	HARTFOR	D HOSPITAL						
	TWELVE MONTI	HS ACTUAL FILING						
	FISCAL	YEAR 2016						
	REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION							
(1)	(2)	(3)	(4)	(5)	(6)			
		FY 2015	FY 2016	AMOUNT	%			
<u>LINE</u>	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
I.	<u>ASSETS</u>							
Α.	Current Assets:							
1	Cash and Cash Equivalents	\$26,532,108	\$10,748,539	(\$15,783,569)	-59%			
2	Short Term Investments	\$0	\$0	\$0	0%			
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$130,223,226	\$143,861,135	\$13,637,909	10%			
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%			
5	Due From Affiliates	\$33,347,955	\$10,056,429	(\$23,291,526)	-70%			
6	Due From Third Party Payers	\$0	\$0	\$0	0%			
7	Inventories of Supplies	\$14,407,416	\$17,562,331	\$3,154,915	22%			
8	Prepaid Expenses	\$5,497,690	\$7,819,436	\$2,321,746	42%			
9	Other Current Assets	\$25,033,450	\$27,973,868	\$2,940,418	12%			
	Total Current Assets	\$235,041,845	\$218,021,738	(\$17,020,107)	-7%			
В.	Noncurrent Assets Whose Use is Limited:							
1	Held by Trustee	\$103,640,675	\$110,816,740	\$7,176,065	7%			
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%			
3	Funds Held in Escrow	\$115,105,522	\$73,381,872	(\$41,723,650)	-36%			
4	Other Noncurrent Assets Whose Use is Limited	\$371,218,140	\$396,440,354	\$25,222,214	7%			
-	Total Noncurrent Assets Whose Use is Limited:	\$589,964,337	\$580,638,966	(\$9,325,371)	-2%			
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%			
6	Long Term Investments	\$0	\$0	\$0	0%			
7	Other Noncurrent Assets	\$87,425,027	\$86,333,023	(\$1,092,004)	-1%			
C.	Net Fixed Assets:							
1	Property, Plant and Equipment	\$1,093,075,916	\$1,121,973,437	\$28,897,521	3%			
2	Less: Accumulated Depreciation	\$780,130,364	\$823,564,261	\$43,433,897	6%			
	Property, Plant and Equipment, Net	\$312,945,552	\$298,409,176	(\$14,536,376)	-5%			
3	Construction in Progress	\$65,382,860	\$151,838,554	\$86,455,694	132%			
	Total Net Fixed Assets	\$378,328,412	\$450,247,730	\$71,919,318	19%			
	Total Assets	\$1,290,759,621	\$1,335,241,457	\$44,481,836	3%			
		ψ1,200,100,021	\$1,000,241,401	Ψ-1,-101,000	370			

НА	RTFORD HOSPITAL						
TWELVE	MONTHS ACTUAL FILING						
F	ISCAL YEAR 2016						
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION							
(2)	(3) FY 2015	(4) FY 2016	(5) AMOUNT	(6) %			
DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE			
I IADII ITIES AND NET ASSETS							
<u>EIADIEITIEG AND NET AGGETG</u>							
Current Liabilities:							
Accounts Payable and Accrued Expenses	\$37,254,979	\$48,741,055	\$11,486,076	31%			
Salaries, Wages and Payroll Taxes	\$26,072,605	\$33,965,743	\$7,893,138	30%			
Due To Third Party Payers	\$32,918,197	\$30,963,410	(\$1,954,787)	-6%			
Due To Affiliates	\$8,496,065	\$13,267,451	\$4,771,386	56%			
Current Portion of Long Term Debt	\$1,292,984	\$1,392,891	\$99,907	8%			
Current Portion of Notes Payable	\$579,935	\$24,267,722	\$23,687,787	4085%			
Other Current Liabilities	\$37,810,549	\$48,325,817	\$10,515,268	28%			
Total Current Liabilities	\$144,425,314	\$200,924,089	\$56,498,775	39%			
Long Term Debt:							
	\$398.615.911	\$410.747.010	\$12.131.099	3%			
				-3%			
Total Long Term Debt	\$411,427,349	\$423,231,343	\$11,803,994	3%			
Accrued Pension Liability	\$229.350.990	\$326,751,108	\$97.400.118	42%			
				-1%			
Total Long Term Liabilities	\$687,811,208	\$796,638,585	\$108,827,377	16%			
Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%			
Net Assets:							
Unrestricted Net Assets or Equity	\$164,284,091	\$23,382,042	(\$140,902,049)	-86%			
Temporarily Restricted Net Assets	\$116,849,537	\$128,545,643	\$11,696,106	10%			
Permanently Restricted Net Assets	\$177,389,471	\$185,751,098	\$8,361,627	5%			
Total Net Assets	\$458,523,099	\$337,678,783	(\$120,844,316)	-26%			
Total Liabilities and Net Assets	\$1,290,759,621	\$1,335,241,457	\$44,481,836	3%			
	TWELVE  REPORT 100 - HOSP  (2)  DESCRIPTION  LIABILITIES AND NET ASSETS  Current Liabilities: Accounts Payable and Accrued Expenses Salaries, Wages and Payroll Taxes Due To Third Party Payers Due To Affiliates Current Portion of Long Term Debt Current Portion of Notes Payable Other Current Liabilities Total Current Liabilities  Long Term Debt: Bonds Payable (Net of Current Portion) Notes Payable (Net of Current Portion) Total Long Term Debt  Accrued Pension Liability Other Long Term Liabilities  Interest in Net Assets of Affiliates or Joint Ventures  Net Assets: Unrestricted Net Assets Permanently Restricted Net Assets  Total Net Assets  Total Net Assets  Total Net Assets	California   Cal	TWELVE MONTHS ACTUAL FILING   FISCAL YEAR 2016	TWELVE MONTHS ACTUAL FILING   FISCAL YEAR 2016			

		RTFORD HOSPITAL			
		MONTHS ACTUAL F	ILING		
	FI REPORT 150 - HOSPITAL ST	SCAL YEAR 2016	PATIONS INFORMA	TION	
(1)	(2) DESCRIPTION	(3) FY 2015 ACTUAL	(4) FY 2016 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
	On continue December				
A	Operating Revenue:	#0.007.040.04F	Фо 770 774 007	¢400.750.000	F0/
1	Total Gross Patient Revenue	\$2,637,012,215	\$2,773,771,607	\$136,759,392	5%
2	Less: Allowances	\$1,616,490,066	\$1,721,822,157	\$105,332,091	7% 1%
3 4	Less: Charity Care Less: Other Deductions	\$25,951,606 \$0	\$26,237,298	\$285,692 \$0	1% 0%
4	Total Net Patient Revenue	\$994,570,543	\$0 \$1,025,712,152	\$31,141,609	3%
				. , , ,	
5	Provision for Bad Debts  Net Patient Service Revenue less provision for bad	\$14,135,723	\$4,020,775	(\$10,114,948)	-72%
	Other Operating Revenue	\$980,434,820	\$1,021,691,377	\$41,256,557	4%
6	Other Operating Revenue	\$102,066,742	\$99,838,411	(\$2,228,331)	-2%
7	Net Assets Released from Restrictions	\$12,325,759	\$10,037,136	(\$2,288,623)	-19%
	Total Operating Revenue	\$1,094,827,321	\$1,131,566,924	\$36,739,603	3%
В.	Operating Expenses:				
1	Salaries and Wages	\$424,422,584	\$414,371,503	(\$10,051,081)	-2%
2	Fringe Benefits	\$100,250,753	\$73,370,803	(\$26,879,950)	-27%
3	Physicians Fees	\$55,612,217	\$55,666,273	\$54,056	0%
4	Supplies and Drugs	\$158,174,965	\$189,624,778	\$31,449,813	20%
5	Depreciation and Amortization	\$48,151,764	\$45,004,340	(\$3,147,424)	-7%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$11,557,893	\$12,644,818	\$1,086,925	9%
8	Malpractice Insurance Cost	\$9,083,056	\$10,440,838	\$1,357,782	15%
9	Other Operating Expenses	\$226,046,176	\$281,797,128	\$55,750,952	25%
	Total Operating Expenses	\$1,033,299,408	\$1,082,920,481	\$49,621,073	5%
	Income/(Loss) From Operations	\$61,527,913	\$48,646,443	(\$12,881,470)	-21%
C.	Non-Operating Revenue:				
1	Income from Investments	(\$4,985,221)	\$20,249,256	\$25,234,477	-506%
2	Gifts, Contributions and Donations	\$51,311	\$67,463	\$16,152	31%
3	Other Non-Operating Gains/(Losses)	\$1,200,649	(\$4,780,122)	(\$5,980,771)	-498%
	Total Non-Operating Revenue	(\$3,733,261)	\$15,536,597	\$19,269,858	-516%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$57,794,652	\$64,183,040	\$6,388,388	11%
	Other Adjustments:				
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Evacos//Deficiency) of Poyers and Over Evacos	¢E7 704 650	¢64.402.040	¢c 200 200	440/
	Excess/(Deficiency) of Revenue Over Expenses Principal Payments	<b>\$57,794,652</b> \$2,186,012	<b>\$64,183,040</b> \$1,757,281	\$6,388,388	<b>11%</b> -20%
	ι πιωρα Γαγιπειπο	φ∠,100,012	φ1,757,261	(\$428,731)	-20%

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

LINE   DESCRIPTION	(1)	(2)	(3)	(4)	(5)	(6)
A.     ACTUAL   ACTUAL   DIFFERNCE   DIFFERNCE   DIFFERNCE		V	1 1	` '	` '	` ′
I.   GROSS REVENUE BY PAYER	l	DESCRIPTION				
A.   NPATIENT GROSS REVENUE	LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A.   NPATIENT GROSS REVENUE						
A.   NPATIENT GROSS REVENUE		GROSS REVENUE BY PAYER				
MEDICARE TRADITIONAL   \$639,569,117   \$643,314,821   \$3,745,704   1%   1%   1%   1%   1%   1%   1%   1						
MEDICARE MANAGED CARE   \$199,005,289   \$221,180,200   \$22,174,920   119,	Α.	INPATIENT GROSS REVENUE				
MEDICAID	1	MEDICARE TRADITIONAL	\$639,569,117	\$643,314,821	\$3,745,704	1%
MEDICAID MANAGED CARE   \$10,920,271   \$13,264,479   \$2,344,208   21%	2	MEDICARE MANAGED CARE	\$199,005,289	\$221,180,209	\$22,174,920	11%
5 CHAMPUSTRICARE         \$10,920,271         \$13,244,479         \$2,344,208         21%           6 COMMERCIAL INSURANCE         \$14,864,410         \$10,599,820         (\$4,264,590)         -29%           7 NON-GOVERNMENT MANAGED CARE         \$431,602,256         \$461,286,753         \$29,684,497         7%           8 WORKER'S COMPENSATION         \$0         \$0         \$0         0%           9 SELF-PAYUNINSURED         \$13,460,763         \$16,722,127         \$32,613,644         24%           10 SAGA         \$0         \$0         \$0         0%           11 OTHER         \$0         \$0         \$0         0%           10 THER         \$0         \$0         \$0         0%           11 OTHER         \$1,622,989,767         \$1,711,743,511         \$88,753,744         5%           12 MEDICARE TRADITIONAL         \$272,629,398         \$276,888,462         \$42,239,064         2%           2 MEDICARE TRADITIONAL         \$272,629,398         \$276,888,462         \$42,239,064         2%           3 MEDICAID         \$228,280,330         \$246,411,380         \$181,310,50         8%           3 MEDICAID         \$228,280,330         \$246,411,380         \$181,310,50         8%           4 MEDICAID MANAGED CARE	3	MEDICAID	\$313,567,661	\$345,375,302	\$31,807,641	10%
6 COMMERCIAL INSURANCE \$14,864,410 \$10,599,820 (\$4,264,590) .229% 8 WORKER'S COMPENSATION \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
T. NON-GOVERNMENT MANAGED CARE   \$431,602,256   \$461,286,753   \$29,684,497   7%	5	CHAMPUS/TRICARE	\$10,920,271	\$13,264,479	\$2,344,208	21%
WORKER'S COMPENSATION   \$0   \$0   \$0   \$0   \$0   \$0   \$0   \$	6	COMMERCIAL INSURANCE	\$14,864,410	\$10,599,820	(\$4,264,590)	-29%
SELF- PAY/UNINSURED	7	NON-GOVERNMENT MANAGED CARE	\$431,602,256	\$461,286,753	\$29,684,497	7%
10   SAGA	8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
11 OTHER	9	SELF- PAY/UNINSURED	\$13,460,763	\$16,722,127	\$3,261,364	24%
TOTAL INPATIENT GROSS REVENUE   \$1,622,989,767   \$1,711,743,511   \$88,753,744   5%	10	SAGA	\$0	\$0	\$0	0%
B. OUTPATIENT GROSS REVENUE	11	OTHER	\$0	\$0	\$0	0%
MEDICARE TRADITIONAL   \$272,629,398 \$276,868,462 \$4,239,064   2%		TOTAL INPATIENT GROSS REVENUE	\$1,622,989,767	\$1,711,743,511	\$88,753,744	5%
MEDICARE MANAGED CARE	B.	OUTPATIENT GROSS REVENUE				
MEDICARE MANAGED CARE	1	MEDICARE TRADITIONAL	\$272,629,398	\$276,868,462	\$4,239,064	2%
MEDICAID MANAGED CARE   \$0 \$0 \$0 \$0 0%	2	MEDICARE MANAGED CARE	\$103,968,716	\$112,928,411		9%
5         CHAMPUS/TRICARE         \$5,310,131         \$5,701,538         \$391,407         7%           6         COMMERCIAL INSURANCE         \$11,413,728         \$7,125,815         (\$4,287,913)         -38%           7         NON-GOVERNMENT MANAGED CARE         \$363,310,264         \$381,801,921         \$18,491,657         5%           8         WORKER'S COMPENSATION         \$0         \$0         \$0         90         \$0         0%           9         SELF-PAYUNINSURED         \$28,800,715         \$31,190,567         \$2,389,852         8%           10         SAGA         \$0         \$0         \$0         \$0         90           11         OTHER         \$0         \$0         \$0         90         90           12         TOTAL OUTPATIENT GROSS REVENUE         \$1,013,713,282         \$1,062,028,094         \$48,314,812         5%           C.         TOTAL GROSS REVENUE         \$10,013,713,282         \$1,062,028,094         \$48,314,812         5%           C.         TOTAL GROSS REVENUE         \$10,013,713,282         \$1,062,028,094         \$48,314,812         5%           C.         TOTAL GROSS REVENUE         \$12,198,515         \$920,183,283         \$7,984,768         1%           MEDICARE MA	3	MEDICAID	\$228,280,330	\$246,411,380	\$18,131,050	8%
6         COMMERCIAL INSURANCE         \$11,413,728         \$7,125,815         (\$4,287,913)         -38%           7         NON-GOVERNMENT MANAGED CARE         \$363,310,264         \$381,801,921         \$18,491,657         5%           8         WORKER'S COMPENSATION         \$0         \$0         \$0         0           9         SELF-PAY/UNINSURED         \$28,800,715         \$31,190,567         \$2,389,852         8%           10         SAGA         \$0         \$0         \$0         0%           11         OTHER         \$0         \$0         \$0         0%           11         OTHER         \$0         \$0         \$0         0%           1         OTHER         \$0         \$0         \$0         0%           1         OTHER         \$0         \$0         \$0         0%           1         MEDICARE TRADITIONAL         \$912,198,515         \$920,183,283         \$7,984,768         1%           2         MEDICARE MANAGED CARE         \$302,974,005         \$334,108,620         \$31,134,615         10%           3         MEDICAID MANAGED CARE         \$302,974,005         \$334,108,620         \$31,134,615         10%           4         MEDICAID MANAGED CARE	4	MEDICAID MANAGED CARE	\$0		\$0	0%
NON-GOVERNMENT MANAGED CARE   \$363,310,264   \$381,801,921   \$18,491,657   5%	5	CHAMPUS/TRICARE	\$5,310,131	\$5,701,538	\$391,407	7%
8         WORKER'S COMPENSATION         \$0         \$0         \$0         0%           9         SELF- PAY/UNINSURED         \$28,800,715         \$31,190,567         \$2,389,852         8%           10         SAGA         \$0         \$0         \$0         0%           11         OTHER         \$0         \$0         \$0         0%           TOTAL OUTPATIENT GROSS REVENUE         \$1,013,713,282         \$1,062,028,094         \$48,314,812         5%           C.         TOTAL GROSS REVENUE         ** <td>6</td> <td>COMMERCIAL INSURANCE</td> <td>\$11,413,728</td> <td>\$7,125,815</td> <td>(\$4,287,913)</td> <td>-38%</td>	6	COMMERCIAL INSURANCE	\$11,413,728	\$7,125,815	(\$4,287,913)	-38%
9         SELF-PAY/UNINSURED         \$28,800,715         \$31,190,567         \$2,389,852         8%           10         SAGA         \$0         \$0         \$0         0%           11         OTHER         \$0         \$0         \$0         0%           10         OTHER         \$0         \$0         \$0         0%           1         OTHER         \$1,013,713,282         \$1,062,028,094         \$48,314,812         5%           C.         TOTAL GROSS REVENUE	7	NON-GOVERNMENT MANAGED CARE	\$363,310,264	\$381,801,921	\$18,491,657	5%
10   SAGA	8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
TOTAL OUTPATIENT GROSS REVENUE   \$1,013,713,282 \$1,062,028,094 \$48,314,812   5%	9	SELF- PAY/UNINSURED	\$28,800,715	\$31,190,567	\$2,389,852	8%
TOTAL OUTPATIENT GROSS REVENUE \$1,013,713,282 \$1,062,028,094 \$48,314,812 5%  C. TOTAL GROSS REVENUE \$912,198,515 \$920,183,283 \$7,984,768 11%  MEDICARE TRADITIONAL \$912,198,515 \$920,183,283 \$7,984,768 11%  MEDICARE MANAGED CARE \$302,974,005 \$334,108,620 \$31,134,615 10%  MEDICAID \$541,847,991 \$591,786,682 \$49,938,691 9%  MEDICAID MANAGED CARE \$0 \$0 \$0 \$0 0%  CHAMPUS/TRICARE \$16,230,402 \$18,966,017 \$2,735,615 17%  COMMERCIAL INSURANCE \$26,278,138 \$17,725,635 (\$8,552,503) -33%  NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$44,176,154 6%  WORKER'S COMPENSATION \$0 \$0 0%  9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13%  10 SAGA \$0 \$0 \$0 0%  TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	10	SAGA	\$0	\$0	\$0	0%
C . TOTAL GROSS REVENUE  1 MEDICARE TRADITIONAL \$912,198,515 \$920,183,283 \$7,984,768 1% 2 MEDICARE MANAGED CARE \$302,974,005 \$334,108,620 \$31,134,615 10% 3 MEDICAID \$541,847,991 \$591,786,682 \$49,938,691 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 0% 5 CHAMPUS/TRICARE \$16,230,402 \$18,966,017 \$2,735,615 17% 6 COMMERCIAL INSURANCE \$26,278,138 \$17,725,635 (\$8,552,503) -33% 7 NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$48,176,154 6% 8 WORKER'S COMPENSATION \$0 \$0 \$0 0% 9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 \$0  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	11	OTHER	\$0	\$0	\$0	0%
1       MEDICARE TRADITIONAL       \$912,198,515       \$920,183,283       \$7,984,768       1%         2       MEDICARE MANAGED CARE       \$302,974,005       \$334,108,620       \$31,134,615       10%         3       MEDICAID       \$541,847,991       \$591,786,682       \$49,938,691       9%         4       MEDICAID MANAGED CARE       \$0       \$0       \$0       0%         5       CHAMPUS/TRICARE       \$16,230,402       \$18,966,017       \$2,735,615       17%         6       COMMERCIAL INSURANCE       \$26,278,138       \$17,725,635       (\$8,552,503)       -33%         7       NON-GOVERNMENT MANAGED CARE       \$794,912,520       \$843,088,674       \$48,176,154       6%         8       WORKER'S COMPENSATION       \$0       \$0       \$0       \$0         9       SELF- PAY/UNINSURED       \$42,261,478       \$47,912,694       \$5,651,216       13%         10       SAGA       \$0       \$0       \$0       \$0       0%         11       OTHER       \$0       \$0       \$0       \$0       \$0       \$0         10       TOTAL GROSS REVENUE       \$2,636,703,049       \$2,773,771,605       \$137,068,556       5%         II.       MEDICARE TRADITIO		TOTAL OUTPATIENT GROSS REVENUE	\$1,013,713,282	\$1,062,028,094	\$48,314,812	5%
1       MEDICARE TRADITIONAL       \$912,198,515       \$920,183,283       \$7,984,768       1%         2       MEDICARE MANAGED CARE       \$302,974,005       \$334,108,620       \$31,134,615       10%         3       MEDICAID       \$541,847,991       \$591,786,682       \$49,938,691       9%         4       MEDICAID MANAGED CARE       \$0       \$0       \$0       0%         5       CHAMPUS/TRICARE       \$16,230,402       \$18,966,017       \$2,735,615       17%         6       COMMERCIAL INSURANCE       \$26,278,138       \$17,725,635       (\$8,552,503)       -33%         7       NON-GOVERNMENT MANAGED CARE       \$794,912,520       \$843,088,674       \$48,176,154       6%         8       WORKER'S COMPENSATION       \$0       \$0       \$0       \$0         9       SELF- PAY/UNINSURED       \$42,261,478       \$47,912,694       \$5,651,216       13%         10       SAGA       \$0       \$0       \$0       \$0       0%         11       OTHER       \$0       \$0       \$0       \$0       \$0       \$0         10       TOTAL GROSS REVENUE       \$2,636,703,049       \$2,773,771,605       \$137,068,556       5%         II.       MEDICARE TRADITIO						
2 MEDICARE MANAGED CARE \$302,974,005 \$334,108,620 \$31,134,615 10% 3 MEDICAID \$541,847,991 \$591,786,682 \$49,938,691 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 \$0 0% 5 CHAMPUS/TRICARE \$16,230,402 \$18,966,017 \$2,735,615 17% 6 COMMERCIAL INSURANCE \$26,278,138 \$17,725,635 (\$8,552,503) -33% 7 NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$48,176,154 6% 8 WORKER'S COMPENSATION \$0 \$0 \$0 0% 9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0%  TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%		i'				
3 MEDICAID \$541,847,991 \$591,786,682 \$49,938,691 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 0% 5 CHAMPUS/TRICARE \$16,230,402 \$18,966,017 \$2,735,615 17% 6 COMMERCIAL INSURANCE \$26,278,138 \$17,725,635 (\$8,552,503) -33% 7 NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$48,176,154 6% 8 WORKER'S COMPENSATION \$0 \$0 \$0 0% 9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0% TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	_					
4 MEDICAID MANAGED CARE \$0 \$0 \$0 0%  5 CHAMPUS/TRICARE \$16,230,402 \$18,966,017 \$2,735,615 17%  6 COMMERCIAL INSURANCE \$26,278,138 \$17,725,635 (\$8,552,503) -33%  7 NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$48,176,154 6%  8 WORKER'S COMPENSATION \$0 \$0 \$0 0%  9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13%  10 SAGA \$0 \$0 \$0 \$0 0%  11 OTHER \$0 \$0 \$0 \$0 0%  TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%			. , ,	. , ,		
5 CHAMPUS/TRICARE         \$16,230,402         \$18,966,017         \$2,735,615         17%           6 COMMERCIAL INSURANCE         \$26,278,138         \$17,725,635         (\$8,552,503)         -33%           7 NON-GOVERNMENT MANAGED CARE         \$794,912,520         \$843,088,674         \$48,176,154         6%           8 WORKER'S COMPENSATION         \$0         \$0         \$0         0%           9 SELF- PAY/UNINSURED         \$42,261,478         \$47,912,694         \$5,651,216         13%           10 SAGA         \$0         \$0         \$0         0%           11 OTHER         \$0         \$0         \$0         0%           TOTAL GROSS REVENUE         \$2,636,703,049         \$2,773,771,605         \$137,068,556         5%           II.         NET REVENUE BY PAYER           A.         INPATIENT NET REVENUE         \$229,464,353         \$212,329,154         (\$17,135,199)         -7%	_	-	\$541,847,991	, , , ,	+ -,,	
6 COMMERCIAL INSURANCE \$26,278,138 \$17,725,635 (\$8,552,503) -33% 7 NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$48,176,154 6% 8 WORKER'S COMPENSATION \$0 \$0 \$0 0% 9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0% TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5% II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%					•	0%
7 NON-GOVERNMENT MANAGED CARE \$794,912,520 \$843,088,674 \$48,176,154 6% 8 WORKER'S COMPENSATION \$0 \$0 \$0 0% 9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0% TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	5	CHAMPUS/TRICARE	\$16,230,402	\$18,966,017	\$2,735,615	17%
8 WORKER'S COMPENSATION \$0 \$0 \$0 0% 9 SELF- PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0% TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5% II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	6	COMMERCIAL INSURANCE	\$26,278,138	\$17,725,635	(\$8,552,503)	-33%
9 SELF-PAY/UNINSURED \$42,261,478 \$47,912,694 \$5,651,216 13% 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$0 \$0 \$0 \$0  TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	7	NON-GOVERNMENT MANAGED CARE	\$794,912,520	\$843,088,674	\$48,176,154	6%
10 SAGA \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0% TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE 1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
10 SAGA \$0 \$0 \$0 0% 11 OTHER \$0 \$0 \$0 \$0 0%  TOTAL GROSS REVENUE \$2,636,703,049 \$2,773,771,605 \$137,068,556 5%  II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	9	SELF- PAY/UNINSURED	\$42,261,478	\$47,912,694	\$5,651,216	13%
11 OTHER	10	SAGA		\$0	\$0	0%
II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%	11				•	0%
II. NET REVENUE BY PAYER  A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%		TOTAL GROSS REVENUE	\$2,636,703,049	\$2,773,771,605	\$137,068,556	5%
A. INPATIENT NET REVENUE  1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%			, , , , , , , , , , , , , , , , , , ,	, ,,,	, , , , , ,	
1 MEDICARE TRADITIONAL \$229,464,353 \$212,329,154 (\$17,135,199) -7%		INLI NEVENUE DI FATER				
Time		INPATIENT NET REVENUE				
2 MEDICARE MANAGED CARE \$66,744,868 \$74,649,279 \$7,904,411 12%		MEDICARE TRADITIONAL	\$229,464,353	\$212,329,154	(\$17,135,199)	-7%
	2	MEDICARE MANAGED CARE	\$66,744,868	\$74,649,279	\$7,904,411	12%

