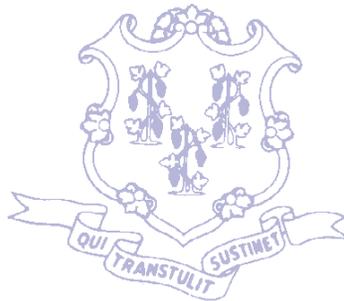


*Annual Report on the*

**FINANCIAL STATUS OF  
CONNECTICUT'S SHORT TERM  
ACUTE CARE HOSPITALS**

*for Fiscal Year 2005*



State of Connecticut  
Office of Health Care Access  
Cristine A. Vogel, Commissioner

*December 2006*



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*Connecticut's hospitals and health systems are a \$9.8 billion industry comprising approximately 5.3% of the Gross State Product.*

## FOREWARD

*The Office of Health Care Access (OHCA) is responsible for the collection, analysis and dissemination of health care information. This report provides information concerning the financial stability of hospitals in a competitive market, as mandated in Section 19a-670 of the Connecticut General Statutes. It focuses on fiscal year (FY) 2005. For Connecticut's acute care hospitals, FY 2005 began on October 1, 2004 and ended September 30, 2005.*

*This report is intended to provide information and insight on issues and trends that affect hospital performance. While there are numerous financial and operating indicators that provide a means to measure hospital performance, this report focuses on six criteria -- profitability, revenue, cost, liquidity, capital structure, and utilization -- that are considered strong indicators of the financial status of Connecticut hospitals.*

*Section one provides a statewide assessment of acute care hospitals' financial condition. Section two provides statewide and individual hospital statistical profiles on key financial and operating measures and includes corporate information, a summary of Certificate of Need (CON) activity and three years of financial operating results. Section three contains detailed appendices by hospital.*

*Connecticut state statutes require acute care hospitals to annually submit financial and statistical information in their annual reporting and twelve month actual filings with OHCA. The primary information source for this report is the hospitals' audited financial statements, which include balance sheet and revenue and expense information. Other sources of information for this report are the annual hospital filings, which include utilization statistics, uncompensated care data, free bed funds and legal charts of corporate structure. In addition, the report uses OHCA's approved Certificate of Need authorizations as a source of information.*

## ASSESSING THE FINANCIAL STABILITY OF CONNECTICUT'S ACUTE CARE HOSPITALS IN FY 2005

Connecticut's hospitals and health systems are a \$9.8 billion industry comprising approximately 5.3% of the Gross State Product.<sup>1</sup> In FY 2005, Connecticut had 31 acute care hospitals, all but one of which are not-for-profit. The state has on record 9,247 licensed beds, with 7,223 staffed and available beds to serve its 3.5 million residents. All but three of the state's hospitals are part of larger health systems. Eighteen are teaching hospitals and two house medical schools. Four have religious affiliations. The hospitals range in size and location from small community hospitals like Essent-Sharon Hospital in the northwest corner of the state with 94 licensed beds to large urban hospitals such as Yale-New Haven Hospital, in downtown New Haven, with 944 licensed beds.

<sup>1</sup>Connecticut hospitals and health systems generate more than \$9.8 billion per year for the state and local economies — about 5.3% of the Gross State Product.

While Connecticut's acute care hospitals vary significantly in size and the populations they serve, they face many of the same operational challenges, both internal and external. Internally, service lines, payer mix, patient case mix and physical plant limitations influence financial performance. Externally, federal and state regulatory changes, reimbursement policies and methodologies, fluctuating investment performance and gifts, high energy costs, the costs of technological and pharmaceutical advances, high labor costs, staffing shortages and the uninsured are persistent issues faced by hospitals and also contribute to hospitals' financial stability.

Faced with these significant and ongoing challenges, Connecticut hospitals showed slightly weakened performance in FY 2005, with:

- more hospitals showing negative operating and total margins than in FY 2004;
- declines in both the statewide median total margin and the statewide median operating margin;
- a slight drop in the statewide number of days cash on hand, falling from 27 days in FY 2004 to 26 days in FY 2005;
- increased uncompensated care costs, up by 3.7% to more than \$170 million; and
- a decline in FY 2005's statewide equity financing ratio, indicating a slight increase in the use of debt financing in asset acquisition.

Despite these challenges, however, the state's hospitals also showed positive results in FY 2005, with:

- total statewide net patient revenue increasing by 7% over the previous year, while statewide total operating expenses increased by 6.5%; and
- an increase for the third straight year in total patient days, up 4.4% and total discharges, up 3.6% from FY 2003.

As previously mentioned, there are numerous financial and operating indicators that provide a means to measure the relative financial condition of a hospital. In attempting to determine the financial stability of Connecticut's hospitals, OHCA examined six categories of hospital performance: *profitability, revenue and expenses, reimbursement, liquidity, capital structure and utilization.*

### *Profitability*

Profitability measures examine the generation of net income and the creation of wealth, functions critical to a hospital's long-term survival. A hospital's profitability is typically measured by its operating margin (surplus/loss derived from operating revenues only) and total margin (the surplus/loss from both operating and non-operating revenues). For both measures, a higher margin suggests greater profitability.

Operating margin is the profit margin remaining after all operating expenses are paid, including patient care and other related functions, such as graduate medical education (Appendix A). A positive operating margin indicates revenues are covering the cost to operate a hospital, while a negative operating margin indicates insufficient revenue relative to cost.

