0,00000
6	CHAMPUS / TRICARE	0,92450
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,28950
	TOTAL GOVERNMENT CASE MIX INDEX	1,42516
	TOTAL CASE MIX INDEX	1,38848
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$476,784,876
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$277,391,098
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$199,393,778
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.82%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$16,129,090
9	BAD DEBTS	\$37,242,642
10	TOTAL UNCOMPENSATED CARE	\$53,371,732
11	TOTAL OTHER OPERATING REVENUE	\$6,473,222
12	TOTAL OPERATING EXPENSES	\$470,194,000

BRIDGEPORT HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2016		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2016
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	\$491,629,516
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$491,629,516
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$18,891,199)
	CALCULATED NET REVENUE	\$472,738,317
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$472,738,316
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$1
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$1,767,446,590
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,767,446,590
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,767,446,590
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$53,371,732
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$522,500
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$53,894,232
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$53,894,232
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
A. <u>Hospital Charity Care (from HRS Report 500)</u>					
1	Number of Applicants	2,985	2,292	(693)	-23%
2	Number of Approved Applicants	1,970	1,918	(52)	-3%
3	Total Charges (A)	\$13,728,345	\$16,129,090	\$2,400,745	17%
4	Average Charges	\$6,969	\$8,409	\$1,441	21%
5	Ratio of Cost to Charges (RCC)	0.251129	0.251050	(0.000079)	0%
6	Total Cost	\$3,447,586	\$4,049,208	\$601,622	17%
7	Average Cost	\$1,750	\$2,111	\$361	21%
8	Charity Care - Inpatient Charges	\$3,832,447	\$4,524,684	\$692,237	18%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	5,464,756	5,356,086	(108,670)	-2%
10	Charity Care - Emergency Department Charges	4,431,142	6,248,320	1,817,178	41%
11	Total Charges (A)	\$13,728,345	\$16,129,090	\$2,400,745	17%
12	Charity Care - Number of Patient Days	2,652	4,741	2,089	79%
13	Charity Care - Number of Discharges	643	953	310	48%
14	Charity Care - Number of Outpatient ED Visits	9,508	8,908	(600)	-6%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	8,213	9,392	1,179	14%
B. <u>Hospital Bad Debts (from HRS Report 500)</u>					
1	Bad Debts - Inpatient Services	\$10,161,748	\$10,447,656	\$285,908	3%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	14,489,819	12,367,393	(2,122,426)	-15%
3	Bad Debts - Emergency Department	11,749,188	14,427,593	2,678,405	23%
4	Total Bad Debts (A)	\$36,400,755	\$37,242,642	\$841,887	2%
C. <u>Hospital Uncompensated Care (from HRS Report 500)</u>					
1	Charity Care (A)	\$13,728,345	\$16,129,090	\$2,400,745	17%
2	Bad Debts (A)	36,400,755	37,242,642	841,887	2%
3	Total Uncompensated Care (A)	\$50,129,100	\$53,371,732	\$3,242,632	6%
4	Uncompensated Care - Inpatient Services	\$13,994,195	\$14,972,340	\$978,145	7%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	19,954,575	17,723,479	(2,231,096)	-11%
6	Uncompensated Care - Emergency Department	16,180,330	20,675,913	4,495,583	28%
7	Total Uncompensated Care (A)	\$50,129,100	\$53,371,732	\$3,242,632	6%

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

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2016					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016		
<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	\$481,291,196	\$476,784,876	(\$4,506,320)	-1%
2	Total Contractual Allowances	\$194,273,125	\$199,393,778	\$5,120,653	3%
	Total Accrued Payments (A)	\$287,018,071	\$277,391,098	(\$9,626,973)	-3%
	Total Discount Percentage	40.36%	41.82%	1.46%	4%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
A. Gross and Net Revenue				
1	Inpatient Gross Revenue	\$830,654,694	\$876,470,158	\$874,416,182
2	Outpatient Gross Revenue	\$862,425,043	\$883,517,182	\$893,030,408
3	Total Gross Patient Revenue	\$1,693,079,737	\$1,759,987,340	\$1,767,446,590
4	Net Patient Revenue	\$439,375,000	\$466,074,000	\$472,739,000
B. Total Operating Expenses				
1	Total Operating Expense	\$426,496,000	\$443,456,000	\$470,194,000
C. Utilization Statistics				
1	Patient Days	101,235	109,472	105,942
2	Discharges	18,207	19,815	20,657
3	Average Length of Stay	5.6	5.5	5.1
4	Equivalent (Adjusted) Patient Days (EPD)	206,342	219,824	214,139
0	Equivalent (Adjusted) Discharges (ED)	37,110	39,789	41,754
D. Case Mix Statistics				
1	Case Mix Index	1.32951	1.36062	1.38848
2	Case Mix Adjusted Patient Days (CMAPD)	134,593	148,950	147,098
3	Case Mix Adjusted Discharges (CMAD)	24,206	26,961	28,682
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	274,334	299,098	297,327
5	Case Mix Adjusted Equivalent Discharges (CMAED)	49,339	54,138	57,974
E. Gross Revenue Per Statistic				
1	Total Gross Revenue per Patient Day	\$16,724	\$16,077	\$16,683
2	Total Gross Revenue per Discharge	\$92,991	\$88,821	\$85,562
3	Total Gross Revenue per EPD	\$8,205	\$8,006	\$8,254
4	Total Gross Revenue per ED	\$45,623	\$44,233	\$42,330
5	Total Gross Revenue per CMAEPD	\$6,172	\$5,884	\$5,944
6	Total Gross Revenue per CMAED	\$34,315	\$32,509	\$30,487
7	Inpatient Gross Revenue per EPD	\$4,026	\$3,987	\$4,083
8	Inpatient Gross Revenue per ED	\$22,383	\$22,028	\$20,942