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
3	MEDICAID	\$73,957,630	\$74,281,238	\$323,608	0%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$4,501,295	\$1,824,412	(\$2,676,883)	-59%
6	COMMERCIAL INSURANCE	\$13,642,844	\$8,649,484	(\$4,993,360)	-37%
7	NON-GOVERNMENT MANAGED CARE	\$290,227,730	\$322,003,386	\$31,775,656	11%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$6,290,289	\$7,673,864	\$1,383,575	22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$684,829,009	\$701,410,817	\$16,581,808	2%
В.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$69,982,717	\$77,470,231	\$7,487,514	11%
2	MEDICARE MANAGED CARE	\$29,993,679	\$31,765,283	\$1,771,604	6%
3	MEDICAID MANAGED CARE	\$35,147,982	\$60,175,639	\$25,027,657	71%
4	MEDICAID MANAGED CARE	\$0 \$2,477,440	\$0 \$0	\$0 (\$2.477.440)	0%
5	CHAMPUS/TRICARE	\$3,177,110	\$0	(\$3,177,110)	-100%
<u>6</u> 7	COMMERCIAL INSURANCE NON-GOVERNMENT MANAGED CARE	\$8,800,060	\$3,487,994	(\$5,312,066)	-60% 10%
8	WORKER'S COMPENSATION	\$196,421,478 \$0	\$215,707,739 \$0	\$19,286,261 \$0	
9	SELF- PAY/UNINSURED	\$9,361,750	\$12,548,459	\$3,186,709	0% 34%
10	SAGA	\$9,361,730	\$12,546,459	\$3,180,709	0%
11	OTHER	\$0	\$0 \$0	\$0	0%
<u> </u>	TOTAL OUTPATIENT NET REVENUE	\$352,884,776	\$401,155,345	\$48,270,569	14%
	TO THE GOTT ATTENT HET HEVELOE	ψουΣ,ουτ,110	φτο 1, 100,040	Ψ+0,210,303	1470
c.	TOTAL NET REVENUE				
1		\$299,447,070	\$289,799,385	(\$9,647,685)	-3%
2	MEDICARE MANAGED CARE	\$96,738,547	\$106,414,562	\$9,676,015	10%
3		\$109,105,612	\$134,456,877	\$25,351,265	23%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$7,678,405	\$1,824,412	(\$5,853,993)	-76%
6	COMMERCIAL INSURANCE	\$22,442,904	\$12,137,478	(\$10,305,426)	-46%
7	NON-GOVERNMENT MANAGED CARE	\$486,649,208	\$537,711,125	\$51,061,917	10%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$15,652,039	\$20,222,323	\$4,570,284	29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
<u> </u>	TOTAL NET REVENUE	\$1,037,713,785	\$1,102,566,162	\$64,852,377	6%
	TOTAL NET REVENUE	φ1,υ3 <i>1</i> ,113,763	φ1,102,300,102	<b>Φ</b> 04,032,377	0%
III.	STATISTICS BY PAYER				
- 1111.	STATISTICS BY PAYER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	13,805	13,414	(391)	-3%
2	MEDICARE MANAGED CARE	4.187	4.412	225	-3% 5%
3	MEDICARE MANAGED CARE  MEDICAID	10,634	10,567	(67)	-1%
4	MEDICAID MEDICAID MANAGED CARE	10,034	0	0	0%
5	CHAMPUS/TRICARE	332	322	(10)	-3%
6	COMMERCIAL INSURANCE	286	272	(14)	-5%
7	NON-GOVERNMENT MANAGED CARE	13,700	13,802	102	1%
8	WORKER'S COMPENSATION	0	0	0	0%

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

(1)	(2)	(3)	(4)	(5)	(6)
(.,	(2)	` ` '	` '	,	` '
	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
9	CELE DAY/UNINCLIDED	400	F 47	4 44	250/
10	SELF- PAY/UNINSURED SAGA	406	547 0	141	35% 0%
11	OTHER	0	0	0	0%
- 11	TOTAL DISCHARGES	43,350	43,336	(14)	0%
В.	PATIENT DAYS	43,330	43,330	(14)	U /0
1	MEDICARE TRADITIONAL	85,256	81,973	(3,283)	-4%
2	MEDICARE MANAGED CARE	25,785	27,709	1,924	-4% 7%
3	MEDICARE MANAGED CARE  MEDICAID	55,246	56,849	1,603	3%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	1,983	2,033	50	3%
6	COMMERCIAL INSURANCE	1,545	1,344	(201)	-13%
7	NON-GOVERNMENT MANAGED CARE	59,378	60,804	1,426	2%
8	WORKER'S COMPENSATION	0	00,004	0	0%
9	SELF- PAY/UNINSURED	1,642	2,642	1,000	61%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	230,835	233,354	2,519	1%
C.	OUTPATIENT VISITS			_,,,,,	-,,
1	MEDICARE TRADITIONAL	68,295	68,950	655	1%
2	MEDICARE MANAGED CARE	20,822	22,979	2,157	10%
3	MEDICAID	113,189	112,681	(508)	0%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	1,938	1,819	(119)	-6%
6	COMMERCIAL INSURANCE	2,401	1,942	(459)	-19%
7	NON-GOVERNMENT MANAGED CARE	79,464	85,931	6,467	8%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	12,724	13,646	922	7%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	298,833	307,948	9,115	3%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
	EMERGENCY DEPARTMENT OUTPATIENT GROSS				
A.	REVENUE				
1	MEDICARE TRADITIONAL	\$44,573,406	\$54,515,747	\$9,942,341	22%
2	MEDICARE MANAGED CARE	\$18,324,930	\$23,565,928	\$5,240,998	29%
3	MEDICAID	\$86,103,367	\$100,322,192	\$14,218,825	17%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$2,323,177	\$3,171,034	\$847,857	36%
6	COMMERCIAL INSURANCE	\$7,011,763	\$4,399,964	(\$2,611,799)	-37%
7	NON-GOVERNMENT MANAGED CARE	\$55,771,558	\$71,131,858	\$15,360,300	28%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$13,219,454	\$17,448,928	\$4,229,474	32%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	GROSS REVENUE	\$227,327,655	\$274,555,651	\$47,227,996	21%
	EMERGENCY DEPARTMENT OUTPATIENT NET	, , , , , , , , ,	. , ,	. , ,	
В.	REVENUE				
1	MEDICARE TRADITIONAL	\$7,657,412	\$8,814,234	\$1,156,822	15%
	-	. , , · , · · -	, . , ,	, ,	. 3 / 0

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
2	MEDICARE MANAGED CARE	\$3,064,277	\$3,663,309	\$599,032	20%
3	MEDICAID	\$15,102,248	\$16,168,699	\$1,066,451	7%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$288,989	\$402,998	\$114,009	39%
6	COMMERCIAL INSURANCE	\$3,077,237	\$1,755,787	(\$1,321,450)	-43%
7	NON-GOVERNMENT MANAGED CARE	\$21,995,176	\$29,102,341	\$7,107,165	32%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$562,939	\$817,503	\$254,564	45%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET				
	REVENUE	\$51,748,278	\$60,724,871	\$8,976,593	17%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	11,408	12,003	595	5%
2	MEDICARE MANAGED CARE	4,580	5,263	683	15%
3	MEDICAID	41,124	40,876	(248)	-1%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	840	875	35	4%
6	COMMERCIAL INSURANCE	2,625	1,402	(1,223)	-47%
7	NON-GOVERNMENT MANAGED CARE	16,162	18,641	2,479	15%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	6,208	6,800	592	10%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	82,947	85,860	2,913	4%

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# HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

# FISCAL YEAR 2016 REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
	DECERIPTION	FY 2015	FY 2016	AMOUNT	% DIFFERENCE
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
A.	Salaries & Wages:	£4.47.00.4.707	<b>\$454.004.050</b>	£4.450.070	20/
2	Nursing Salaries Physician Salaries	\$147,234,787 \$46,267,606	\$151,394,659 \$49,724,580	\$4,159,872 \$3,456,974	3% 7%
3	Non-Nursing, Non-Physician Salaries	\$230,920,191	\$213,252,264	(\$17,667,927)	-8%
	Total Salaries & Wages	\$424,422,584	\$414,371,503	(\$10,051,081)	-2%
	Frience Domestites				
<b>B.</b>	Fringe Benefits:  Nursing Fringe Benefits	\$34,777,599	\$26,806,736	(\$7,970,863)	-23%
2	Physician Fringe Benefits	\$10,928,642	\$7,998,376	(\$2,930,266)	-27%
3	Non-Nursing, Non-Physician Fringe Benefits	\$54,544,512	\$38,565,691	(\$15,978,821)	-29%
	Total Fringe Benefits	\$100,250,753	\$73,370,803	(\$26,879,950)	-27%
	Out to stool link on France				
<b>C</b> .	Contractual Labor Fees:  Nursing Fees	\$335,599	\$1,362,895	\$1,027,296	306%
2	Physician Fees	\$55,612,217	\$55,666,273	\$54,056	0%
3	Non-Nursing, Non-Physician Fees	\$8,446,055	\$25,343,132	\$16.897.077	200%
	Total Contractual Labor Fees	\$64,393,871	\$82,372,300	\$17,978,429	28%
	Madical Country and Discountry and Country				
D.	Medical Supplies and Pharmaceutical Cost:  Medical Supplies	¢124 072 702	\$420 020 E22	¢14.755.920	120/
2	Pharmaceutical Costs	\$124,072,703 \$34.102.262	\$138,828,532 \$50,796,246	\$14,755,829 \$16,693,984	12% 49%
	Total Medical Supplies and Pharmaceutical Cost	\$158,174,965	\$189,624,778	\$31,449,813	20%
E.	Depreciation and Amortization:			(4	
1	Depreciation-Building	\$23,934,548	\$23,662,544	(\$272,004)	-1%
3	Depreciation-Equipment Amortization	\$24,217,216 \$0	\$21,341,796 \$0	(\$2,875,420) \$0	-12% 0%
	Total Depreciation and Amortization	\$48,151,764	\$45,004,340	(\$3,147,424)	-7%
<u>F.</u>	Bad Debts:	0.0	Φ0	Φ0	00/
11	Bad Debts	\$0	\$0	\$0	0%
G.	Interest Expense:				
1	Interest Expense	\$11,557,893	\$12,644,818	\$1,086,925	9%
	National Control				
H. 1	Malpractice Insurance Cost:  Malpractice Insurance Cost	\$9,083,056	\$10,440,838	\$1,357,782	15%
- '	Malpractice misurance cost	\$9,063,030	\$10,440,030	\$1,337,702	1370
I.	Utilities:				
11	Water	\$2,249,104	\$1,917,033	(\$332,071)	-15%
2	Natural Gas	\$4,153,566	\$2,771,841	(\$1,381,725)	-33%
<u>3</u> 4	Oil   Electricity	\$91,961 \$0,136,450	\$71,724 \$8,302,319	(\$20,237) (\$834,140)	-22% -9%
5	Telephone	\$9,136,459 \$526,102	\$1,268,081	\$741,979	141%
6	Other Utilities	\$619,037	\$552,974	(\$66,063)	-11%
	Total Utilities	\$16,776,229	\$14,883,972	(\$1,892,257)	-11%
J.	Business Expenses:	\$200.400	(\$4.00.00 <b>7</b> )	(0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,	4.400/
2	Accounting Fees Legal Fees	\$390,120 \$1,371,361	(\$166,987) \$359,012	(\$557,107) (\$1,012,349)	-143% -74%
3	Consulting Fees	\$2,900,182	\$2,198,249	(\$701,933)	-74%
4	Dues and Membership	\$2,801,767	\$5,098,899	\$2,297,132	82%
5	Equipment Leases	\$5,696,629	\$7,640,922	\$1,944,293	34%
6	Building Leases	\$9,472,559	\$12,112,730	\$2,640,171	28%
7	Repairs and Maintenance	\$16,061,413	\$17,013,693	\$952,280	6%
8	Insurance	\$1,200,797	\$1,313,588	\$112,791	9%
	Travel	\$970,763	\$977,084	\$6,321	1%
9 10	Conferences	\$100,684	\$169,492	\$68,808	68%

# HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

# FISCAL YEAR 2016

# REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
.INE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	DIFFERENCE
40	0	<b>#0.477.004</b>	<b>00 475 474</b>	<b>#0.000.000</b>	500
12 13	General Supplies Licenses and Subscriptions	\$6,177,091 \$261,882	\$9,475,471 \$471,939	\$3,298,380 \$210,057	53°
14	Postage and Shipping	\$559,467	\$502,895	(\$56,572)	-10
15	Advertising	\$359,407	\$233,335	(\$125,835)	-35
16	Corporate parent/system fees	\$25,132,784	\$38,861,616	\$13,728,832	55
17	Computer Software	\$565,143	\$537,310	(\$27,833)	-5'
18	Computer hardware & small equipment	\$0	\$0	\$0	0,
19	Dietary / Food Services	\$4,356,011	\$6,255,058	\$1,899,047	44'
20	Lab Fees / Red Cross charges	\$23,153,293	\$7,810,746	(\$15,342,547)	-66
21	Billing & Collection / Bank Fees	\$99,715	\$98,292	(\$1,423)	-1
22	Recruiting / Employee Education & Recognition	\$1,067,130	\$630,151	(\$436,979)	-41
23	Laundry / Linen	\$2,986,066	\$1,833,494	(\$1,152,572)	-39
24	Professional / Physician Fees	\$0	\$0	\$0	0'
25	Waste disposal	\$942,712	\$1,283,554	\$340,842	36
26	Purchased Services - Medical	\$1,697,244	\$2,918,411	\$1,221,167	72
27	Purchased Services - Non Medical	\$43,476	\$70,515	\$27,039	62
28	Other Business Expenses	\$82,450,570	\$117,194,538	\$34,743,968	42'
	Total Business Expenses	\$191,065,330	\$235,127,109	\$44,061,779	23
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$9,422,963	\$5,080,020	(\$4,342,943)	-46
	Total Operation Frances All Frances Cotomories*	£4 022 200 400	£4 000 000 404	£40.004.070	
	Total Operating Expenses - All Expense Categories*	\$1,033,299,408	\$1,082,920,481	\$49,621,073	5
	*AK.The total operating expenses amount above must	st agree with the to	tal operating expe	enses amount on R	eport 150
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$164,673,127	\$155,117,324	(\$9,555,803)	-6
2	General Accounting	\$9,182,564	\$5,271,096	(\$3,911,468)	-43
3	Patient Billing & Collection	\$29,011,035	\$40,558,482	\$11,547,447	40
4	Admitting / Registration Office	\$1,334,694	\$142,718	(\$1,191,976)	-89
5	Data Processing	\$45,408,397	\$62,171,276	\$16,762,879	37
6	Communications	\$929,805	\$779,108	(\$150,697)	-16
7	Personnel	\$11,239,674	\$5,278,493	(\$5,961,181)	-53
8	Public Relations	\$678,330	\$216,256	(\$462,074)	-68
9	Purchasing	\$4,685,710	\$4,441,441	(\$244,269)	-5
10 11	Dietary and Cafeteria Housekeeping	\$11,927,309 \$10,914,719	\$12,328,071 \$11,953,604	\$400,762 \$1,038,885	3 10
12	Laundry & Linen	\$5,859,071	\$5,631,331	(\$227,740)	-4
13	Operation of Plant	\$17,822,453	\$17,808,028	(\$14,425)	0
14	Security	\$4,887,386	\$6,192,775	\$1,305,389	27
15	Repairs and Maintenance	\$30,957,999	\$31,192,307	\$234,308	1
16	Central Sterile Supply	\$4,549,210	\$4,197,894	(\$351,316)	-8
17	Pharmacy Department	\$40,105,204	\$63,770,509	\$23,665,305	59
18	Other General Services	\$12,572,703	\$14,232,884	\$1,660,181	13
	Total General Services	\$406,739,390	\$441,283,597	\$34,544,207	8
В.	Professional Services:				
<u>в.</u> 1	Medical Care Administration	\$4,195,066	\$4,697,420	\$502,354	12
2	Residency Program	\$32,286,315	\$34,134,120	\$1,847,805	6
3	Nursing Services Administration	\$22,342,375	\$24,758,935	\$2,416,560	11
4	Medical Records	\$1,606,562	\$1,824,997	\$218,435	14
5	Social Service	\$1,751,968	\$1,858,894	\$106,926	6
6	Other Professional Services	\$1,461,987	\$1,534,093	\$72,106	5
-	Total Professional Services	\$63,644,273	\$68,808,459	\$5,164,186	8
C.	Special Services:				
	I Special Services:	1			

# HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

# FISCAL YEAR 2016

# REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

2 F 3 A 4 E 5 E 6 E 7 F	DESCRIPTION  Recovery Room Anesthesiology	FY 2015 ACTUAL	FY 2016 <u>ACTUAL</u>	AMOUNT <u>DIFFERENCE</u>	% DIFFERENCE
2 F 3 A 4 E 5 E 6 E 7 F	Recovery Room Anesthesiology		ACTUAL	DIFFERENCE	DIFFERENCE
3 / 4 [ 5 [ 6 [ 7 ]	Anesthesiology	***********			
3 / 4 [ 5 [ 6 [ 7 ]	Anesthesiology	\$3,856,865	\$4,079,185	\$222,320	69
4 [ 5 [ 6 [ 7 ]		\$5,082,048	\$4,375,304	(\$706,744)	-14 <sup>c</sup>
5 I 6 I 7 I	Delivery Room	\$11,451,578	\$11,452,942	\$1,364	00
7 I	Diagnostic Radiology	\$19,564,471	\$19,134,447	(\$430,024)	-20
	Diagnostic Ultrasound	\$1,080,245	\$1,116,060	\$35,815	3'
8	Radiation Therapy	\$14,686,597	\$13,992,928	(\$693,669)	-5
	Radioisotopes	\$2,249,999	\$1,931,455	(\$318,544)	-14
9 (	CT Scan	\$2,484,966	\$2,820,951	\$335,985	14'
	Laboratory	\$25,531,895	\$26,915,602	\$1,383,707	5
	Blood Storing/Processing	\$8,848,280	\$10,350,791	\$1,502,511	17
	Cardiology	\$7,723,542	\$9,526,185	\$1,802,643	23'
	Electrocardiology	\$1,142,429	\$1,131,552	(\$10,877)	-1
	Electroencephalography	\$544,232	\$101,170	(\$443,062)	-81
	Occupational Therapy	\$0	\$0	\$0	0'
	Speech Pathology	\$656,367	\$767,657	\$111,290	17'
	Audiology	\$2,767	\$3,101	\$334	12'
	Respiratory Therapy	\$7,310,213	\$8,241,184	\$930,971	13'
	Pulmonary Function	\$0	\$0	\$0	0,
	Intravenous Therapy	\$1,626,423	\$1,752,258	\$125,835	8'
	Shock Therapy	\$567,186	\$660,072	\$92,886	16'
	Psychiatry / Psychology Services	\$19,466,117	\$20,848,878	\$1,382,761	7'
	Renal Dialysis	\$6,926,821	\$7,108,992	\$182,171	3'
	Emergency Room	\$31,714,975	\$32,773,692	\$1,058,717	3
	MRI	\$2,318,895	\$2,379,622	\$60,727	3'
	PET Scan	\$0	\$0	\$0	00
	PET/CT Scan	\$443,924	\$386,759	(\$57,165)	-139
	Endoscopy Slaan Contor	\$5,959,094 \$1,989,457	\$6,901,051 \$1,941,701	\$941,957 (\$47,756)	169
	Sleep Center	\$1,989,457	\$1,941,701	(\$47,756)	-2°
	Lithotripsy Conding Cathotoxization/Rehabilitation		7 -	•	
	Cardiac Catheterization/Rehabilitation Occupational Therapy / Physical Therapy	\$25,676,210 \$31,026,320	\$25,215,066 \$16,324,905	(\$461,144) (\$14,701,415)	- <u>2</u> '
	Dental Clinic	\$1,109,425	\$1,025,787	(\$83,638)	-47
	Other Special Services	\$23,105,684	\$26,265,621	\$3,159,937	-6 14'
	Total Special Services	\$343,521,975	\$342,621,854	(\$900,121)	0'
	Total Special Services	ψ343,321,973	ψ342,021,034	(\$900,121)	
D.	Routine Services:				
1 [	Medical & Surgical Units	\$116,735,611	\$125,935,990	\$9,200,379	8
	Intensive Care Unit	\$23,764,599	\$24,245,423	\$480,824	2
	Coronary Care Unit	\$4,155,776	\$4,364,376	\$208,600	5'
	Psychiatric Unit	\$19,674,621	\$20,723,599	\$1,048,978	5'
	Pediatric Unit	\$0	\$0	\$0	0'
	Maternity Unit	\$3,817,551	\$4,072,549	\$254,998	79
	Newborn Nursery Unit	\$3,251,998	\$3,332,090	\$80,092	2'
	Neonatal ICU	\$0	\$0	\$0	0
	Rehabilitation Unit	\$0	\$0	\$0	0'
	Ambulatory Surgery	\$15,331,813	\$15,973,448	\$641,635	4
	Home Care	\$0	\$0	\$0	0'
	Outpatient Clinics	\$13,713,917	\$13,302,499	(\$411,418)	-3'
	Other Routine Services	\$0	\$0	\$0	0
	Total Routine Services	\$200,445,886	\$211,949,974	\$11,504,088	6
E. (	Other Departments:				
	Miscellaneous Other Departments	\$18,947,884	\$18,256,597	(\$691,287)	-4
	Total Operating Expenses - All Departments*	\$1,033,299,408	\$1,082,920,481	\$49,621,073	5

	HARTFORD 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.	Statement of Operations Summary								
1	Total Net Patient Revenue	\$976,155,739	\$980,434,820	\$1,021,691,377					
2	Other Operating Revenue	82,924,357	114,392,501	109,875,547					
3	Total Operating Revenue	\$1,059,080,096	\$1,094,827,321	\$1,131,566,924					
4	Total Operating Expenses	1,022,794,910	1,033,299,408	1,082,920,481					
5	Income/(Loss) From Operations	\$36,285,186	\$61,527,913	\$48,646,443					
6	Total Non-Operating Revenue	16,343,412	(3,733,261)	15,536,597					
7	Excess/(Deficiency) of Revenue Over Expenses	\$52,628,598	\$57,794,652	\$64,183,040					
В.	Profitability Summary								
1	Hospital Operating Margin	3.37%	5.64%	4.24%					
2	Hospital Non Operating Margin	1.52%	-0.34%	1.35%					
3	Hospital Total Margin	4.89%	5.30%	5.60%					
4	Income/(Loss) From Operations	\$36,285,186	\$61,527,913	\$48,646,443					
5	Total Operating Revenue	\$1,059,080,096	\$1,094,827,321	\$1,131,566,924					
6	Total Non-Operating Revenue	\$16,343,412	(\$3,733,261)	\$15,536,597					
7	Total Revenue	\$1,075,423,508	\$1,091,094,060	\$1,147,103,521					
8	Excess/(Deficiency) of Revenue Over Expenses	\$52,628,598	\$57,794,652	\$64,183,040					
C.	Net Assets Summary								
1	Hospital Unrestricted Net Assets	\$135,104,064	\$164,284,091	\$23,382,042					
2	Hospital Total Net Assets	\$444,215,909	\$458,523,099	\$337,678,783					
3	Hospital Change in Total Net Assets	(\$50,229,199)	\$14,307,190	(\$120,844,316)					
4	Hospital Change in Total Net Assets %	89.8%	3.2%	-26.4%					

	НА	RTFORD HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016					
D.	Cost Data Summary								
1	Ratio of Cost to Charges	0.39	0.38	0.38					
2	Total Operating Expenses	\$1,022,794,910	\$1,033,299,408	\$1,082,920,481					
3	Total Gross Revenue	\$2,554,085,582	\$2,636,703,049	\$2,773,771,605					
4	Total Other Operating Revenue	\$74,980,429	\$114,392,501	\$105,622,852					
5	Private Payment to Cost Ratio	1.48	1.65	1.70					
6	Total Non-Government Payments	\$473,999,558	\$524,744,151	\$570,070,926					
7	Total Uninsured Payments	\$1,722,815	\$15,652,039	\$20,222,323					
8	Total Non-Government Charges	\$874,205,121	\$863,452,136	\$908,727,003					
9	Total Uninsured Charges	\$56,113,065	\$42,261,478	\$47,912,694					
10	Medicare Payment to Cost Ratio	0.94	0.87	0.84					
11	Total Medicare Payments	\$424,421,835	\$396,185,617	\$396,213,947					
12	Total Medicare Charges	\$1,164,896,053	\$1,215,172,520	\$1,254,291,903					
13	Medicaid Payment to Cost Ratio	0.67	0.54	0.60					
14	Total Medicaid Payments	\$131,175,003	\$109,105,612	\$134,456,87					
15	Total Medicaid Charges	\$502,311,671	\$541,847,991	\$591,786,682					
16	Uncompensated Care Cost	\$21,493,945	\$14,404,972	\$9,251,863					
17	Charity Care	\$30,609,202	\$24,219,691	\$20,579,15					
18	Bad Debts	\$24,640,388	\$14,132,654	\$4,020,77					
19	Total Uncompensated Care	\$55,249,590	\$38,352,345	\$24,599,92					
20	Uncompensated Care % of Total Expenses	2.1%	1.4%	0.9%					

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	HARTFORD HOSPITAL								
	TWELVE MONTHS ACTUAL FILING								
		L YEAR 2016							
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
. ,		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016					
21	Total Operating Expenses	\$1,022,794,910	\$1,033,299,408	\$1,082,920,48					
E.	Liquidity Measures Summary								
1	Current Ratio	2	2	1					
2	Total Current Assets	\$206,280,426	\$235,041,845	\$218,021,738					
3	Total Current Liabilities	\$132,757,783	\$144,425,314	\$200,924,089					
4	Days Cash on Hand	3	10	4					
5	Cash and Cash Equivalents	\$8,310,780	\$26,532,108	\$10,748,539					
6	Short Term Investments	0	0	0					
7	Total Cash and Short Term Investments	\$8,310,780	\$26,532,108	\$10,748,539					
8	Total Operating Expenses	\$1,022,794,910	\$1,033,299,408	\$1,082,920,481					
9	Depreciation Expense	\$48,593,411	\$48,151,764	\$45,004,340					
10	Operating Expenses less Depreciation Expense	\$974,201,499	\$985,147,644	\$1,037,916,141					
11	Days Revenue in Patient Accounts Receivable	41	36	40					
12	Net Patient Accounts Receivable	\$128,300,658	\$130,223,226	\$143,861,13					
13	Due From Third Party Payers	\$0	\$0	\$(					
14	Due To Third Party Payers	\$18,683,246	\$32,918,197	\$30,963,410					
	Total Net Patient Accounts Receivable and Third Party Payer	<b>0.406.017.41</b>	407.007.005	<b>6442.00</b>					
15	Activity  Total Net Patient Revenue	\$109,617,412	\$97,305,029	\$112,897,72					
16	Total Net Patient Revenue	\$976,155,739	\$980,434,820	\$1,021,691,377					
17	Average Payment Period	50	54	71					
18	Total Current Liabilities	\$132,757,783	\$144,425,314	\$200,924,089					
19	Total Operating Expenses	\$1,022,794,910	\$1,033,299,408	\$1,082,920,481					
20	Depreciation Expense	\$48,593,411	\$48,151,764	\$45,004,34					