*While Connecticut's acute care hospitals vary significantly in size and the populations they serve, they face many of the same operational challenges, both internal and external.*

*As of FY 2005, six hospitals had negative three-year average total margins:*

- *Bristol Hospital,*
- *Bradley Memorial Hospital and Medical Center,*
- *Rockville General Hospital,*
- *Windham Community Memorial Hospital,*
- *Connecticut Children's Medical Center, and*
- *Waterbury Hospital.*

*Bristol, Bradley and Rockville Hospitals had negative total margins for the past three fiscal years.*

Total margin illustrates the composite financial performance of the organization. (Appendix B). If it is negative, the hospital is losing money after all sources of revenue and income have been taken into account. If a hospital is operating at a deficit, it often must rely on other sources of funds, such as cash reserves or the liquidation of assets, to cover its expenses. Hospitals that are consistently unprofitable will have insufficient funds to meet current requirements, to replace aging plants or to invest in new technologies. Moreover, a hospital with low or negative income may encounter difficulty in borrowing money to finance needed improvements.

### **Hospitals' Three-Year Average Total Margin**

The total margin for a single year may not be entirely reflective of the financial stability of a hospital. Many factors can influence a single-year margin, therefore a three-year average total margin may provide a more accurate picture of the composite financial health of a hospital. As previously mentioned, if a hospital has a negative total margin, it is losing money after all sources of revenue and income have been considered. Over several years, a negative operating margin can be indicative of financial distress.

OHCA examined the three-year average total margin of its 31 acute care hospitals in an effort to better understand the many factors that can influence financial condition. **Table 1** illustrates Connecticut hospital three-year average total margins.

As of FY 2005, six hospitals had negative three-year average total margins. Half of those six had negative margins for each of the three prior fiscal years. In contrast, nearly all hospitals with positive average total margins had consistently sustained positive total margins for each of the three prior fiscal years.

What factors account for the variability among hospitals? In general, it is not one, but a combination of factors, that determine a hospital's financial well-being. A brief examination of issues faced by some individual hospitals is helpful in understanding what circumstances may contribute to a hospital's financial condition.

***Bristol Hospital** showed both negative total and operating margins for FY 2005, as well as a negative three-year average total margin. Unlike many hospitals, Bristol Hospital saw a decrease of 1.2% in revenue from operations in FY 2005, while expenses decreased by far less (one tenth of one percent). The hospital is one of two hospitals with the state's highest negative three-year average total margin, -2.4%. It is one of nine hospitals with occupancy of staffed beds at less than 70% for the past three years. The hospital has seen a decline in the number of discharges over the year and it has a relatively low non-government payment-to-cost ratio. In addition, the hospital saw a sizable increase in total fringe benefit expenses, which grew by 9.5%.*

TABLE 1: TOTAL MARGINS\*, FY 2003-2005

	FY 2003-2005 3 YEAR AVERAGE TOTAL MARGIN	FY 2003 TOTAL MARGIN	FY 2004 TOTAL MARGIN	FY 2005 TOTAL MARGIN
Bristol Hospital	-2.4%	-0.2%	-3.1%	-3.9%
Bradley Memorial Hospital and Medical Center	-2.4%	-5.4%	-2.0%	-0.2%
Rockville General Hospital	-2.2%	-0.1%	-2.1%	-4.3%
Windham Community Memorial Hospital	-1.6%	-5.7%	-0.2%	0.8%
Connecticut Children's Medical Center	-1.5%	-2.9%	2.0%	-3.5%
Waterbury Hospital	-1.1%	-4.7%	1.2%	0.0%
Griffin Hospital	0.0%	-1.8%	1.3%	0.3%
Manchester Memorial Hospital	0.6%	-2.5%	-0.8%	4.6%
Hospital of Saint Raphael	0.6%	1.3%	1.6%	-0.9%
Johnson Memorial Hospital	0.8%	-1.1%	2.0%	1.2%
Milford Hospital	0.9%	0.3%	1.7%	0.7%
Stamford Hospital	1.0%	-5.1%	1.6%	5.1%
Saint Francis Hospital and Medical Center	1.0%	2.3%	0.0%	0.8%
New Milford Hospital	1.1%	0.9%	1.0%	1.2%
Saint Mary's Hospital	1.2%	0.4%	7.3%	-4.3%
Norwalk Hospital	1.3%	1.0%	1.0%	1.8%
Hartford Hospital	1.3%	0.3%	2.0%	1.6%
Bridgeport Hospital	2.0%	0.4%	1.9%	3.4%
John Dempsey Hospital	2.3%	1.9%	2.3%	2.6%
New Britain General Hospital	2.4%	-3.7%	3.6%	6.0%
Charlotte Hungerford Hospital	2.8%	2.9%	3.7%	1.7%
William W. Backus Hospital	3.1%	3.5%	3.7%	2.2%
Day Kimball Hospital	3.5%	3.5%	2.9%	4.1%
MidState Medical Center	4.4%	3.9%	3.5%	5.6%
Greenwich Hospital	4.8%	4.9%	3.8%	5.6%
Lawrence and Memorial Hospital	5.2%	1.6%	10.7%	2.8%
Yale-New Haven Hospital	5.4%	4.8%	4.9%	6.3%
Middlesex Memorial Hospital	5.4%	2.6%	4.5%	8.5%
Essent-Sharon Hospital	5.8%	2.7%	7.1%	7.0%
Danbury Hospital	6.2%	5.7%	5.6%	7.3%
Saint Vincent's Medical Center	6.7%	-0.02%	7.9%	10.9%
Statewide (Note A)	2.6%	1.1%	3.1%	3.3%
Average (Note B)	1.9%	0.4%	2.6%	2.4%
Median (Note C)	1.3%	0.4%	2.1%	1.8%
*Numbers may be rounded.				
Note A: Weighted average by dollar amounts. Revenue in excess of expenses/(revenue from operations+(revenue in excess of expenses-gain (loss) from operations)).				
Note B: Sum of margins divided by number of hospitals.				
Note C: Middle margin in numerical order.				