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$4,340	\$4,257	\$4,462
2	Net Patient Revenue per Discharge	\$24,132	\$23,521	\$22,885
3	Net Patient Revenue per EPD	\$2,129	\$2,120	\$2,208
4	Net Patient Revenue per ED	\$11,840	\$11,714	\$11,322
5	Net Patient Revenue per CMAEPD	\$1,602	\$1,558	\$1,590
6	Net Patient Revenue per CMAED	\$8,905	\$8,609	\$8,154
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$4,213	\$4,051	\$4,438
2	Total Operating Expense per Discharge	\$23,425	\$22,380	\$22,762
3	Total Operating Expense per EPD	\$2,067	\$2,017	\$2,196
4	Total Operating Expense per ED	\$11,493	\$11,145	\$11,261
5	Total Operating Expense per CMAEPD	\$1,555	\$1,483	\$1,581
6	Total Operating Expense per CMAED	\$8,644	\$8,191	\$8,110
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$53,745,825	\$58,048,061	\$59,163,449
2	Nursing Fringe Benefits Expense	\$13,784,956	\$15,773,784	\$14,121,639
3	Total Nursing Salary and Fringe Benefits Expense	\$67,530,781	\$73,821,845	\$73,285,088
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$13,355,748	\$14,415,875	\$15,535,039
2	Physician Fringe Benefits Expense	\$2,616,814	\$2,895,000	\$2,621,112
3	Total Physician Salary and Fringe Benefits Expense	\$15,972,562	\$17,310,875	\$18,156,151
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$86,349,427	\$84,157,064	\$83,955,512
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$31,703,230	\$31,916,216	\$28,558,249
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$118,052,657	\$116,073,280	\$112,513,761
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$153,451,000	\$156,621,000	\$158,654,000
2	Total Fringe Benefits Expense	\$48,105,000	\$50,585,000	\$45,301,000
3	Total Salary and Fringe Benefits Expense	\$201,556,000	\$207,206,000	\$203,955,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2016				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2014	ACTUAL FY 2015	ACTUAL FY 2016
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	616.4	666.6	677.8
2	Total Physician FTEs	117.0	122.4	125.8
3	Total Non-Nursing, Non-Physician FTEs	1417.6	1348.9	1355.9
4	Total Full Time Equivalent Employees (FTEs)	2,151.0	2,137.9	2,159.5
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$87,193	\$87,081	\$87,287
2	Nursing Fringe Benefits Expense per FTE	\$22,364	\$23,663	\$20,835
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$109,557	\$110,744	\$108,122
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$114,152	\$117,777	\$123,490
2	Physician Fringe Benefits Expense per FTE	\$22,366	\$23,652	\$20,836
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$136,518	\$141,429	\$144,326
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$60,912	\$62,389	\$61,919
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$22,364	\$23,661	\$21,062
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$83,276	\$86,050	\$82,981
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$71,339	\$73,259	\$73,468
2	Total Fringe Benefits Expense per FTE	\$22,364	\$23,661	\$20,978
3	Total Salary and Fringe Benefits Expense per FTE	\$93,703	\$96,920	\$94,445
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,991	\$1,893	\$1,925
2	Total Salary and Fringe Benefits Expense per Discharge	\$11,070	\$10,457	\$9,873
3	Total Salary and Fringe Benefits Expense per EPD	\$977	\$943	\$952
4	Total Salary and Fringe Benefits Expense per ED	\$5,431	\$5,208	\$4,885
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$735	\$693	\$686
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,085	\$3,827	\$3,518