	HARTFORI	D HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016					
21	Total Operating Expenses less Depreciation Expense	\$974,201,499	\$985,147,644	\$1,037,916,141					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	38.3	35.5	25.3					
2	Total Net Assets	\$444,215,909	\$458,523,099	\$337,678,783					
3	Total Assets	\$1,160,105,170	\$1,290,759,621	\$1,335,241,457					
4	Cash Flow to Total Debt Ratio	24.1	19.1	17.5					
5	Excess/(Deficiency) of Revenues Over Expenses	\$52,628,598	\$57,794,652	\$64,183,040					
6	Depreciation Expense	\$48,593,411	\$48,151,764	\$45,004,34					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$101,222,009	\$105,946,416	\$109,187,380					
8	Total Current Liabilities	\$132,757,783	\$144,425,314	\$200,924,089					
9	Total Long Term Debt	\$287,081,033	\$411,427,349	\$423,231,34					
10	Total Current Liabilities and Total Long Term Debt	\$419,838,816	\$555,852,663	\$624,155,432					
11	Long Term Debt to Capitalization Ratio	39.3	47.3	55.6					
12	Total Long Term Debt	\$287,081,033	\$411,427,349	\$423,231,343					
13	Total Net Assets	\$444,215,909	\$458,523,099	\$337,678,783					
14	Total Long Term Debt and Total Net Assets	\$731,296,942	\$869,950,448	\$760,910,126					
15	Debt Service Coverage Ratio	1.1	8.5	8.8					
16	Excess Revenues over Expenses	52,628,598	\$57,794,652	\$64,183,040					
17	Interest Expense	8,386,515	\$11,557,893	\$12,644,818					
18	Depreciation and Amortization Expense	48,593,411	\$48,151,764	\$45,004,340					
19	Principal Payments	88,386,723	\$2,186,012	\$1,757,28					
G.	Other Financial Ratios								

	HARTFOI	RD HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
('/	(-)	ACTUAL	ACTUAL	ACTUAL					
	DESCRIPTION								
LINE	DESCRIPTION	<u>FY 2014</u>	FY 2015	FY 2016					
20	Average Age of Plant	15.1	16.2	18.3					
21	Accumulated Depreciation	732,523,247	780,130,364	823,564,261					
22	Depreciation and Amortization Expense	48,593,411	48,151,764	45,004,340					
Н.	Utilization Measures Summary								
1	Patient Days	233,240	230,835	233,354					
2	Discharges	42,755	43,350	43,336					
3	ALOS	, i							
		5.5	5.3	5.4					
4	Staffed Beds	673	673	645					
5	Available Beds	-	802	800					
6	Licensed Beds	818	867	867					
7	Occupancy of Staffed Beds	95.0%	94.0%	99.1%					
8	Occupancy of Available Beds	78.1%	78.9%	79.9%					
9	Full Time Equivalent Employees	5,807.0	5,517.2	5,575.7					
I.	Hospital Gross Revenue Payer Mix Percentage								
1	Non-Government Gross Revenue Payer Mix Percentage	32.0%	31.1%	31.0%					
2	Medicare Gross Revenue Payer Mix Percentage	45.6%	46.1%	45.2%					
3	Medicaid Gross Revenue Payer Mix Percentage	19.7%	20.6%	21.3%					
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%					
5	Uninsured Gross Revenue Payer Mix Percentage	2.2%	1.6%	1.7%					
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.5%	0.6%	0.7%					
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%					
8	Non-Government Gross Revenue (Charges)	\$818,092,056	\$821,190,658	\$860,814,309					
9	Medicare Gross Revenue (Charges)	\$1,164,896,053	\$1,215,172,520	\$1,254,291,903					
10	Medicaid Gross Revenue (Charges)	\$502,311,671	\$541,847,991	\$591,786,682					
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0					
12	Uninsured Gross Revenue (Charges)	\$56,113,065	\$42,261,478	\$47,912,694					
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$12,672,737	\$16,230,402	\$18,966,017					
14	Total Gross Revenue (Charges)	\$2,554,085,582	\$2,636,703,049	\$2,773,771,605					
J.	Hospital Net Revenue Payer Mix Percentage								
1	Non-Government Net Revenue Payer Mix Percentage	45.6%	49.1%	49.9%					
2	Medicare Net Revenue Payer Mix Percentage	41.0%	38.2%	35.9%					
3	Medicaid Net Revenue Payer Mix Percentage	12.7%	10.5%	12.2%					
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%					
5	Uninsured Net Revenue Payer Mix Percentage	0.2%	1.5%	1.8%					
6 7	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage Total Net Revenue Payer Mix Percentage	0.5% 100.0%	0.7% 100.0%	0.2% 100.0%					
8	Non-Government Net Revenue (Payments)	\$472,276,743	\$509,092,112	\$549,848,603					
9	Medicare Net Revenue (Payments)	\$424,421,835	\$396,185,617	\$396,213,947					
	Medicaid Net Revenue (Payments)	\$131,175,003	\$109,105,612	\$134,456,877					

	HARTFORD 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				
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0				
12	Uninsured Net Revenue (Payments)	\$1,722,815	\$15,652,039	\$20,222,323				
13	CHAMPUS / TRICARE Net Revenue Payments)	\$5,219,349	\$7,678,405	\$1,824,412				
14	Total Net Revenue (Payments)	\$1,034,815,745	\$1,037,713,785	\$1,102,566,162				
K.	<u>Discharges</u>							
1	Non-Government (Including Self Pay / Uninsured)	14,754	14,392	14,621				
2	Medicare	17,602	17,992	17,826				
3	Medical Assistance	10,142	10,634	10,567				
4	Medicaid	10,142	10,634	10,567				
5	Other Medical Assistance	-	-	-				
6	CHAMPUS / TRICARE	257	332	322				
7	Uninsured (Included In Non-Government)	549	406	547				
8	Total	42,755	43,350	43,336				
	Case Mix Index							
1	Non-Government (Including Self Pay / Uninsured)	1.47830	1.50315	1.53467				
2	Medicare	1.86389	1.88482	1.96007				
3	Medical Assistance	1.26052	1.26519	1.38947				
4	Medicaid	1.26052	1.26519	1.38947				
5	Other Medical Assistance	0.00000	0.00000	0.00000				
6	CHAMPUS / TRICARE	1.29735	1.35542	1.47359				
7	Uninsured (Included In Non-Government)	1.44325	1.10890	1.23513				
8	Total Case Mix Index	1.58430	1.60205	1.67380				
M.	Emergency Department Visits							
1	Emergency Room - Treated and Admitted	23,512	24,341	20,155				
2	Emergency Room - Treated and Discharged	79,877	82,947	85,860				
3	Total Emergency Room Visits	103,389	107,288	106,015				

(1)	(2)	(3)	(4)	(5)	(6)
,	\-/	FY 2015	FY 2016	AMOUNT	(0)
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICARE MANAGED CARE			T	1
Α.	ANTHEM - MEDICARE BLUE CONNECTICUT				
1	Inpatient Charges	\$8,509,345	\$24,265,795	\$15,756,450	185%
2	Inpatient Orlarges Inpatient Payments	\$2.500,235	\$7.931.849	\$5.431.614	217%
3	Outpatient Charges	\$4,665,949	\$11,977,165	\$7,311,216	157%
4	Outpatient Payments	\$1,671,368	\$3,379,955	\$1,708,587	102%
5	Discharges	189	520	331	175%
6	Patient Days	1,167	3,314	2,147	184%
7	Outpatient Visits (Excludes ED Visits)	902	2,195	1,293	143%
8	Emergency Department Outpatient Visits	260	951	691	266%
9	Emergency Department Inpatient Admissions	153	361	208	136%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,175,294	\$36,242,960	\$23,067,666	175%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,171,603	\$11,311,804	\$7,140,201	171%
В.	CIGNA HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0	\$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.				
<u> </u>	Inpatient Charges	\$66,062,465	\$66,038,073	(\$24.392)	0%
2	Inpatient Payments	\$22,514,616	\$22,004,306	(\$510,310)	-2%
3	Outpatient Charges	\$31,406,943	\$32,533,001	\$1,126,058	4%
4	Outpatient Payments	\$9,486,233	\$9.180.372	(\$305.861)	-3%
5	Discharges	1,255	1,168	(87)	-7%
6	Patient Days	7.802	7,010	(792)	-10%
7	Outpatient Visits (Excludes ED Visits)	4,912	4,852	(60)	-1%
8	Emergency Department Outpatient Visits	800	747	(53)	-7%
9	Emergency Department Inpatient Admissions	767	663	(104)	-14%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$97,469,408	\$98,571,074	\$1,101,666	1%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$32,000,849	\$31,184,678	(\$816,171)	-3%

(1)	(2)	(3)	(4)	(5)	(6)
(.,	(=)	FY 2015	FY 2016	AMOUNT	(0)
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
D.	HEALTHNET OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$11,521,964	\$3,221,910	(\$8,300,054)	-72%
2	Inpatient Payments	\$6,107,595	\$1,272,580	(\$4,835,015)	-79%
3	Outpatient Charges	\$8,552,368	\$3,869,574	(\$4,682,794)	-55%
4	Outpatient Payments	\$2,147,730	\$1,057,639	(\$1,090,091)	-51%
5	Discharges	199	67	(132)	-66%
6	Patient Days	1,949	513	(1,436)	-74%
7	Outpatient Visits (Excludes ED Visits)	209	612	403	193%
8	Emergency Department Outpatient Visits	152	161	9	6%
9	Emergency Department Inpatient Admissions	164	61	(103)	-63%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$20,074,332	\$7,091,484	(\$12,982,848)	-65%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,255,325	\$2,330,219	(\$5,925,106)	-72%
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%

(2) ESCRIPTION UNITED HEALTHCARE INSURANCE COMPANY	(3) FY 2015 ACTUAL	(4) FY 2016	(5) AMOUNT	(6)
INITED HEALTHCARE INSURANCE COMPANY	ACTUAL		AITIOUITI	
		ACTUAL	DIFFERENCE	% DIFFERENCE
patient Charges	\$58,709,066	\$70,737,727	\$12,028,661	20%
patient Payments	\$19,036,008	\$24,084,566	\$5,048,558	27%
utpatient Charges	\$30,074,008	\$33,828,586	\$3,754,578	12%
utpatient Payments	\$8,470,310	\$9,538,018	\$1,067,708	13%
ischarges	1,296	1,474	178	14%
atient Days	7,358	9,383	2,025	28%
utpatient Visits (Excludes ED Visits)	4,903	5,053	150	3%
mergency Department Outpatient Visits	1,426	1,631	205	14%
mergency Department Inpatient Admissions	948	969	21	2%
OTAL INPATIENT & OUTPATIENT CHARGES	\$88,783,074	\$104,566,313	\$15,783,239	18%
OTAL INPATIENT & OUTPATIENT PAYMENTS	\$27,506,318	\$33,622,584	\$6,116,266	22%
VELLCARE OF CONNECTICUT				
patient Charges	\$20,126,700	\$18,496,780	(\$1,629,920)	-8%
patient Payments	\$6,524,723	\$6,234,397	(\$290,326)	-4%
utpatient Charges	\$11,762,443	\$10,772,481	(\$989,962)	-8%
utpatient Payments	\$2,931,067	\$2,974,803	\$43,736	1%
ischarges	511	462	(49)	-10%
atient Days	3,153	2,976	(177)	-6%
utpatient Visits (Excludes ED Visits)	2,447	2,019	(428)	-17%
mergency Department Outpatient Visits	1,340	1,136	(204)	-15%
mergency Department Inpatient Admissions	439	343	(96)	-22%
OTAL INPATIENT & OUTPATIENT CHARGES	\$31,889,143	\$29,269,261	(\$2,619,882)	-8%
OTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,455,790	\$9,209,200	(\$246,590)	-3%
	7 - 7 7 -	+ , - , -	+ /- /	13%
	+ -, ,			30%
				14%
1 ,		. , , ,		7%
				-2%
				4%
				4%
0 7 1				6%
			\- /	-16%
	_ ' ' '			13%
OTAL INPATIENT & OUTPATIENT PAYMENTS	\$15,348,662	\$18,756,077	\$3,407,415	22%
	nergency Department Inpatient Admissions OTAL INPATIENT & OUTPATIENT CHARGES	Additional	August   A	August   A

(1)	(2)	(3)	(4)	(5)	(6)
(.,	ζ=/	FY 2015	FY 2016	AMOUNT	(0)
LINE	DESCRIPTION	ACTUAL	ACTUAL	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 Orlanges  Outpatient Payments	\$0	\$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%
	TOTAL IN TAILER & CONTAINENT AND LAND	Ψ0	υ	ΨΟ	070

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
		7.0.7.2	71010712	2	70 - 11 - 11 - 11 - 11
М.	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%
<u>8</u> 9	Emergency Department Outpatient Visits	0	0	0	0% 0%
9	Emergency Department Inpatient Admissions TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ <b>0</b>	\$0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES  TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
		φ0	φυ	<b>\$0</b>	078
II.	TOTAL MEDICARE MANAGED CARE				1
	TOTAL INPATIENT CHARGES	\$199,005,289	\$221,180,209	\$22,174,920	11%
	TOTAL INPATIENT PAYMENTS	\$66,744,868	\$74,649,279	\$7,904,411	12%
	TOTAL OUTPATIENT CHARGES	\$103,968,716	\$112,928,411	\$8,959,695	9%
	TOTAL OUTPATIENT PAYMENTS	\$29,993,679	\$31,765,283	\$1,771,604	6%
	TOTAL DISCHARGES	4,187	4,412	225	5%
	TOTAL PATIENT DAYS	25,785	27,709	1,924	7%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS) TOTAL EMERGENCY DEPARTMENT OUTPATIENT	16,242	17,716	1,474	9%
	VISITS TOTAL EMERGENCY DEPARTMENT INPATIENT	4,580	5,263	683	15%
	ADMISSIONS	3,003	2,842	(161)	-5%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$302,974,005	\$334,108,620	\$31,134,615	10%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$96,738,547	\$106,414,562	\$9,676,015	10%

# REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2015	FY 2016	AMÒÚNT	` '
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
I.	MEDICAID MANAGED CARE		-		T
	ANTHEM BLUE CROSS AND BLUE SHIELD OF				
A.	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%
В.	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	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%

# REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMÒÚNT	` ,
		ACTUAL	ACTUAL	DIFFERENCE	% 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%
	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%
	FIRST CHOICE OF CONNECTICUT, PREFERRED				
F.	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%
	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%

# REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1) (2)	(3)	(4)	(5)	(6)
	FY 2015	FY 2016	AMOUNT	
	ACTUAL	ACTUAL	DIFFERENCE	% 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 INDATIFAT CHARGE	20	**	***	20/
TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
TOTAL OUTPATIENT PAYMENTS TOTAL DISCHARGES	\$0	\$0	\$0	0%
TOTAL DISCHARGES  TOTAL PATIENT DAYS	0	0	0	0%
TOTAL PATIENT DAYS  TOTAL OUTPATIENT VISITS (EXCLUDES E		0	0	0%
		•	•	00/
VISITS) TOTAL EMERGENCY DEPARTMENT	0	0	0	0%
OUTPATIENT VISITS		•	•	00/
TOTAL EMERGENCY DEPARTMENT	0	0	0	0%
INPATIENT ADMISSIONS		•	•	00/
TOTAL INPATIENT & OUTPATIENT CHARGES	0 \$0	0 \$0	0 \$0	0%
		7 -	<b>4</b> -	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

	HART	FORD HEALTH CARE O	CORPORATION					
	T	WELVE MONTHS ACTU	IAL FILING					
FISCAL YEAR 2016 REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION								
	REPORT 300 - PARENT CORF	PORATION CONSOLIDA	ATED BALANCE SHEE	ET INFORMATION				
(1)	(2)	(3)	(4)	(5)	(6)			
LINE	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>			
I.	ASSETS							
A.	Current Assets:							
1	Cash and Cash Equivalents	\$376,098,000	\$293,434,000	(\$82,664,000)	-22%			
2	Short Term Investments	\$0	\$0	\$0	0%			
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$296,632,000	\$315,862,000	\$19,230,000	6%			
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,448,000	\$13,047,000	\$7,599,000	139%			
5	Due From Affiliates	\$0	\$0	\$0	0%			
6	Due From Third Party Payers	\$0	\$0	\$0	0%			
7	Inventories of Supplies	\$30,961,000	\$32,633,000	\$1,672,000	5%			
8	Prepaid Expenses	\$25,231,000	\$30,666,000	\$5,435,000	22%			
9	Other Current Assets	\$33,815,000	\$24,889,000	(\$8,926,000)	-26%			
	Total Current Assets	\$768,185,000	\$710,531,000	(\$57,654,000)	-8%			
В.	Noncurrent Assets Whose Use is Limited:							
1	Held by Trustee	\$169,546,000	\$177,904,000	\$8,358,000	5%			
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%			
3	Funds Held in Escrow	\$120,177,000	\$73,457,000	(\$46,720,000)	-39%			
4	Other Noncurrent Assets Whose Use is Limited	\$1,127,378,000	\$1,372,417,000	\$245,039,000	22%			
	Total Noncurrent Assets Whose Use is	ψ1,121,010,000	ψ.,σ. 2, ,σσσ	φ2 :0,000,000				
	Limited:	\$1,417,101,000	\$1,623,778,000	\$206,677,000	15%			
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%			
6	Long Term Investments	\$68,809,000	\$84,840,000	\$16,031,000	23%			
7	Other Noncurrent Assets	\$98,877,000	\$93,226,000	(\$5,651,000)	-6%			
C.	Net Fixed Assets:							
1	Property, Plant and Equipment	\$2,614,733,000	\$2,776,258,000	\$161,525,000	6%			
2	Less: Accumulated Depreciation	\$1,651,933,000	\$1,776,336,000	\$124,403,000	\$0			
	Property, Plant and Equipment, Net	\$962,800,000	\$999,922,000	\$37,122,000	4%			
3	Construction in Progress	\$184,090,000	\$249,465,000	\$65,375,000	36%			
	Total Net Fixed Assets	\$1,146,890,000	\$1,249,387,000	\$102,497,000	9%			
			<b>An may</b>	400/				
	Total Assets	\$3,499,862,000	\$3,761,762,000	\$261,900,000	7%			