Although **Bradley Memorial Hospital's** total margin has improved from FY 2003 to FY 2005, it shares the state's highest negative three-year average total margin. Poor Medicare reimbursement continues to be a critical factor affecting the financial status of the hospital, as the largest share of the hospital's patients are Medicare beneficiaries. In addition, the hospital does not have maternity or newborn departments, which are generally profitable, especially when Medicaid utilization is low. As of October 1, 2006, Bradley Memorial Hospital merged with New Britain General Hospital under a single license and now functions as a campus of the newly-named Hospital of Central Connecticut.

**Rockville General Hospital** has experienced three years of decline in total margin, operating margin and revenue from operations. While gross patient service revenue showed a small increase from FY 2003 to FY 2005, largely due to price increases, net patient services revenue has declined by 7.7%. The hospital has experienced declining utilizations with discharges dropping by 14.6% and patient days falling by 11.1%. It appears that some of the declining utilization can be attributed to a shift in patient care to Manchester Memorial Hospital, its affiliated hospital within the Eastern Connecticut Health Network. The hospital has also seen a considerable decline in Medicare reimbursement, dropping from 0.91 in FY 2003 to 0.76 in FY 2005.

**Windham Community Memorial Hospital** has experienced declining net assets, down 58% from FY 2004. At the same time, the hospital has shown improvement in days in accounts payable, days cash on hand and days in accounts receivable, indicating the hospital is taking less time to pay its bills, has improved cash flow and is taking less time collecting from its payers.

The **Connecticut Children's Medical Center's** ongoing losses are the result of poor reimbursement from non-government payers. At 0.90, the non-government payment to cost ratio is the lowest in the state. Additionally, non-government payers are the hospital's largest payer category, comprising 56% of total charges and 58% of total payments. Additionally, the hospital added a significant number of FTEs in FY 2005, adding to expenses.

**Waterbury Hospital's** negative three-year average total margin was largely driven by its FY 03 total margin of -4.7%, attributable to a third party settlement resulting in decreased net revenue. In FY 2005, as the result of an estimated retroactive third party payer adjustment, the hospital saw an approximate \$900,000 increase in net patient revenue. In addition, \$4.6 million in restricted donor assets were released to cover more than \$3 million in psychiatric services expenses. Although the hospital's expenses exceed revenues by \$15.3 million, its subsidiaries saw the reverse, with revenues exceeding expenses by \$20.2 million. Waterbury Hospital also had a staffed bed occupancy rate of less than 70% for the past three years.

In FY 2005, **Saint Vincent's Medical Center** further improved its financial results, ending with a total margin of 10.9% and a three-year average total margin of 6.7%, the highest in the state. In terms of operating results, the hospital's 10% increase in revenue from operations exceeded its 7% increase in expenses. In addition, the hospital's insurance and bad debts decreased by \$2.2 and \$1.4 million, respectively, and employee benefit costs declined as well. In addition, investment income increased by \$2 million.

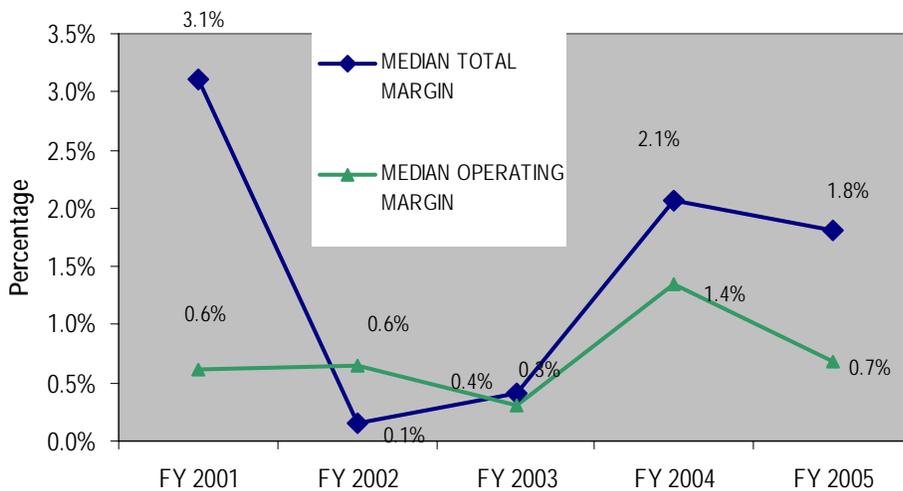
**Danbury Hospital** had the second highest three-year average total margin, due to revenue from operations exceeding expenses. The hospital also saw net patient revenue increase by \$28.1 million and other operating revenue increase by \$.5 million. The hospital benefits from the second highest non-government payment-to-cost ratio in the state, at 1.40, as non-government is the hospital's largest payer category, on a net revenue basis.

**Middlesex Hospital** also posted a strong three-year average total margin, at 5.4%. In FY 2005, net patient revenue increased by 10%, while operating expenses increased by only 7.1%. Bad debt decreased by 21.6% and investment income increased by a substantial 201%, from \$1.9 million in FY 2004 to \$5.8 million in FY 2005. The hospital's Medicare payment-to-cost ratio of .96 was more than offset by its non-government payment-to-cost ratio, at 1.28, which is the hospital's largest payer category, on a net revenue basis.

Connecticut's acute care hospitals experienced a slight decline in their overall financial performance in FY 2005, largely due to decreases in gains from both the delivery of patient care and non-patient care activities. As shown in **Figure 1**, the statewide median total margin decreased from 2.1% in FY 2004 to 1.8% in FY 2005. The statewide median operating margin also fell, dropping from 1.4% to 0.7% over the same time period. The statewide three year average total margin for FYs 2003-2005 was 2.6%. The number of hospitals with negative total

margins increased from five in FY 2004 to seven in FY 2005.

**Figure 1: FY 2005 Statewide Median Total and Operating Margins**



The number of hospitals ending the year with operating losses grew from eight in FY 2004 to 11 in the following year.

Moreover, FY 2005's weakest hospital had a negative operating margin of -9.7%, as compared to FY 2004's poorest performing hospital's negative operating margin of -4.3%. As noted above, a negative operating margin indicates that revenues are not covering costs.

Although the state's overall hospital system is strong,

Connecticut has hospitals that are struggling with ongoing operating losses. These losses directly affect their ability to reinvest in their facilities and expand services. A hospital must earn sufficient income to improve facilities and replace equipment as they become worn out or obsolete, to keep pace with technological changes, and to meet the changing health care needs of the community.

Despite the slight decline in overall financial performance, more than half (55%) of all Connecticut hospitals saw improvements in their total margin in FY 2005 as compared to FY 2004, and 15 of the state's 31 acute care hospitals had total margins exceeding 2%. Also on the positive side, the statewide median total margin was higher than the statewide median operating margin for the third consecutive year.

### *Revenue and Expenses*

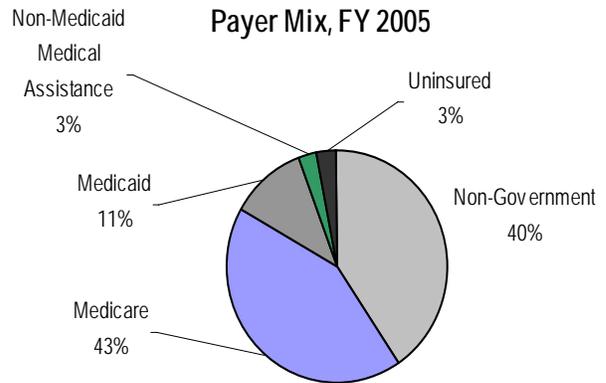
#### **Revenue**

Hospitals acquire revenue through a variety of means: by providing medical services; by providing non-medical services; through donations and grants from individuals, foundations or federal and state governments; and through investments. Gross revenue is the amount of

money hospitals would make if they were paid what they charge instead of at the discounted rate they receive. Total gross revenue in FY 2005 totaled nearly \$13.8 billion, an 11% increase from FY 2004.

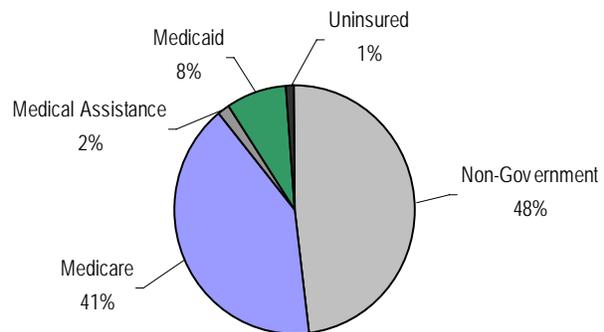
Net revenue is the total amount of money hospitals collect after making certain adjustments to gross revenue. These adjustments include contractual adjustments for discount agreements with payers and deducting free care/charity care. Discount agreements are payment arrangements negotiated between hospitals and private and government payers. These agreements vary among hospitals and payers – different payers pay different amounts for the same services. **Figure 2** shows statewide gross revenue, which is reflective of the actual proportion of the charges associated with the population covered by a particular payer category, while **Figure 3**, statewide net revenue, shows the actual percentage of reimbursement received by payer category. For example, Medicaid recipients comprise 11% of all patient charges, but 8% of all reimbursement. Conversely, non-government accounts for 40% of gross revenue (charges) and 48% of net revenue (reimbursements).

**Figure 2: Statewide Hospital Gross Revenue Payer Mix, FY 2005**



Reviewing hospitals’ payer mix is critical in evaluating hospital financial performance. The major payers for hospital services are broken down into five general payer-mix categories: non-government payers predominantly representing private commercial insurers; Medicare, covering the disabled and those age 65 and older; Medicaid, which covers individuals meeting minimum income requirements; other medical assistance, including non-Medicaid town and city programs; and the uninsured, which includes self-pay patients and individuals with no insurance coverage.