	HA	RTFORD HEALTH CARE C	CORPORATION						
		TWELVE MONTHS ACTU	IAL FILING						
FISCAL YEAR 2016									
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION									
(1)	(2)	(3) FY 2015	(4) FY 2016	(5) AMOUNT	(6) %				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
II.	LIABILITIES AND NET ASSETS								
A.	Current Liabilities:								
1	Accounts Payable and Accrued Expenses	\$184,210,000	\$212,994,000	\$28,784,000	16%				
2	Salaries, Wages and Payroll Taxes	\$84,180,000	\$103,571,000	\$19,391,000	23%				
3	Due To Third Party Payers	\$66,491,000	\$50,436,000	(\$16,055,000)	-24%				
4	Due To Affiliates	\$0	\$0	\$0	0%				
5	Current Portion of Long Term Debt	\$44,207,000	\$52,582,000	\$8,375,000	19%				
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%				
7	Other Current Liabilities	\$45,923,000	\$60,135,000	\$14,212,000	31%				
	Total Current Liabilities	\$425,011,000	\$479,718,000	\$54,707,000	13%				
В.	Long Term Debt:								
1	Bonds Payable (Net of Current Portion)	\$739,514,000	\$735,764,000	(\$3,750,000)	-1%				
2	Notes Payable (Net of Current Portion)	\$96,794,000	\$105,837,000	\$9,043,000	9%				
	Total Long Term Debt	\$836,308,000	\$841,601,000	\$5,293,000	1%				
3	Accrued Pension Liability	\$499,491,000	\$690,103,000	\$190,612,000	38%				
4	Other Long Term Liabilities	\$197,898,000	\$184,042,000	(\$13,856,000)	-7%				
	Total Long Term Liabilities	\$1,533,697,000	\$1,715,746,000	\$182,049,000	12%				
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$3,018,000	\$3,018,000	0%				
C.	Net Assets:								
1	Unrestricted Net Assets or Equity	\$1,094,448,000	\$1,087,549,000	(\$6,899,000)	-1%				
2	Temporarily Restricted Net Assets	\$174,109,000	\$193,564,000	\$19,455,000	11%				
3	Permanently Restricted Net Assets	\$272,597,000	\$282,167,000	\$9,570,000	4%				
	Total Net Assets	\$1,541,154,000	\$1,563,280,000	\$22,126,000	1%				
	Total Liabilities and Net Assets	\$3,499,862,000	\$3,761,762,000	\$261,900,000	7%				

		EALTH CARE CORF			
		FISCAL YEAR 2016	ILING		
	REPORT 350 - PARENT CORPORATION CON		EMENT OF OPERA	TIONS INFORMATIONS	ON
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	DESCRIPTION	FY 2015 ACTUAL	FY 2016 ACTUAL	AMOUNT DIFFERENCE	% <u>DIFFERENCE</u>
Α.	Operating Revenue:				
1	Total Gross Patient Revenue	\$5,657,713,000	\$6.009.180.000	\$351,467,000	6%
2	Less: Allowances	\$3,318,875,000	\$3,570,361,000	\$251,486,000	8%
3	Less: Charity Care	\$49,416,000	\$50,327,000	\$911,000	2%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$2,289,422,000	\$2,388,492,000	\$99,070,000	4%
5	Provision for Bad Debts	\$50.042.000	\$37,690,000	(\$12,352,000)	-25%
	Net Patient Service Revenue less provision for bad debts	\$2,239,380,000	\$2,350,802,000	\$111,422,000	5%
6	Other Operating Revenue	\$192,865,000	\$300,042,000	\$107,177,000	56%
7	Net Assets Released from Restrictions	\$14,350,000	\$13,087,000	(\$1,263,000)	-9%
	Total Operating Revenue	\$2,446,595,000	\$2,663,931,000	\$217,336,000	9%
В.	Operating Expenses:				
1	Salaries and Wages	\$1,122,021,000	\$1,177,584,000	\$55,563,000	5%
2	Fringe Benefits	\$283,891,000	\$277,448,000	(\$6,443,000)	-2%
3	Physicians Fees	\$74,842,000	\$61,962,000	(\$12,880,000)	-17%
4	Supplies and Drugs	\$390,438,000	\$356,009,000	(\$34,429,000)	-9%
5	Depreciation and Amortization	\$125,330,000	\$138,197,000	\$12,867,000	10%
6	Bad Debts	\$0	\$0	\$0	0%
7	Interest Expense	\$25,328,000	\$27,681,000	\$2,353,000	9%
8	Malpractice Insurance Cost	\$22,352,000	\$21,421,000	(\$931,000)	-4%
9	Other Operating Expenses	\$372,386,000	\$468,076,000	\$95,690,000	26%
	Total Operating Expenses	\$2,416,588,000	\$2,528,378,000	\$111,790,000	5%
	Income/(Loss) From Operations	\$30,007,000	\$135,553,000	\$105,546,000	352%
C.	Non-Operating Revenue:				
1	Income from Investments	\$50,773,000	\$15,253,000	(\$35,520,000)	-70%
2	Gifts, Contributions and Donations	\$402,000	\$955,000	\$553,000	138%
3	Other Non-Operating Gains/(Losses)	\$1,819,000	(\$8,728,000)	(\$10,547,000)	-580%
	Total Non-Operating Revenue	\$52,994,000	\$7,480,000	(\$45,514,000)	-86%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$83,001,000	\$143,033,000	\$60,032,000	72%
	Other Adjustments:				
	Unrealized Gains/(Losses)	(\$66,362,000)	\$74,113,000	\$140,475,000	-212%
	All Other Adjustments	\$0	(\$9,907,000)	(\$9,907,000)	0%
	Total Other Adjustments	(\$66,362,000)	\$64,206,000	\$130,568,000	-197%
	Excess/(Deficiency) of Revenue Over Expenses	\$16,639,000	\$207,239,000	\$190,600,000	1146%

	HARTFORD HEALTH CA	ARE CORPORATION		
	TWELVE MONTHS	ACTUAL FILING		
	FISCAL YE	AR 2016		
	REPORT 385 - PARENT CORPORATION CON	SOLIDATED FINANCIAL	DATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016
Α.	Parent Corporation Statement of Operations Summary			
1	Net Patient Revenue	\$2,271,219,000	\$2,239,380,000	\$2,350,802,000
2	Other Operating Revenue	210,363,000	207,215,000	313,129,000
3	Total Operating Revenue	\$2,481,582,000	\$2,446,595,000	\$2,663,931,000
4	Total Operating Expenses	2,429,396,000	2,416,588,000	2,528,378,000
5	Income/(Loss) From Operations	\$52,186,000	\$30,007,000	\$135,553,000
6	Total Non-Operating Revenue	51,361,000	(13,368,000)	71,686,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$103,547,000	\$16,639,000	\$207,239,000
В.	Parent Corporation Profitability Summary			
1	Parent Corporation Operating Margin	2.06%	1.23%	4.96%
2	Parent Corporation Non-Operating Margin	2.03%	-0.55%	2.62%
3	Parent Corporation Total Margin	4.09%	0.68%	7.58%
4	Income/(Loss) From Operations	\$52,186,000	\$30,007,000	\$135,553,000
5	Total Operating Revenue	\$2,481,582,000	\$2,446,595,000	\$2,663,931,000
6	Total Non-Operating Revenue	\$51,361,000	(\$13,368,000)	\$71,686,000
7	Total Revenue	\$2,532,943,000	\$2,433,227,000	\$2,735,617,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$103,547,000	\$16,639,000	\$207,239,000
C.	Parent Corporation Net Assets Summary			
1	Parent Corporation Unrestricted Net Assets	\$1,104,267,000	\$1,094,448,000	\$1,087,549,000
2	Parent Corporation Total Net Assets	\$1,575,989,000	\$1,541,154,000	\$1,563,280,000
3	Parent Corporation Change in Total Net Assets	(\$33,592,000)	(\$34,835,000)	\$22,126,000
4	Parent Corporation Change in Total Net Assets %	97.9%	-2.2%	1.4%

	HARTFORD HEALTH C	ARE C	ORPORATION			
	TWELVE MONTHS	ACTU	AL FILING			
	FISCAL YE	AR 20	16			
	REPORT 385 - PARENT CORPORATION CON	ISOLIE	DATED FINANCIA	L D	ATA ANALYSIS	
(1)	(2)		(3)		(4)	(5)
			ACTUAL		ACTUAL	ACTUAL
LINE	DESCRIPTION		FY 2014		<u>FY 2015</u>	FY 2016
D.	Liquidity Measures Summary					
1	Current Ratio		2.05		1.81	1.48
2	Total Current Assets		\$813,253,000		\$768,185,000	\$710,531,000
3	Total Current Liabilities		\$395,884,000		\$425,011,000	\$479,718,000
4	Days Cash on Hand		67		60	45
5	Cash and Cash Equivalents		\$423,879,000		\$376,098,000	\$293,434,000
6	Short Term Investments		\$0		\$0	\$0
7	Total Cash and Short Term Investments		\$423,879,000		\$376,098,000	\$293,434,000
8	Total Operating Expenses		\$2,429,396,000		\$2,416,588,000	\$2,528,378,000
9	Depreciation Expense		\$118,837,000		\$125,330,000	\$138,197,000
10	Operating Expenses less Depreciation Expense		\$2,310,559,000		\$2,291,258,000	\$2,390,181,000
11	Days Revenue in Patient Accounts Receivable		38		38	41
12	Net Patient Accounts Receivable	\$	292,535,000	\$	296,632,000	\$ 315,862,000
13	Due From Third Party Payers		\$0		\$0	\$0
14	Due To Third Party Payers		\$57,206,000		\$66,491,000	\$50,436,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$	235,329,000	\$	230,141,000	\$ 265,426,000
16	Total Net Patient Revenue		\$2,271,219,000		\$2,239,380,000	\$2,350,802,000
17	Average Payment Period		63		68	73
18	Total Current Liabilities		\$395,884,000		\$425,011,000	\$479,718,000
19	Total Operating Expenses		\$2,429,396,000		\$2,416,588,000	\$2,528,378,000
20	Depreciation Expense		\$118,837,000		\$125,330,000	\$138,197,000
20	Total Operating Expenses less Depreciation Expense		\$2,310,559,000		\$2,291,258,000	\$2,390,181,000

	HARTFORD HEALTH CAP								
	TWELVE MONTHS A								
	FISCAL YEAR		DATA ANALVEIS						
	REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2014	FY 2015	<u>FY 2016</u>					
E.	Solvency Measures Summary								
1	Equity Financing Ratio	47.5	44.0	41.6					
2	Total Net Assets	\$1,575,989,000	\$1,541,154,000	\$1,563,280,000					
3	Total Assets	\$3,315,196,000	\$3,499,862,000	\$3,761,762,000					
4	Cash Flow to Total Debt Ratio	21.2	11.3	26.1					
5	Excess/(Deficiency) of Revenues Over Expenses	\$103,547,000	\$16,639,000	\$207,239,000					
6	Depreciation Expense	\$118,837,000	\$125,330,000	\$138,197,000					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$222,384,000	\$141,969,000	\$345,436,000					
8	Total Current Liabilities	\$395,884,000	\$425,011,000	\$479,718,000					
9	Total Long Term Debt	\$654,020,000	\$836,308,000	\$841,601,000					
10	Total Current Liabilities and Total Long Term Debt	\$1,049,904,000	\$1,261,319,000	\$1,321,319,000					
11	Long Term Debt to Capitalization Ratio	29.3	35.2	35.0					
12	Total Long Term Debt	\$654,020,000	\$836,308,000	\$841,601,000					
13	Total Net Assets	\$1,575,989,000	\$1,541,154,000	\$1,563,280,000					
14	Total Long Term Debt and Total Net Assets	\$2,230,009,000	\$2,377,462,000	\$2,404,881,000					

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					MONTHS ACTUA			
					ISCAL YEAR 201			
			REPORT 40	0 - HOSPITAL INF			PARTMENT	
					_	-		
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
` '	`,	` '	` ,	•	, ,	` '	OCCUPANCY	OCCUPANCY
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	CU/CCU # PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	152,302	32,031	31,309	418	516	99.8%	80.9%
2	ICU/CCU (Excludes Neonatal ICU)	23,426	752	0	65	72	98.7%	89.1%
	De distin Accessors 47	0.000	4.057	4.050	07	00	07.50/	04.50/
	Psychiatric: Ages 0 to 17	8,626		1,058	27	29	87.5%	81.5%
4	Psychiatric: Ages 18+ TOTAL PSYCHIATRIC	29,075 <b>37,701</b>	2,666 <b>3,723</b>	2,587 <b>3,645</b>	80 <b>107</b>	92 <b>121</b>	99.6% <b>96.5%</b>	86.6% <b>85.4%</b>
	TOTAL PSTCHIATRIC	37,701	3,723	3,045	107	121	96.5%	63.4%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
	Terrabilitation		J	0	U	0	0.070	0.070
6	Maternity	10,896	3.726	3.887	30	43	99.5%	69.4%
	materinity .	.0,000	9,.20	3,00.			00.070	00.170
7	Newborn	9,029	3,856	3,857	25	48	98.9%	51.5%
				·				
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
40	0.0		0			0	0.00/	0.00/
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	224,325	39,480	38.841	620	752	99.1%	81.7%
	TOTAL EXCLUDING NEWBORN	224,323	39,460	30,041	020	132	33.170	01.770
	TOTAL INPATIENT BED UTILIZATION	233,354	43,336	42,698	645	800	99.1%	79.9%
	TOTAL IN ATIENT BED OTILIZATION	200,004	40,000	42,000	040	000	33.170	10.070
	TOTAL INPATIENT REPORTED YEAR	233,354	43,336	42,698	645	800	99.1%	79.9%
	TOTAL INPATIENT PRIOR YEAR	230,835		43,363	673	802	94.0%	78.9%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	2,519		-665	-28	-2	5.1%	1.1%
		,			_			
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	1%	0%	-2%	-4%	0%	5%	1%
	Total Licensed Beds and Bassinets	867			_	_		
						-		
(A) T	his number may not exceed the number of availa	ble beds for eac	h department or in t	total.				
Note	: Total discharges do not include ICU/CCU patien	ts.						

		RTFORD HOSPITAL			
		MONTHS ACTUAL FI	LING		
	REPORT 450 - HOSPITAL INPATIENT ANI	SISCAL YEAR 2016  DOUTPATIENT OTHE	R SERVICES UTIL	ZATION AND FTES	
	KEI OKI 450 - HOSI HALIM AHLIM AK	D GOTT ATTENT OTTE	IN SERVICES OTIE	ZATION AND ITES	'
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	% DIFFERENCE
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
Α.	CT Scans (A)				
1	Inpatient Scans	26,939	28,984	2,045	8%
	Outpatient Scans (Excluding Emergency Department				
2	Scans)	5,442	5,762	320	6%
3	Emergency Department Scans Other Non-Hospital Providers' Scans (A)	14,940	16,128	1,188	8%
- 4	Total CT Scans	0 47,321	0 <b>50,874</b>	0 <b>3,553</b>	0% <b>8%</b>
	Total of oddie	47,021	30,014	0,000	070
В.	MRI Scans (A)				
1	Inpatient Scans	5,677	5,855	178	3%
_	Outpatient Scans (Excluding Emergency Department				
3	Scans) Emergency Department Scans	4,701 491	4,372 457	-329 -34	-7% -7%
4	Other Non-Hospital Providers' Scans (A)	0	457 0	-34 0	-7% 0%
<u> </u>	Total MRI Scans	10,869	10,684	-185	-2%
C.	PET Scans (A)				
1	Inpatient Scans	72	63	-9	-13%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,197	1,175	-22	00/
3	Emergency Department Scans	1,197	1,175	-22 0	-2% 0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	1,269	1,238	-31	-2%
	PET/CT Scans (A)				
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	142	163	21	15%
2	Scans)	123	154	31	25%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	265	317	52	20%
	(A) If the Uponital is not the primary previder of these	a accusa the Heavitel	must shtein the fier	al vaar	
	(A) If the Hospital is not the primary provider of these volume of each of these types of scans from the			cai year	
	volume of each of these types of scans from the	primary provider or th	ie scaris.		
E.	Linear Accelerator Procedures				
1	Inpatient Procedures	2,058	2,099	41	2%
2	Outpatient Procedures	44,676	43,787	-889	-2%
	Total Linear Accelerator Procedures	46,734	45,886	-848	-2%
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	1,977	1,937	-40	-2%
2	Outpatient Procedures	1,449	1,445	-4	0%
	Total Cardiac Catheterization Procedures	3,426	3,382	-44	-1%
G.	Cardiac Angioplasty Procedures	400	205	0.5	201
2	Primary Procedures Elective Procedures	420 733	395 765	-25 32	-6% 4%
	Total Cardiac Angioplasty Procedures	1,153	1,160	7	1%
	J . p	.,.50	.,.00		170
H.	Electrophysiology Studies				
1	Inpatient Studies	93	92	-1	-1%
2	Outpatient Studies  Total Electrophysiology Studies	370	389	19	5%
<del> </del>	Total Electrophysiology Studies	463	481	18	4%
I.	Surgical Procedures				
1	Inpatient Surgical Procedures	16,754	16,682	-72	0%
2	Outpatient Surgical Procedures	26,101	26,551	450	2%
	Total Surgical Procedures	42,855	43,233	378	1%
J.	Endoscopy Procedures	+			
J. 1	Inpatient Endoscopy Procedures	3,721	3,738	17	0%
2	Outpatient Endoscopy Procedures	19,569	20,434	865	4%
	Total Endoscopy Procedures	23,290	24,172	882	4%
K.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	24,341	20,155	-4,186	-17%
2	Emergency Room Visits: Treated and Discharged  Total Emergency Room Visits	82,947 <b>107,288</b>	85,860 <b>106,015</b>	2,913 <b>-1,273</b>	4% -1%
		101,200	100,013	-1,273	-1/0

	HARTFORD HOSPITAL								
		E MONTHS ACTUAL F	II ING						
	FISCAL YEAR 2016								
	REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTES								
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(1)	(2)	(3)	(4)	(5)	(6)				
	. ,	` '	, ,	` ,	. ,				
		ACTUAL	ACTUAL	AMOUNT	%				
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE				
L.	Hospital Clinic Visits								
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%				
2	Dental Clinic Visits	14,830	14,887	57	0%				
	Psychiatric Clinic Visits	11,894	10,517	-1,377	-12%				
4	Medical Clinic Visits	0	0	0	0%				
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%				
	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%				
	Medical Clinic Visits - Family Practice Clinic	15,303	13,987	-1,316	-9%				
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%				
9	Specialty Clinic Visits	0	0	0	0%				
	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%				
	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%				
	Specialty Clinic Visits - OB-GYN Clinic	18,227	15,919	-2,308	-13%				
13	Specialty Clinic Visits - Other Speciality Clinics	20,501	18,357	-2,144	-10%				
	Total Hospital Clinic Visits	80,755	73,667	-7,088	-9%				
	Other Hospital Outpatient Visits								
	Rehabilitation (PT/OT/ST)	450.745	450 455	000	00/				
2	Cardiac Rehabilitation	152,745 14,240	152,455 12.638	-290 -1,602	0% -11%				
	Chemotherapy	1,344	3,098	1,754	131%				
4	Gastroenterology	17.790	20.434	2.644	151%				
	Other Outpatient Visits	18.420	19.285	2,044	5%				
- 5	Total Other Hospital Outpatient Visits	204.539	207.910	3.371	2%				
	Total Other Hospital Outpatient Visits	204,339	207,910	3,371	2 /0				
N.	Hospital Full Time Equivalent Employees								
1	Total Nursing FTEs	2.010.1	2.037.1	27.0	1%				
2	Total Physician FTEs	164.8	173.4	8.6	5%				
3	Total Non-Nursing and Non-Physician FTEs	3,342.3	3,365.2	22.9	1%				
	Total Hospital Full Time Equivalent Employees	5,517.2	5,575.7	58.5	1%				
			·						