**Figure 3: Statewide Hospital Net Revenue Payer Mix, FY 2005**



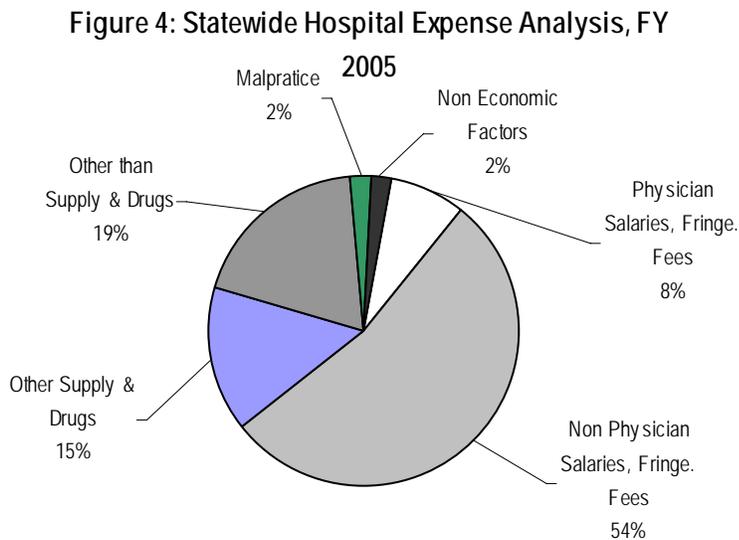
Demographics, hospital geographic location, physician specialty mix and competition are among the factors that influence payer mix.

In FY 2005, total statewide net patient revenue increased by 7% over the previous year to more than \$6 billion. Hospitals received the largest share of their net revenue, 49%, from major government payers, followed by non-government “commercial” payers at 48%. The remaining net revenue came from medical assistance and the uninsured, which includes self-pay patients. Overall, Connecticut’s acute care hospitals’ total payer mix remained relatively unchanged from the prior fiscal year.

## Expenses

To maintain or gain financial strength, hospitals must effectively manage expenses. Medical specialties, technology and pharmaceutical costs, case mix, geography, labor markets and other economic forces all affect expense levels. While many of these forces are beyond the control of a hospital, effective management of those forces within a hospital's control is critical. Statewide, total operating expenses increased by 6.5% to more than \$6 billion from the prior year.

The major categories of expenses include salaries, supplies, depreciation, amortization, interest and bad debts expenses. Often, salaries, wages and benefits paid to hospital employees are the largest category of hospital expenses. **Figure 4** shows that in Connecticut, non-physician salaries, fringes and fees made up the largest portion, 54%, of hospital expenses in FY 2005. Hospitals are competing for limited health care workers and the expenses associated with recruitment are substantial.



## Uncompensated Care

By law, with the exception of non-emergency care such as elective or cosmetic surgery, patients at Connecticut's hospitals must be treated, regardless of their ability to pay. Uncompensated care, the level of charges for which hospitals do not receive reimbursement, consists of two components: free care and bad debts. Free care is that which a hospital provides knowing in advance that it will not be reimbursed; and bad debts are incurred when a hospital learns after providing care that it will not be reimbursed fully for its services. Free care is considered a reduction in revenue, while bad debts are considered an operating expense under Generally Accepted Accounting Principles (GAAP).

The Disproportionate Share Program (DSH) is a joint federal/state program established to financially assist hospitals that provide care to a relatively high number of uninsured and Medicaid patients, as the reimbursement from these populations is often less than the costs incurred in treating these patients. By providing this supplemental reimbursement, the DSH program has enhanced the hospitals' ability to continue to function as a safety net for those patients without other access to health care.

Uncompensated care (UCC) represents the charges for which hospitals do not receive reimbursement. UCC costs increased by 3.7% to more than \$170 million over the year, but because statewide net patient revenue grew at a faster rate (7.1%), uncompensated care comprised a slightly smaller portion of total

patient care in FY 2005 as compared to FY 2004 (2.9% versus 2.8%). Appendix D provides additional detail.

### Reimbursement

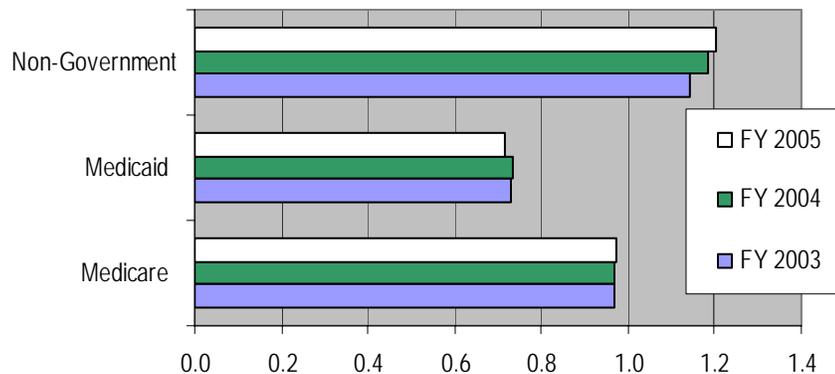
In addition to payer mix, related reimbursement rates have a significant impact on hospitals' financial results. The reimbursement hospitals receive from most insurers and managed care organizations is derived through a contract negotiation process between the hospital and the third-party payer. Such factors as location (e.g., competition or geographic area), profitability of the hospital or the health system to which a hospital belongs, patient volume, expertise of hospital negotiators, sophistication of IT systems' ability to determine the cost of providing care to a given populations, etc, all affect negotiated rates.

The following example illustrates the differences between charges, payments and costs. A hospital may charge \$9,000 for a specific medical procedure. The discount agreement negotiated between one payer and the hospital for that procedure may be \$8,000, while another payer may have a negotiated rate of \$7,600 for the same procedure. In turn, the actual cost to the hospital of providing that procedure may be only \$6,500.