	HARTFORE	HOSPITAL			
	TWELVE MONTH	S ACTUAL FILIN	IG		
	FISCAL Y	EAR 2016			
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EM	ERGENCY RO	OM SERVICES E	BY LOCATION
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	<u>DESCRIPTION</u>	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
Α.	Outpatient Surgical Procedures				
1	Eye Surgery Center	10.452	10.290	-162	-2%
2	Hartford Hospital	13,742	14.069	327	2%
3	West Hartford Surgery Center	1,907	2.192	285	15%
	Total Outpatient Surgical Procedures(A)	26,101	26,551	450	2%
		,	į		
В.	Outpatient Endoscopy Procedures				
1	Hartford Hospital	11,171	11,536	365	3%
2	West Hartford Surgery Center	1,777	1,860	83	5%
3	Glastonbury GI	6,621	7,038	417	6%
	Total Outpatient Endoscopy Procedures(B)	19,569	20,434	865	4%
C.	Outpatient Hospital Emergency Room Visits				
1	Hartford Hospital	82,947	85.860	2.913	4%
	Total Outpatient Hospital Emergency Room Visits(C)	82,947	85,860	2,913	4%
	(A) Must agree with Total Outpatient Surgical Procedure	es on Report 450			
	(B) Must agree with Total Outpatient Endoscopy Proced	ures on Report	450.		
	(C) Must agree with Emergency Room Visits Treated and	d Discharged on	Report 450		
	(V) must agree with Emergency Noom visits freated and	a Discharged Off	Report 450.		
L					

### HARTFORD 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** DATA BY MAJOR PAYER CATEGORY A. MEDICARE MEDICARE INPATIENT 3% INPATIENT ACCRUED CHARGES \$838.574.406 \$864,495,030 \$25,920,624 INPATIENT ACCRUED PAYMENTS (IP PMT) \$296,209,221 \$286.978.433 (\$9,230,788) -3% -6% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 33.20% -2.13% 35.32% 4 DISCHARGES -1% 17.826 17.992 (166) 5 CASE MIX INDEX (CMI) 1.88482 1.96007 0.07525 4% 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 33,911.68144 34,940.20782 1,028.52638 3% 7 INPATIENT ACCRUED PAYMENT / CMAD \$8,734.73 \$8,213.42 (\$521.31)-6% 8 PATIENT DAYS 109,682 -1% (1,359) 111,041 9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$2,667.57 \$2,616.46 (\$51.11) -2% 10 AVERAGE LENGTH OF STAY 0% 6.2 (0.0)MEDICARE OUTPATIENT OUTPATIENT ACCRUED CHARGES (OP CHGS) 4% 11 \$376.598.114 \$389,796,873 \$13,198,759 9% OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$99,976,396 \$109,235,514 \$9,259,118 12 13 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 26.55% 28.02% 1.48% 6% 14 OUTPATIENT CHARGES / INPATIENT CHARGES 44.91% 45.09% 0.18% 0% 15 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 8,080.08594 8,037.66224 (42.42370)-1% 16 OUTPATIENT ACCRUED PAYMENTS / OPED \$12,373.18 \$13,590.46 \$1,217.27 10% MEDICARE TOTALS (INPATIENT + OUTPATIENT) 3% TOTAL ACCRUED CHARGES \$1,215,172,520 \$1,254,291,903 \$39,119,383 18 TOTAL ACCRUED PAYMENTS \$396,185,617 \$396,213,947 \$28,330 0% TOTAL ALLOWANCES 19 \$818,986,903 \$858,077,956 \$39,091,053 5%

### HARTFORD 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** B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) NON-GOVERNMENT INPATIENT INPATIENT ACCRUED CHARGES \$459,927,429 \$488,608,700 \$28,681,271 6% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$310,160,863 \$338,326,734 \$28,165,871 9% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 67.44% 69.24% 1.81% 3% 4 DISCHARGES 2% 14.392 14.621 229 2% 5 CASE MIX INDEX (CMI) 1.50315 1.53467 0.03152 CASE MIX ADJUSTED DISCHARGES (CMAD) 21,633.33480 22,438.41007 805.07527 4% 6 INPATIENT ACCRUED PAYMENT / CMAD 5% \$14,337.17 \$15,078.02 \$740.84 8 MEDICARE - NON-GOVERNMENT IP PMT / CMAD (\$5,602.45) (\$6,864.60) (\$1,262.15) 23% 9 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$121,199,627) (\$154,030,756) (\$32,831,130) 27% 10 PATIENT DAYS 4% 62,565 64,790 2,225 11 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$4,957.42 \$5,221.90 \$264.48 5% AVERAGE LENGTH OF STAY 2% 12 NON-GOVERNMENT OUTPATIENT 13 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$420.118.303 \$16.593.596 4% \$403.524.707 \$231,744,192 14 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$214,583,288 \$17,160,904 8% 15 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 53.18% 55.16% 1.98% 4% 16 OUTPATIENT CHARGES / INPATIENT CHARGES 87.74% 85.98% -1.75% -2% 17 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 12,627.05205 12,571.51113 (55.54092)0% 8% 18 OUTPATIENT ACCRUED PAYMENTS / OPED \$16,993.93 \$18,434.08 \$1,440,14 (\$4,620.75) 5% 19 MEDICARE- NON-GOVERNMENT OP PMT / OPED (\$4,843.62) (\$222.87)20 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$58,346,440) (\$60,891,593) (\$2,545,153) 4% NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT) 21 TOTAL ACCRUED CHARGES \$863,452,136 \$908,727,003 \$45,274,867 5% TOTAL ACCRUED PAYMENTS 22 \$524,744,151 \$570.070.926 \$45.326.775 9% 23 TOTAL ALLOWANCES \$338,707,985 \$338,656,077 (\$51,908) 0% 24 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT (\$179,546,067) (\$214,922,350) (\$35,376,283) 20% NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA ACCRUED CHARGES ASSOCIATED WITH NGCA 6% \$794.912.520 \$843.088.674 \$48,176,154 25 ACCRUED PAYMENTS ASSOCIATED WITH NGCA \$486,649,207 \$543,858,096 \$57,208,889 12% 26 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 27 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$308,263,313 \$299,230,578 (\$9,032,735)-3% 28 TOTAL ACTUAL DISCOUNT PERCENTAGE 38.78% 35.49% -3 29%

### HARTFORD 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. UNINSURED UNINSURED INPATIENT INPATIENT ACCRUED CHARGES \$13,460,763 \$16,722,127 \$3,261,364 24% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$6,290,289 \$7,673,864 \$1,383,575 22% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 46.73% 45.89% -0.84% -2% 4 DISCHARGES 35% 406 547 141 CASE MIX INDEX (CMI) 1.10890 1.23513 0.12623 11% 5 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 450.21340 675.61611 225.40271 50% INPATIENT ACCRUED PAYMENT / CMAD -19% \$13,971.79 \$11,358.32 (\$2,613.47)8 NON-GOVERNMENT - UNINSURED IP PMT / CMAD \$365.38 \$3,719.70 \$3,354.32 918% MEDICARE - UNINSURED IP PMT / CMAD (\$5,237.07) (\$3,144.90) \$2,092.16 -40% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$2,357,799) (\$2,124,748) \$233,050 -10% PATIENT DAYS 61% 11 1.642 2.642 1.000 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$2,904.57 (\$926.30) -24% 12 \$3,830.87 13 AVERAGE LENGTH OF STAY 4.0 19% UNINSURED OUTPATIENT \$2,389,852 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$28.800.715 \$31,190,567 8% 14 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$9,361,750 \$12,548,459 \$3,186,709 34% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 24% 32.51% 40.23% 7.73% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 213.96% 186.52% -27.44% -13% 868.67<sub>961</sub> 1,020.27931 151.59970 17% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 19 OUTPATIENT ACCRUED PAYMENTS / OPED \$1.522.05 14% \$10,776.99 \$12,299,04 20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$6,135.03 (\$81.91) -1% \$6.216.95 -19% 21 MEDICARE - UNINSURED OP PMT / OPED \$1,596.20 \$1,291.42 (\$304.78)22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$1,386,583 \$1,317,604 (\$68,979)-5% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) 23 TOTAL ACCRUED CHARGES \$42,261,478 \$47,912,694 \$5,651,216 13% 24 TOTAL ACCRUED PAYMENTS \$15,652,039 \$20,222,323 \$4,570,284 29% 25 TOTAL ALLOWANCES \$26,609,439 \$27,690,371 \$1,080,932 4% 26 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT (\$971,215) (\$807,144) \$164,071 -17%

### HARTFORD 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 INPATIENT ACCRUED CHARGES \$345,375,302 \$31,807,641 10% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$73,957,630 \$74,281,238 \$323,608 0% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 23.59% 21.51% -2.08% -9% 4 DISCHARGES -1% 10,634 10.567 (67) 10% 5 CASE MIX INDEX (CMI) 1.26519 1.38947 0.12428 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 13,454.03046 14,682.52949 1,228.49903 9% INPATIENT ACCRUED PAYMENT / CMAD -8% 7 \$5,497.06 \$5,059.16 (\$437.90)8 NON-GOVERNMENT - MEDICAID IP PMT / CMAD \$8,840.11 \$10,018.86 \$1,178.75 13% 9 MEDICARE - MEDICAID IP PMT / CMAD \$3,237.66 \$3,154.26 (\$83.41) -3% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$43,559,630 \$46,312,472 \$2,752,843 6% 11 PATIENT DAYS 3% 55.246 56.849 1.603 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,338.70 \$1,306.64 (\$32.06)-2% 12 13 AVERAGE LENGTH OF STAY 0.2 4% MEDICAID OUTPATIENT \$228,280,330 \$246,411,380 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$18.131.050 8% 14 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$35,147,982 \$60,175,639 \$25,027,657 71% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 59% 15.40% 24.42% 9.02% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 72.80% 71.35% -1.46% -2% 7,741.65621 7,539.12928 (202.52693) -3% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 19 OUTPATIENT ACCRUED PAYMENTS / OPED 76% \$4,540.11 \$7.981.78 \$3,441.66 20 NON-GOVERNMENT - MEDICAID OP PMT / OPED \$12,453.82 \$10,452.30 (\$2,001.52) -16% -28% 21 MEDICARE - MEDICAID OP PMT / OPED \$7,833.07 \$5,608.68 (\$2,224.39)22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$60,640,960 \$42,284,584 (\$18,356,377) -30% MEDICAID TOTALS (INPATIENT + OUTPATIENT) 23 TOTAL ACCRUED CHARGES \$541,847,991 \$591,786,682 \$49,938,691 9% 24 TOTAL ACCRUED PAYMENTS \$109,105,612 \$134,456,877 \$25,351,265 23% 25 TOTAL ALLOWANCES \$432,742,379 \$457,329,805 6% \$24,587,426 26 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT \$104.200.590 \$88.597.056 (\$15,603,534) -15%

### HARTFORD 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** E. OTHER MEDICAL ASSISTANCE (O.M.A.) OTHER MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES \$0 \$0 0% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$0 \$0 \$0 0% INPATIENT PAYMENTS / INPATIENT CHARGES 0.00% 3 0.00% 0.00% Λ% 4 DISCHARGES 0% CASE MIX INDEX (CMI) 0.00000 0.00000 0% 5 0.00000 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 0.00000 0.00000 0.00000 0% INPATIENT ACCRUED PAYMENT / CMAD \$0.00 \$0.00 0% 7 \$0.00 8 NON-GOVERNMENT - O.M.A IP PMT / CMAD \$14,337.17 \$15,078.02 \$740.84 5% 9 MEDICARE - O.M.A. IP PMT / CMAD \$8,734.73 \$8,213.42 (\$521.31) -6% 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% OTHER MEDICAL ASSISTANCE OUTPATIENT 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% \$0.00 20 NON-GOVERNMENT - O.M.A OP PMT / CMAD \$16,993.93 \$18,434.08 \$1,440.14 8% \$12,373.18 \$13,590.46 \$1,217.27 10% 21 MEDICARE - O.M.A. OP PMT / CMAD 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$0 \$0 \$0 0% OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT) \$0 \$0 0% 23 TOTAL ACCRUED CHARGES \$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%

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	TWELVE MONTHS AC	_			
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION O		PAYMENT I IM	IT	
	AND BASELINE UNDERPAYMENT DA				
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA	AL ASSISTANCE	<u>)</u>		
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$313,567,661	\$345,375,302	\$31,807,641	10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$73,957,630	\$74,281,238	\$323,608	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.59%	21.51%	-2.08%	-9%
4	DISCHARGES	10,634	10,567	(67)	-1%
5	CASE MIX INDEX (CMI)	1.26519	1.38947	0.12428	10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	13,454.03046	14,682.52949	1,228.49903	9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,497.06	\$5,059.16	(\$437.90)	-8%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$8,840.11	\$10,018.86	\$1,178.75	13%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,237.66	\$3,154.26	(\$83.41)	-3%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$43,559,630	\$46,312,472	\$2,752,843	6%
11	PATIENT DAYS	55,246	56,849	1,603	3%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,338.70	\$1,306.64	(\$32.06)	-2%
13	AVERAGE LENGTH OF STAY	5.2	5.4	0.2	4%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$228,280,330	\$246,411,380	\$18,131,050	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$35,147,982	\$60,175,639	\$25,027,657	71%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.40%	24.42%	9.02%	59%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	72.80%	71.35%	-1.46%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	7,741.65621	7,539.12928	(202.52693)	-3%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,540.11	\$7,981.78	\$3,441.66	76%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$12,453.82	\$10,452.30	(\$2,001.52)	-16%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,833.07	\$5,608.68	(\$2,224.39)	-28%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$60,640,960	\$42,284,584	(\$18,356,377)	-30%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN	IT)			
23	TOTAL ACCRUED CHARGES	\$541,847,991	\$591,786,682	\$49,938,691	9%
24	TOTAL ACCRUED PAYMENTS	\$109,105,612	\$134,456,877	\$25,351,265	23%
25	TOTAL ALLOWANCES	\$432,742,379	\$457,329,805	\$24,587,426	6%

### HARTFORD 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. CHAMPUS / TRICARE **CHAMPUS / TRICARE INPATIENT** INPATIENT ACCRUED CHARGES \$10,920,271 \$13,264,479 \$2,344,208 21% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$4,501,295 \$1,824,412 (\$2,676,883)-59% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 41.22% 13.75% -27.47% -67% 4 DISCHARGES -3% 332 322 (10) 9% 5 CASE MIX INDEX (CMI) 1.35542 1.47359 0.11817 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 449.99944 474.49598 24.49654 5% INPATIENT ACCRUED PAYMENT / CMAD -62% 7 \$10,002.89 \$3,844.95 (\$6,157.94)PATIENT DAYS 8 1,983 2,033 50 3% 9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$2,269.94 \$897.40 (\$1,372.54) -60% 10 AVERAGE LENGTH OF STAY 6% 6.0 6.3 0.3 CHAMPUS / TRICARE OUTPATIENT 11 OUTPATIENT ACCRUED CHARGES (OP CHGS \$5,310,131 \$5,701,538 \$391,407 7% 12 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$3,177,110 \$0 (\$3,177,110) -100% CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT) 13 TOTAL ACCRUED CHARGES \$16,230,402 \$18,966,017 \$2,735,615 17% 14 TOTAL ACCRUED PAYMENTS -76% \$7,678,405 \$1,824,412 (\$5,853,993) 15 TOTAL ALLOWANCES \$8,551,997 \$17,141,605 \$8,589,608 100% Н. OTHER DATA OTHER OPERATING REVENUE \$114,392,501 \$105,622,852 (\$8,769,649) -8% \$1,033,299,408 \$1,082,920,481 \$49,621,073 5% UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 0% 3 COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$20.579.150 -15% \$24,219,691 (\$3.640.541) 5 BAD DEBTS (CHARGES) \$14,132,654 \$4.020.775 (\$10,111,879) -72% UNCOMPENSATED CARE (CHARGES) 6 \$38,352,345 \$24,599,925 (\$13,752,420) -36% 7 COST OF UNCOMPENSATED CARE \$14,853,688 \$9,865,031 (\$4,988,658) -34% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) TOTAL ACCRUED CHARGES \$591,786,682 \$49,938,691 9% 8 \$541.847.991 23% 9 TOTAL ACCRUED PAYMENTS \$109,105,612 \$134,456,877 \$25,351,265 10 COST OF TOTAL MEDICAL ASSISTANCE \$209,855,258 \$237,317,548 \$27,462,290 13% MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT \$2,111,025 2% \$100,749,646 \$102,860,671