Reviewing a hospital's payment-to-cost ratio is a common method used to evaluate hospital performance, as it illustrates the amount of revenue a hospital receives relative to its costs. A ratio of more than 1.0 means the hospital is receiving more than it costs to provide the services, while a ratio of less than 1.0 means the hospital is not recovering all of its costs.

**Figure 5** shows that in FY 2005, the statewide non-government (private) payment-to-cost ratio increased to 1.20 from 1.18 in FY 2004, while the Medicare and Medicaid payment to cost ratios remained mostly unchanged. Historically, hospitals have used cost shifting strategies to compensate for these differences. Private payment-to-cost ratios, which vary significantly among hospitals, are a good indicator of financial stability when considered together with an individual hospital's payer mix. A high private payment-to-cost ratio is not that helpful if the overall proportion of private payers at a hospital is small.

Figure 5: Statewide Average Payment-to-Cost Ratios

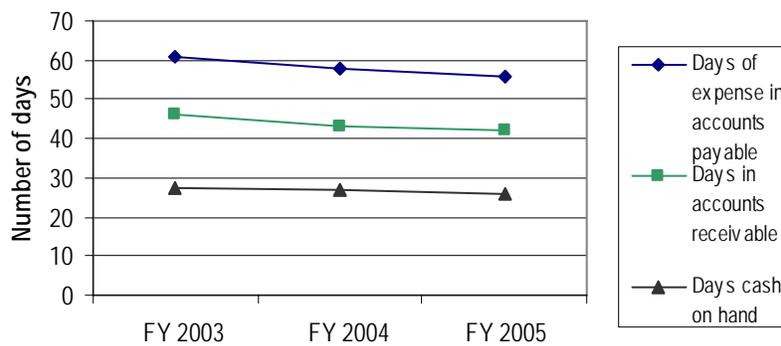


The ratio of cost-to-charges, which is detailed by hospital in Appendix E, declined slightly, indicating a growing difference between the cost of providing care and the charges billed by hospitals.

### Liquidity

Days in accounts payable, days cash on hand and days in accounts receivable are all measures of liquidity; they indicate a hospital's ability

Figure 6: Statewide Liquidity Measures, FY 2003-2005



to meet its short-term obligations and the timing of the flow of cash into the organization. Deterioration in liquidity usually indicates cash flow problems and may signal potential insolvency. The number of days in accounts payable decreased for the third straight year, indicating some overall improvement in hospitals' ability in meeting current liabilities.

**Figure 6** shows that the number of days cash on hand declined slightly, dropping from 27 days in FY 2004 to 26 days in FY 2005. A higher value is favorable as it indicates a greater ability to meet

financial obligations. Days in accounts receivable dropped for the sixth straight year. Since patient care is the primary source of operating revenue, prompt collection is critical, therefore lower values are favorable.

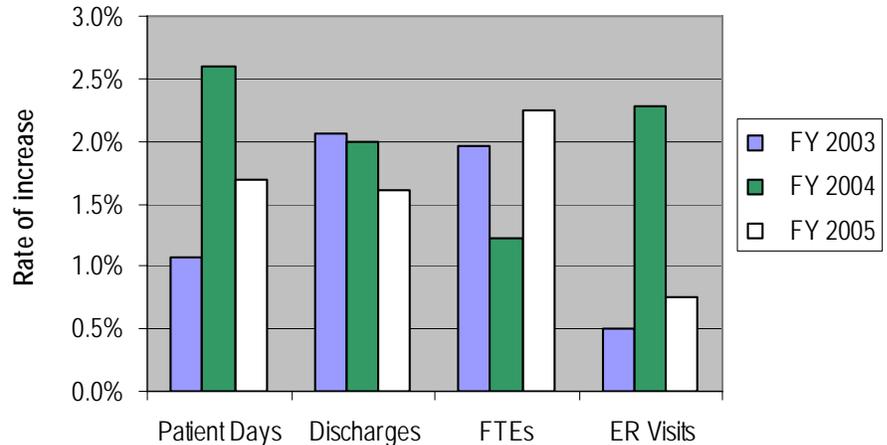
### Solvency

The capital structure of a hospital can be, in part, measured by the equity financing ratio, which shows the ability of a hospital to pay back its long-term debt or mortgages. This solvency measure is the amount of equity relative to total assets, or the proportion of internal financing that a hospital uses to maintain its working capital and buildings, equipment, and other assets. A higher ratio is more favorable as it indicates less financial risk and better access to credit, and implies a hospital has used little debt financing in its asset acquisition program. Connecticut's FY 2005 statewide equity financing ratio fell one percentage point from 44% in FY 2004 to 43% in FY 2005. This drop indicates a slight increase in the use of debt financing in asset acquisition.

## Utilization

Utilization and volume measures such as patient days, discharges, average length of stay, licensed bed and staffed bed occupancy rates provide additional information on a hospital's economic condition. (Appendix H) **Figure 7** shows that total patient days and total discharges both increased from FY 2004, albeit at a slower rate, up 1.9% and 1.6%, respectively. Full time equivalents (FTEs) increased by 2.2% over the prior year, while ER visits slowed from the previous year, up by 0.75%, as compared to a 2.3% increase the previous year. Average length of stay remained unchanged, at 4.9 days.