### HARTFORD 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** AGGREGATE DATA **TOTALS - ALL PAYERS** TOTAL INPATIENT CHARGES \$1,622,989,767 \$1,711,743,511 \$88,753,744 5% 2 TOTAL INPATIENT PAYMENTS \$684,829,009 \$701,410,817 \$16,581,808 2% TOTAL INPATIENT PAYMENTS / CHARGES 3 42.20% 40.98% -1.22% -3% 4 TOTAL DISCHARGES 0% 43.350 43.336 (14) 4% 5 TOTAL CASE MIX INDEX 1.67380 0.07174 1.60205 6 TOTAL CASE MIX ADJUSTED DISCHARGES 69,449.04614 72,535.64336 3,086.59722 4% 7 TOTAL OUTPATIENT CHARGES 5% \$1,013,713,282 \$1,062,028,094 \$48,314,812 8 OUTPATIENT CHARGES / INPATIENT CHARGES 62.46% 62.04% -0.42% -1% 9 TOTAL OUTPATIENT PAYMENTS \$352,884,776 \$401,155,345 \$48,270,569 14% 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 34.81% 2.96% 9% 37.77% 11 TOTAL CHARGES \$2,636,703,049 \$2,773,771,605 \$137,068,556 5% \$1,037,713,785 \$1,102,566,162 6% 12 TOTAL PAYMENTS \$64,852,377 13 TOTAL PAYMENTS / TOTAL CHARGES 39.36% 39.75% 0.39% 1% 14 PATIENT DAYS 230,835 233,354 2,519 1% В. **TOTALS - ALL GOVERNMENT PAYERS** INPATIENT CHARGES \$1,163,062,338 \$1,223,134,811 \$60,072,473 5% 2 INPATIENT PAYMENTS \$374,668,146 \$363,084,083 (\$11,584,063) -3% GOVT. INPATIENT PAYMENTS / CHARGES 32.21% 29.68% -2.53% -8% -1% 4 DISCHARGES 28,958 28,715 (243) 6% 5 1.65121 1.74464 CASE MIX INDEX 0.09343 6 CASE MIX ADJUSTED DISCHARGES 47,815.71134 50,097.23329 2,281.52195 5% 5% 7 **OUTPATIENT CHARGES** \$610,188,575 \$641,909,791 \$31,721,216 8 OUTPATIENT CHARGES / INPATIENT CHARGES 52.46% 52.48% 0.02% 0% 9 OUTPATIENT PAYMENTS \$138,301,488 \$169,411,153 \$31,109,665 22% OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 16% 10 22.67% 26.39% 3.73% 11 TOTAL CHARGES \$1,773,250,913 \$1,865,044,602 \$91,793,689 5% 12 TOTAL PAYMENTS \$512,969,634 \$532,495,236 \$19,525,602 4% 13 TOTAL PAYMENTS / CHARGES 28.93% 28.55% -0.38% -1% 14 PATIENT DAYS 168,270 168,564 294 0% TOTAL GOVERNMENT DEDUCTIONS \$1,260,281,279 \$1,332,549,366 \$72,268,087 6% 15 C. **AVERAGE LENGTH OF STAY** MEDICARE 6.2 (0.0)0% 2 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 4.3 4.4 0.1 2% 3 UNINSURED 4.0 4.8 0.8 19% 4 MEDICAID 5.2 5.4 0.2 4% 5 OTHER MEDICAL ASSISTANCE 0% 6 CHAMPUS / TRICARE 6.0 6.3 0.3 6% 7 TOTAL AVERAGE LENGTH OF STAY 5.3 5.4 0.1 1%

### HARTFORD 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** III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION 5% TOTAL CHARGES \$2,636,703,049 \$2,773,771,605 \$137,068,556 TOTAL GOVERNMENT DEDUCTIONS \$1,260,281,279 \$1,332,549,366 \$72,268,087 6% 3 UNCOMPENSATED CARE \$38,352,345 \$24,599,925 4 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$308,263,313 \$299,230,578 (\$9,032,735) -3% 5 EMPLOYEE SELF INSURANCE ALLOWANCE -41% \$8.623.036 \$5.057.350 (\$3.565.686) TOTAL ADJUSTMENTS \$1,615,519,973 \$1,661,437,219 3% 6 \$45.917.246 7 TOTAL ACCRUED PAYMENTS \$1,021,183,076 \$1,112,334,386 \$91,151,310 9% 0% 8 UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input) \$0 \$0 \$0 9 NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS. \$1,021,183,076 \$1,112,334,386 \$91,151,310 9% 10 RATIO OF NET REVENUE TO TOTAL CHARGES 0.3872954432 0.4010187371 0.0137232939 4% COST OF UNCOMPENSATED CARE \$14.853.688 \$9.865.031 (\$4.988.658) -34% 11 MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT \$100,749,646 \$102,860,671 \$2,111,025 2% 12 0% 13 PLUS OHCA ADJUSTMENT (OHCA INPUT) \$0 \$0 TOTAL COST OF UNCOMPENSATED CARE AND 14 MEDICAL ASSISTANCE UNDERPAYMENT \$115,603,334 \$112,725,702 (\$2,877,633)-2% IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) -30% MEDICAID \$60,640,960 \$42,284,584 (\$18,356,377) 2 OTHER MEDICAL ASSISTANCE \$0 \$0 \$0 Λ% UNINSURED (INCLUDED IN NON-GOVERNMENT) -17% (\$971,215)(\$807,144)\$164,071 TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY) 4 \$41,477,440 -30% \$59,669,745 (\$18.192.305) DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600 EMPLOYEE SELF INSURANCE GROSS REVENUE \$13,950,310 \$9,189,127 (\$4,761,183)-34.13% PLUS/MINUS OTHER ADJUST, TO OHCA DEFINED NET REVENUE (\$57.278.965) (\$80,874,785) (\$23.595.820) 41 19% 3 NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS \$980,435,000 \$1,021,691,377 \$41,256,377 4.21% PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE \$309,166 (\$309,166) -100.00% 5 IGROSS REVENUE FROM HOSP AUDIT FINANCIAL STATEMENTS \$136,759,391 \$2,637,012,215 \$2,773,771,606 5.19% 6 PLUS/MINUS OTHER ADJUST, TO OHCA DEFINED UNCOMP, CARE \$1 734 985 \$5,658,146 \$3,923,161 226 12% UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS \$40,087,330 \$30,258,072 (\$9,829,258) -24.52%

## HARTFORD 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)		
	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE		
I.	ACCRUED CHARGES AND PAYMENTS					
	INDATIFAT AGODUST GUADOSO					
	INPATIENT ACCRUED CHARGES NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$459,927,429	\$488,608,700	\$28,681,271		
	MEDICARE	\$838,574,406	864,495,030	\$25,920,624		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$313,567,661 \$313,567,661	345,375,302 345,375,302	\$31,807,641 \$31,807,641		
	OTHER MEDICAL ASSISTANCE	\$0	0	\$0		
	CHAMPUS / TRICARE	\$10,920,271	13,264,479	\$2,344,208		
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT CHARGES	\$13,460,763 <b>\$1,163,062,338</b>	16,722,127 <b>\$1,223,134,811</b>	\$3,261,364 <b>\$60,072,473</b>		
	TOTAL INPATIENT CHARGES	\$1,622,989,767	\$1,711,743,511	\$88,753,744		
B.	OUTPATIENT ACCRUED CHARGES					
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$403,524,707	\$420,118,303	\$16,593,596		
2	MEDICARE	\$376,598,114	389,796,873	\$13,198,759		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$228,280,330 \$228,280,330	246,411,380 246,411,380	\$18,131,050 \$18,131,050		
	OTHER MEDICAL ASSISTANCE	\$0	0	\$10,131,030		
	CHAMPUS / TRICARE	\$5,310,131	5,701,538	\$391,407		
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT GOVERNMENT CHARGES	\$28,800,715 <b>\$610,188,575</b>	31,190,567 <b>\$641,909,791</b>	\$2,389,852 <b>\$31,721,216</b>		
	TOTAL OUTPATIENT CHARGES	\$1,013,713,282	\$1,062,028,094	\$48,314,812		
C.	TOTAL ACCRUED CHARGES					
	TOTAL ACCRUED CHARGES  TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$863,452,136	\$908,727,003	\$45,274,867		
2	TOTAL MEDICARE	\$1,215,172,520	\$1,254,291,903	\$39,119,383		
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) TOTAL MEDICAID	\$541,847,991 \$541,847,991	\$591,786,682 \$591,786,682	\$49,938,691 \$49,938,691		
	TOTAL MEDICAL ASSISTANCE	\$0	\$0	\$0		
	TOTAL CHAMPUS / TRICARE	\$16,230,402	\$18,966,017	\$2,735,615		
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$42,261,478 \$1,773,250,913	\$47,912,694 <b>\$1,865,044,602</b>	\$5,651,216 <b>\$91,793,689</b>		
	TOTAL CHARGES	\$2,636,703,049	\$2,773,771,605	\$137,068,556		
D.	INPATIENT ACCRUED PAYMENTS					
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$310,160,863	\$338,326,734	\$28,165,871		
	MEDICARE	\$296,209,221	286,978,433	(\$9,230,788)		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$73,957,630 \$73,957,630	74,281,238 74,281,238	\$323,608 \$323,608		
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0		
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,501,295 \$6,290,289	1,824,412 7.673.864	(\$2,676,883) \$1,383,575		
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$374,668,146	\$363,084,083	(\$11,584,063)		
	TOTAL INPATIENT PAYMENTS	\$684,829,009	\$701,410,817	\$16,581,808		
E.	OUTPATIENT ACCRUED PAYMENTS					
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$214,583,288	\$231,744,192	\$17,160,904		
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$99,976,396 \$35,147,982	109,235,514 60,175,639	\$9,259,118 \$25,027,657		
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$35,147,982 \$35,147,982	60,175,639	\$25,027,657		
	OTHER MEDICAL ASSISTANCE	\$0	0	\$0		
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,177,110 \$9,361,750	12,548,459	(\$3,177,110) \$3,186,709		
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$138,301,488	\$169,411,153	\$31,109,665		
	TOTAL OUTPATIENT PAYMENTS	\$352,884,776	\$401,155,345	\$48,270,569		
	TOTAL ACCRUED PAYMENTS					
	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$524,744,151	\$570,070,926	\$45,326,775		
3	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$396,185,617 \$109,105,612	\$396,213,947 \$134,456,877	\$28,330 \$25,351,265		
	TOTAL MEDICALD	\$109,105,612	\$134,456,877	\$25,351,265		
	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0 \$1,834,443	\$0 (\$5.853.003)		
6 7	TOTAL CHAMPUS / TRICARE TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,678,405 \$15,652,039	\$1,824,412 \$20,222,323	(\$5,853,993) \$4,570,284		
	TOTAL GOVERNMENT PAYMENTS	\$512,969,634	\$532,495,236	\$19,525,602		
-	TOTAL PAYMENTS	\$1,037,713,785	\$1,102,566,162	\$64,852,377		
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**FISCAL YEAR 2016** 

### HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

## REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2015</u>	ACTUAL FY 2016	AMOUNT <u>DIFFERENCE</u>
II.	PAYER MIX			
A.	INPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.44%	17.62%	0.17%
	MEDICARE	31.80%	31.17%	-0.64%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11.89%	12.45%	0.56%
	MEDICAL ASSISTANCE	11.89%	12.45%	0.56%
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	0.00%	0.00% 0.48%	0.00%
_	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.41%	0.60%	0.00%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	44.11%	44.10%	-0.01%
	TOTAL INPATIENT PAYER MIX	61.55%	61.71%	0.16%
B.	OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.30%	15.15%	-0.16%
	MEDICARE	14.28%	14.05%	-0.16%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.66%	8.88%	0.23%
_	MEDICAID	8.66%	8.88%	0.23%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	0.20%	0.21%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.09%	1.12%	0.03%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	23.14%	23.14%	0.00%
	TOTAL OUTPATIENT PAYER MIX	38.45%	38.29%	-0.16%
	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)	29.89%	30.69%	0.80%
	MEDICARE	28.54%	26.03%	-2.52%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.13%	6.74%	-0.39%
4	MEDICAID	7.13%	6.74%	-0.39%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	0.43%	0.17%	-0.27%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYER MIX	0.61% <b>36.11%</b>	0.70% <b>32.93%</b>	0.09% -3.17%
	TOTAL INPATIENT PAYER MIX	65.99%	63.62%	-2.38%
D.	OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	20.68%	21.02%	0.34%
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9.63%	9.91% 5.46%	0.27% 2.07%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)  MEDICAID	3.39%	5.46%	2.07%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
	CHAMPUS / TRICARE	0.31%	0.00%	-0.31%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.90%	1.14%	0.24%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	13.33%	15.37%	2.04%
	TOTAL OUTPATIENT PAYER MIX	34.01%	36.38%	2.38%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
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**FISCAL YEAR 2016** 

### HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING

### REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA

	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA .		
Α.	DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	14,392 17,992	14,621 17,826	229 (166)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,634	10,567	(67)
	MEDICAID	10,634	10,567	(67)
	OTHER MEDICAL ASSISTANCE	0	0	•
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	332	322	(10)
	TOTAL GOVERNMENT DISCHARGES	406 <b>28,958</b>	547 <b>28,715</b>	141 (243)
	TOTAL DISCHARGES	43,350	43,336	(14)
		,	·	` '
В.	PATIENT DAYS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	62,565	64,790	2,225
	MEDICARE	111,041	109,682	(1,359)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	55,246	56,849	1,603
	MEDICAID	55,246	56,849	1,603
	OTHER MEDICAL ASSISTANCE	0	0	-
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,983 1,642	2,033 2,642	50 1,000
	TOTAL GOVERNMENT PATIENT DAYS	168,270	168,564	294
	TOTAL PATIENT DAYS	230,835	233,354	2,519
C.	AVERAGE LENGTH OF STAY (ALOS)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.3	4.4	0.1
	MEDICARE	6.2	6.2	(0.0)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.2	5.4	0.2
	MEDICAID OTHER MEDICAL ASSISTANCE	5.2 0.0	5.4 0.0	0.2
	CHAMPUS / TRICARE	6.0	6.3	0.3
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.0	4.8	0.8
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.8	5.9	0.1
	TOTAL AVERAGE LENGTH OF STAY	5.3	5.4	0.1
D.	CASE MIX INDEX			
	MON COVERNMENT (INCLUDING CELE DAY / HAINGURED)	4 50045	4 50 407	0.00450
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	1.50315 1.88482	1.53467 1.96007	0.03152 0.07525
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.26519	1.38947	0.12428
	MEDICAID	1.26519	1.38947	0.12428
	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.35542 1.10890	1.47359 1.23513	0.11817 0.12623
	TOTAL GOVERNMENT CASE MIX INDEX	1.65121	1.74464	0.09343
	TOTAL CASE MIX INDEX	1.60205	1.67380	
E.	OTHER REQUIRED DATA			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$794,912,520	\$843,088,674	\$48,176,154
	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	. , ,	. , ,	. , ,
2		\$486,649,207	\$543,858,096	\$57,208,889
3	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$308,263,313	\$299,230,578	(\$9,032,735)
	TOTAL NON-GOVERNMENT CONTRACTOAL ALLOWANCES  TOTAL ACTUAL DISCOUNT PERCENTAGE	38.78%	35.49%	-3.29%
	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$13,950,310	\$9,189,127	(\$4,761,183)
	EMPLOYEE SELF INSURANCE ALLOWANCE	\$8,623,036	\$5,057,350	(\$3,565,686)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-	\$0	\$0	
L	OHCA INPUT)	40	A00	\$0
	CHARITY CARE BAD DEBTS	\$24,219,691 \$14,132,654	\$20,579,150 \$4,020,775	(\$3,640,541) (\$10,111,879)
	TOTAL UNCOMPENSATED CARE	\$14,132,654 \$38,352,345	\$4,020,775 \$24,599,925	(\$13,752,420)
	TOTAL OTHER OPERATING REVENUE	\$114,392,501	\$105,622,852	(\$8,769,649)
12	TOTAL OPERATING EXPENSES	\$1,033,299,408	\$1,082,920,481	\$49,621,073

### HARTFORD 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) **ACTUAL** ACTUAL AMOUNT DESCRIPTION FY 2015 **DIFFERENCE** FY 2016 DSH UPPER PAYMENT LIMIT CALCULATIONS CASE MIX ADJUSTED DISCHARGES Α NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 21,633.33480 22,438.41007 805.07527 33.911.68144 MEDICARE 34.940.20782 1.028.52638 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 13,454.03046 14.682.52949 3 1.228.49903 13.454.03046 14.682.52949 1,228,49903 4 MEDICAID OTHER MEDICAL ASSISTANCE 5 0.00000 0.00000 0.00000 CHAMPUS / TRICARE 6 449,99944 474,49598 24.49654 UNINSURED (INCLUDED IN NON-GOVERNMENT) 450 21340 675 61611 225 40271 47,815.71134 2,281.52195 TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES 50.097.23329 69.449.04614 72.535.64336 3.086.59722 TOTAL CASE MIX ADJUSTED DISCHARGES OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY) В. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 12,571.51113 12.627.05205 -55.54092 MEDICARE 8 037 66224 -42 42370 8 080 08594 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 7.741.65621 7.539.12928 -202.52693 4 MEDICAID 7.741.65621 7.539.12928 -202.52693 OTHER MEDICAL ASSISTANCE 0.00000 0.00000 0.00000 5 CHAMPUS / TRICARE 161,43954 138,40689 -23.03265 6 UNINSURED (INCLUDED IN NON-GOVERNMENT) 868,67961 1,020.27931 151.59970 15,983.18168 15,715.19841 -267.98328 TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES 28.286.70953 TOTAL OUTPATIENT EQUIVALENT DISCHARGES 28.610.23373 -323.52420 INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE C NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$14,337.17 \$15,078.02 \$740.84 MEDICARE \$8,734,73 \$8,213,42 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$5,497.06 \$5,059.16 3 \$5,497.06 \$5,059.16 4 MEDICAID OTHER MEDICAL ASSISTANCE \$0.00 \$0.00 5 \$0.00 CHAMPUS / TRICARE \$10,002.89 \$3.844.95 6 (\$6,157.9 \$13,971.79 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$11,358,32 TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE \$7,835.67 \$7,247.59 (\$191.01 \$9.860.88 \$9,669,88 TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE D. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) \$16.993.93 \$18,434,08 \$1,440,14 \$1,217,27 **MEDICARE** \$13,590,46 \$12,373,18 MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) \$3,441.66 \$4.540.11 \$7.981.78 3 \$3,441.66 \$4,540.11 \$7,981,78 4 MEDICAID \$0.00 \$0.00 \$0.00 OTHER MEDICAL ASSISTANCE 5 CHAMPUS / TRICARE \$19,679.88 \$0.00 6 UNINSURED (INCLUDED IN NON-GOVERNMENT) \$10,776.99 \$12,299.04 \$1,522.05

TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE

TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE

\$8.652.94

\$12.334.22

\$10,780.08

\$14,181,76

\$2,127,15

\$1.847.55

	HARTEORD HOSPITAL			
	HARTFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016			
	REPORT 550 - CALCULATION OF DSH UPPER PAYN	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
(-/	ζ-7	(-)	\-'/	(-)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
1	MEDICAID	\$60,640,960	\$42,284,584	(\$18,356,377)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$971,215)	(\$807,144)	\$164,071
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$59,669,745	\$41,477,440	(\$18,192,305)
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	OGY)		
	TOTAL CHARGES	\$2,636,703,049	\$2,773,771,605	\$137,068,556
2	TOTAL GOVERNMENT DEDUCTIONS	\$1,260,281,279	\$1,332,549,366	\$72,268,087
	UNCOMPENSATED CARE	\$38,352,345	\$24,599,925	(\$13,752,420)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$308,263,313	\$299,230,578	(\$9,032,735)
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$8,623,036	\$5,057,350	(\$3,565,686)
	TOTAL ADDRUGED PAYMENTS	\$1,615,519,973	\$1,661,437,219	\$45,917,246
7	TOTAL ACCRUED PAYMENTS	\$1,021,183,076	\$1,112,334,386	\$91,151,310
<u>8</u> 9	UCP DSH PAYMENTS (OHCA INPUT) NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$0 \$1,021,183,076	\$0 \$1,112,334,386	\$0 \$91,151,310
	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3872954432	0.4010187371	0.0137232939
11	COST OF UNCOMPENSATED CARE	\$14,853,688	\$9,865,031	(\$4,988,658)
	MEDICAL ASSISTANCE UNDERPAYMENT	\$100,749,646	\$102,860,671	\$2,111,025
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	, ,	,	**
		\$115,603,334	\$112,725,702	(\$2,877,633)
VII.	RATIOS			
A.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	67.44%	69.24%	1.81%
	MEDICARE	35.32%	33.20%	-2.13%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.59%	21.51%	-2.08%
	MEDICAID	23.59%	21.51%	-2.08%
	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	41.22%	13.75%	-27.47%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	46.73%	45.89%	-0.84%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
		32.21%	29.68%	-2.53%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	42.20%	40.98%	-1.22%
P	DATIO OF OUTDATIENT DAYMENTS TO OUTDATIENT CHARGES	-		
	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES  NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	53.18%	55.16%	1.98%
2	MEDICARE	26.55%	28.02%	1.48%
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	15.40%	24.42%	9.02%
4	MEDICAID	15.40%	24.42%	9.02%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	59.83%	0.00%	-59.83%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	32.51%	40.23%	7.73%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			<del></del>
		22.67%	26.39%	3.73%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	34.81%	37.77%	2.96%

	HARTFORD HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL <u>FY 2015</u>	ACTUAL FY 2016	AMOUNT <u>DIFFERENCE</u>
3/111	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	TONS		
V 1111.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	IONS		
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS			
1	TOTAL ACCRUED PAYMENTS	\$1,037,713,785	\$1,102,566,162	\$64,852,377
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$1,037,713,785	\$1,102,566,162	\$64,852,377
			, ,	, ,
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$57,278,965)	(\$80,874,785)	(\$23,595,820)
4	CALCULATED NET REVENUE	\$999,894,748	\$1,021,691,377	\$21,796,629
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$980,435,000	\$1,021,691,377	\$41,256,377
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$19,459,748	\$0	(\$19,459,748)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMEN	ITS		
2	OHCA DEFINED GROSS REVENUE PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$2,636,703,049 \$309,166	\$2,773,771,605 \$0	\$137,068,556 (\$309,166)
	CALCULATED GROSS REVENUE	\$2,637,012,215	\$2,773,771,605	\$136,759,390
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$2,637,012,215	\$2,773,771,606	\$136,759,391
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$1)	(\$1)
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	S		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$38.352.345	\$24.599.925	(\$13.752.420)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,734,985	\$5,658,146	\$3,923,161
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$40,087,330	\$30,258,071	(\$9,829,259)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$40,087,330	\$30,258,072	(\$9,829,258)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$1)	(\$1)

	HARTFORD 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)
		ACTÚAL
LINE	DESCRIPTION	<u>FY 2016</u>
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$488,608,700
2	MEDICARE	864,495,030
<u>3</u> 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	345,375,302 345,375,302
5	OTHER MEDICAL ASSISTANCE	345,375,302
6	CHAMPUS / TRICARE	13,264,479
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	16,722,127
	TOTAL INPATIENT GUARGES	\$1,223,134,811 \$4,744,742,544
	TOTAL INPATIENT CHARGES	\$1,711,743,511
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$420,118,303
2	MEDICARE	389,796,873
<u>3</u> 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	246,411,380 246,411,380
5	OTHER MEDICAL ASSISTANCE	240,411,380
6	CHAMPUS / TRICARE	5,701,538
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	31,190,567
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$641,909,791
	TOTAL OUTPATIENT CHARGES	\$1,062,028,094
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$908,727,003
2	TOTAL GOVERNMENT ACCRUED CHARGES	1,865,044,602
	TOTAL ACCRUED CHARGES	\$2,773,771,605
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$338,326,734
2	MEDICARE	286,978,433
<u>3</u> 4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)  MEDICAID	74,281,238 74,281,238
5	OTHER MEDICAL ASSISTANCE	74,261,236
6	CHAMPUS / TRICARE	1,824,412
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	7,673,864
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$363,084,083
	TOTAL INPATIENT PAYMENTS	\$701,410,817
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$231,744,192
2	MEDICARE	109,235,514
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	60,175,639
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	60,175,639
6	CHAMPUS / TRICARE	0
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	12,548,459
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$169,411,153
	TOTAL OUTPATIENT PAYMENTS	\$401,155,345
F.	TOTAL ACCRUED PAYMENTS	
<u>г.</u> 1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$570,070,926
	TOTAL GOVERNMENT ACCRUED PAYMENTS	532,495,236
2		

	HARTFORD 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)
٠.,	(-)	ACTUAL
	DESCRIPTION	FY 2016
<u>LINE</u>	DESCRIPTION	<u>F1 2016</u>
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRUED DISCHARGES   NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	44.004
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14,621 17,826
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,567
4	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,567
5	OTHER MEDICAL ASSISTANCE	10,307
6	CHAMPUS / TRICARE	322
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	547
•	TOTAL GOVERNMENT DISCHARGES	28.715
	TOTAL DISCHARGES	43,336
В.	CASE MIX INDEX	
<u>Б.</u> 1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.53467
2	MEDICARE	1.96007
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.38947
4	MEDICAID	1.38947
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	1.47359
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.23513
	TOTAL GOVERNMENT CASE MIX INDEX	1.74464
	TOTAL CASE MIX INDEX	1.67380
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$843,088,674
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$543,858,096
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$299,230,578
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	35.49%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,189,127
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$5,057,350
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
	OUNDITY O LDE	#00 F76 : T0
8	CHARITY CARE	\$20,579,150
9	BAD DEBTS	\$4,020,775
10	TOTAL UNCOMPENSATED CARE	\$24,599,925
11	TOTAL OTHER OPERATING REVENUE	\$105,622,852
12	TOTAL OPERATING EXPENSES	\$1,082,920,481

	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)
<u>INE</u>	DESCRIPTION	ACTÚAL FY 2016
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
Α.	RECONCILIATION OF ORCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$1,102,566,1
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT) OHCA DEFINED NET REVENUE	\$1,102,566,1
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$80,874,7
	CALCULATED NET REVENUE	\$1,021,691,3
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,021,691,3
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$2,773,771,6
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0.770.774.0
	CALCULATED GROSS REVENUE	\$2,773,771,6
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$2,773,771,6
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$24,599,9
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$5,658,1 <b>\$30,258,0</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$30,258,0
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	

# HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016

### **REPORT 650 - HOSPITAL UNCOMPENSATED CARE**

Α.	DESCRIPTION	ACTUAL	ACTUAL		
Α.	DESCRIPTION		ACTUAL	AMOUNT	%
	<u> </u>	FY 2015	FY 2016	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
4	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	12,922	12,976	54	0%
2	Number of Approved Applicants	12,307	12,015	(292)	-2%
3	Total Charges (A)	\$24,219,691	\$20,579,150	(\$3,640,541)	-15%
4	Average Charges	\$1,968	\$1,713	(\$255)	-13%
				, ,	
5	Ratio of Cost to Charges (RCC)	0.389034	0.375596	(0.013438)	-3%
6	Total Cost	\$9,422,283	\$7,729,446	(\$1,692,837)	-18%
7	Average Cost	\$766	\$643	(\$122)	-16%
				, ,	
8	Charity Care - Inpatient Charges	\$8,122,740	\$6,325,391	(\$1,797,349)	-22%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	8,847,107	7,720,107	(1,127,000)	-13%
10	Charity Care - Emergency Department Charges	7,249,844	6,533,652	(716,192)	-10%
11	Total Charges (A)	\$24,219,691	\$20,579,150	(\$3,640,541)	-15%
	•				
12	Charity Care - Number of Patient Days	1,088	792	(296)	-27%
13	Charity Care - Number of Discharges	194	134	(60)	-31%
14	Charity Care - Number of Outpatient ED Visits	3,231	2,612	(619)	-19%
	Charity Care - Number of Outpatient Visits (Excludes ED			· · ·	
15	Visits)	1,988	1,771	(217)	-11%
B.	Hospital Bad Debts (from HRS Report 500)				
1	Bad Debts - Inpatient Services	\$4,501,411	\$1,403,301	(\$3,098,110)	-69%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	5,971,371	1,622,834	(4,348,537)	-73%
3	Bad Debts - Emergency Department	3,659,872	994,640	(2,665,232)	-73%
4	Total Bad Debts (A)	\$14,132,654	\$4,020,775	(\$10,111,879)	-72%
	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$24,219,691	\$20,579,150	(\$3,640,541)	-15%
2	Bad Debts (A)	14,132,654	4,020,775	(10,111,879)	-72%
3	Total Uncompensated Care (A)	\$38,352,345	\$24,599,925	(\$13,752,420)	-36%
4	Uncompensated Care - Inpatient Services	\$12,624,151	\$7,728,692	(\$4,895,459)	-39%
	Uncompensated Care - Outpatient Services (Excludes ED		· · · · · · · · · · · · · · · · · · ·	,	
5	Unc. Care)	14,818,478	9,342,941	(5,475,537)	-37%
6	Uncompensated Care - Emergency Department	10,909,716	7,528,292	(3,381,424)	-31%
7	Total Uncompensated Care (A)	\$38,352,345	\$24,599,925	(\$13,752,420)	-36%

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

		HARTFORD HOSPIT						
		TWELVE MONTHS ACTUA						
		FISCAL YEAR 201						
	REPORT 685 - HOSPITAL NOI			ALLOWANCES,				
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE								
$\dagger$	(2)	(3)	(4)	(5)	(6)			
	·	FY 2015	FY 2016					
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%			
<u> </u>	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	<u>DIFFERENCE</u>			
<u>(</u>	COMMERCIAL - ALL PAYERS							
+	Total Gross Revenue	\$794,912,520	\$843,088,674	\$48,176,154	6			
	Total Contractual Allowances	\$308,263,313	\$299,230,578	(\$9,032,735)	-39			
#	Total Accrued Payments (A)	\$486,649,207	\$543,858,096	\$57,208,889	12			
	Total Discount Percentage	38.78%	35.49%	-3.29%	-8			
+								
\c(	crued Payments associated with Non-Governme	ent Contractual Allowances	must exclude any reduction	n for Uncompensated	d Care.			
Ac(	crued Payments associated with Non-Governme	ent Contractual Allowances i	must exclude any reduction	n for Un	ncompensated			

	HARTFORD HOSPITAL					
	TWELVE MONTHS ACTUAL FILING					
	FISCAL YEAR 2016					
	REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL	REVENUE AND E	XPENSE			
(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	\$1,603,648,875	\$1,622,989,767	\$1,711,743,511		
2	Outpatient Gross Revenue	\$950,436,707	\$1,013,713,282	\$1,062,028,094		
3	Total Gross Patient Revenue	\$2,554,085,582	\$2,636,703,049	\$2,773,771,605		
4	Net Patient Revenue	\$976,155,739	\$980,434,820	\$1,021,691,377		
В.	Total Operating Expenses					
1	Total Operating Expense	\$1,022,794,910	\$1,033,299,408	\$1,082,920,481		
C.	Utilization Statistics					
1	Patient Days	233,240	230,835	233,354		
2	Discharges	42,755	43,350	43,336		
3	Average Length of Stay	5.5	5.3	5.4		
4	Equivalent (Adjusted) Patient Days (EPD)	371,475	375,014	378,135		
0	Equivalent (Adjusted) Discharges (ED)	68,095	70,426	70,223		
D.	Case Mix Statistics					
1	Case Mix Index	1.58430	1.60205	1.67380		
2	Case Mix Adjusted Patient Days (CMAPD)	369,522	369,810	390,587		
3	Case Mix Adjusted Discharges (CMAD)	67,737	69,449	72,536		
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	588,526	600,792	632,922		
5	Case Mix Adjusted Equivalent Discharges (CMAED)	107,882	112,827	117,539		
E.	Gross Revenue Per Statistic					
1	Total Gross Revenue per Patient Day	\$10,950	\$11,422	\$11,887		
2	Total Gross Revenue per Discharge	\$59,738	\$60,824	\$64,006		
3	Total Gross Revenue per EPD	\$6,876	\$7,031	\$7,335		
4	Total Gross Revenue per ED	\$37,508	\$37,439	\$39,499		
5	Total Gross Revenue per CMAEPD	\$4,340	\$4,389	\$4,382		
6	Total Gross Revenue per CMAED	\$23,675	\$23,370	\$23,599		
7	Inpatient Gross Revenue per EPD	\$4,317	\$4,328	\$4,527		
8	Inpatient Gross Revenue per ED	\$23,550	\$23,045	\$24,376		

HARTFORD 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	\$4,185	\$4,247	\$4,37										
2	Net Patient Revenue per Discharge	\$22,831	\$22,617	\$23,570										
3	Net Patient Revenue per EPD	\$2,628	\$2,614	\$2,702										
4	Net Patient Revenue per ED	\$14,335	\$13,921	\$14,54										
5	Net Patient Revenue per CMAEPD	\$1,659	\$1,632	\$1,61										
6	Net Patient Revenue per CMAED	\$9,048	\$8,690	\$8,692										
G.	Operating Expense Per Statistic													
1	Total Operating Expense per Patient Day	\$4,385	\$4,476	\$4,64										
2	Total Operating Expense per Discharge	\$23,922	\$23,836	\$24,98										
3	Total Operating Expense per EPD	\$2,753	\$2,755	\$2,86										
4	Total Operating Expense per ED	\$15,020	\$14,672	\$15,42										
5	Total Operating Expense per CMAEPD	\$1,738	\$1,720	\$1,71										
6	Total Operating Expense per CMAED	\$9,481	\$9,158	\$9,21										
Н.	Nursing Salary and Fringe Benefits Expense													
11	Nursing Salary Expense	\$137,008,756	\$147,234,787	\$151,394,65										
2	Nursing Fringe Benefits Expense	\$43,107,152	\$34,777,599	\$26,806,73										
3	Total Nursing Salary and Fringe Benefits Expense	\$180,115,908	\$182,012,386	\$178,201,39										
l.	Physician Salary and Fringe Expense													
1	Physician Salary Expense	\$43,864,014	\$46,267,606	\$49,724,58										
2	Physician Fringe Benefits Expense	\$13,800,963	\$10,928,642	\$7,998,37										
3	Total Physician Salary and Fringe Benefits Expense	\$57,664,977	\$57,196,248	\$57,722,95										
J.	Non-Nursing, Non-Physician Salary and Fringe Benefits Expense													
1	Non-Nursing, Non-Physician Salary Expense	\$248,015,536	\$230,920,191	\$213,252,26										
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$78,033,285	\$54,544,512	\$38,565,69										
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$326,048,821	\$285,464,703	\$251,817,95										
K.	Total Salary and Fringe Benefits Expense													
1	Total Salary Expense	\$428,888,306	\$424,422,584	\$414,371,50										
2	Total Fringe Benefits Expense	\$134,941,400	\$100,250,753	\$73,370,80										
3	Total Salary and Fringe Benefits Expense	\$563,829,706	\$524,673,337	\$487,742,30										

	HARTFORD HOSPITAL						
	TWELVE MONTHS ACTUAL FIL	ING					
	FISCAL YEAR 2016	DEVENUE AND EX	/DENSE				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE							
(1)	(2)	(3) ACTUAL	(4) ACTUAL	(5) ACTUAL			
LINE	<u>DESCRIPTION</u>	FY 2014	FY 2015	FY 2016			
L.	Total Full Time Equivalent Employees (FTEs)						
1	Total Nursing FTEs	1815.4	2010.1	2037.			
2	Total Physician FTEs	157.2	164.8	173.4			
	·						
3	Total Non-Nursing, Non-Physician FTEs	3834.4	3342.3	3365.2			
4	Total Full Time Equivalent Employees (FTEs)	5,807.0	5,517.2	5,575.7			
М.	Nursing Salaries and Fringe Benefits Expense per FTE						
1	Nursing Salary Expense per FTE	\$75,470	\$73,247	\$74,319			
2	Nursing Fringe Benefits Expense per FTE	\$23,745	\$17,301	\$13,159			
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$99,216	\$90,549	\$87,478			
N.	Physician Salary and Fringe Expense per FTE						
1	Physician Salary Expense per FTE	\$279,033	\$280,750	\$286,762			
2	Physician Fringe Benefits Expense per FTE	\$87,792	\$66,315	\$46,127			
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$366,826	\$347,065	\$332,889			
0.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense p	er FTE					
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$64,682	\$69,090	\$63,370			
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$20,351	\$16,319	\$11,460			
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$85,033	\$85,410	\$74,830			
Р.	Total Salary and Fringe Benefits Expense per FTE						
1	Total Salary Expense per FTE	\$73,857	\$76,927	\$74,317			
2	Total Fringe Benefits Expense per FTE	\$23,238	\$18,171	\$13,159			
3	Total Salary and Fringe Benefits Expense per FTE	\$97,095	\$95,098	\$87,470			
Q.	Total Salary and Fringe Ben. Expense per Statistic						
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,417	\$2,273	\$2,09			
2	Total Salary and Fringe Benefits Expense per Discharge	\$13,187	\$12,103	\$11,25			
3	Total Salary and Fringe Benefits Expense per EPD	\$1,518	\$1,399	\$1,29			
4	Total Salary and Fringe Benefits Expense per ED	\$8,280	\$7,450	\$6,94			
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$958	\$873	\$77			
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,226	\$4,650	\$4,15			