Figure 7: Utilization Measures, FY 2003-2005



## SUMMARY

In today's ever-changing health care market, it is challenging to fully assess the current status of a hospital or health system or to project how it will do in the future. There is no single financial measure that, by itself, indicates the financial health of or the financial difficulty faced by a facility, nor is there a prescribed combination and level of financial indicators needed to keep a hospital viable. The appropriate level is different for each individual hospital and depends on numerous factors, including but not limited to: the condition of the physical plant and equipment, amount of debt, assets available for capital improvements, patient case mix, payer mix, and the current and future needs of the hospital's market.

This report is intended to provide information which may be useful in understanding the financial status of Connecticut's hospitals. OHCA will continue to monitor on a regular basis the financial data provided by hospitals and report on key indicators of hospitals' fiscal condition.

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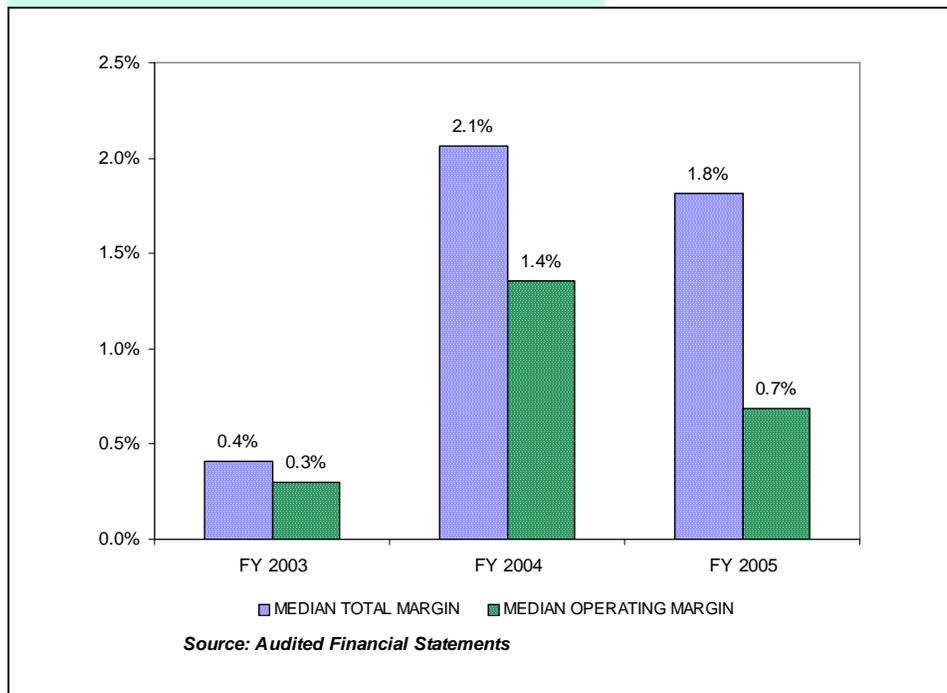
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## STATEWIDE HOSPITAL PROFILE

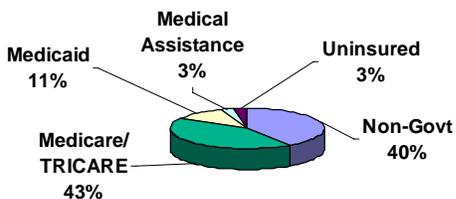
This section of the report consists of two page profiles for each Connecticut acute care hospital's financial results. The first page of each hospital profile lists the towns which the hospital primarily serves, the hospital's corporate chart, and three years of hospital total and operating margins. The second page of each profile provides a chart on the hospital's payer mix, a chart on payment to cost data, and a summary of select net asset amounts, revenue and expense summary amounts, payment to cost data amounts, financial measures, and utilization measures. The statewide profile is provided below and on the following page.

### STATEWIDE HOSPITAL MARGINS (MEDIAN)

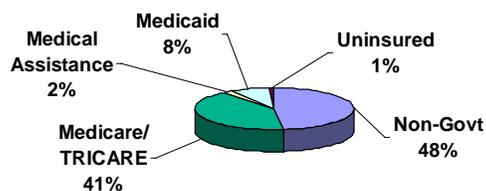


**KEY RESULTS - STATEWIDE HOSPITAL PROFILE**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospitals	\$3,811,170,970	\$4,148,163,793	\$4,396,601,886
Health System	\$4,531,685,226	\$4,993,002,971	\$5,450,792,292

**REVENUE & EXPENSE SUMMARY**

Net patient revenue	\$5,220,891,188	\$5,670,087,545	\$6,073,889,269
Total expenses	\$5,308,480,106	\$5,682,065,439	\$6,050,275,224
Uncompensated Care Cost	\$148,827,480	\$164,312,115	\$170,349,193
Uncompensated care % of total expense	2.8%	2.9%	2.8%
Average Managed Care Discounts	43%	44%	44%

**COST DATA**

Ratio of cost to charges	0.49	0.46	0.44
Medicare Payment to Cost	0.97	0.97	0.97
Medicaid Payment to Cost	0.73	0.73	0.72
Private Payment to Cost	1.14	1.18	1.20

**FINANCIAL MEASURES**

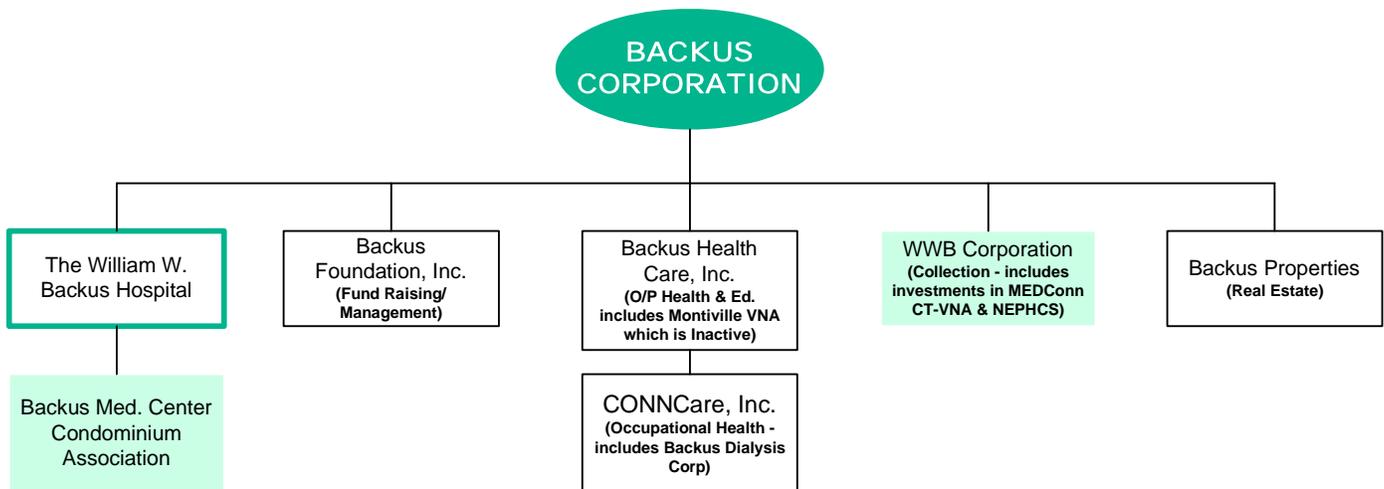
Days of expenses in accounts payable	61	58	56
Days cash on hand	27	27	26
Days of revenue in accounts receivable	46	43	42
Equity financing ratio	41%	44%	43%

**UTILIZATION MEASURES**

Patient Days	1,987,511	2,039,295	2,073,875
Discharges	408,083	416,240	422,917
ALOS	4.9	4.9	4.9
Staffed Beds	7,152	7,182	7,223
Licensed Beds	9,140	9,241	9,247
Occupancy of staffed beds	76%	78%	79%
Occupancy of licensed beds	60%	61%	62%
FTE's	45,198	45,754	46,779

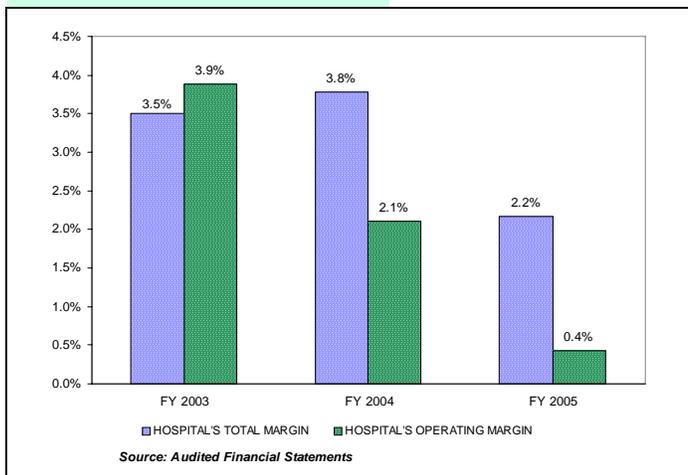
## WILLIAM W. BACKUS HOSPITAL

The William W. Backus Hospital, founded in 1893, is located in Norwich and primarily serves the residents of Bozrah, Canterbury, Colchester, Franklin, Griswold, Lisbon, Montville, Norwich, Plainfield, Preston, Salem, Sprague, Sterling and Voluntown. The William W. Backus Hospital's parent corporation is Backus Corporation. Reported below is a chart indicating all of the affiliates of Backus Corporation, three years of total margins and operating margins and FY 2005 CON activity for the William W. Backus Hospital.



For Profit Entity

### HOSPITAL MARGINS

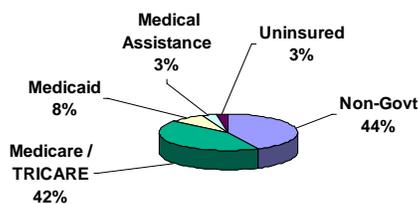


### CON ACTIVITY

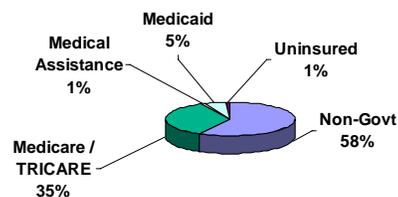
- Establish hyperbaric oxygen therapy service for \$342,853.
- Replacement of radiotherapy simulator for \$854,000.
- Relocate outpatient rehabilitation services for \$475,000.
- Change in provision of prenatal services at no cost.
- Acquisition of a second linear accelerator with IMRT at \$4,482,495.
- Facility enhancement project for \$42,075,688.

## KEY RESULTS - WILLIAM W. BACKUS HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$121,572,964	\$130,354,858	\$129,436,267
Health System	\$123,584,349	\$134,778,983	\$133,242,735

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$156,488,997	\$172,737,042	\$176,639,749
Total expenses	\$152,559,786	\$170,862,097	\$178,963,810
Uncompensated Care Cost	\$4,480,648	\$5,945,707	\$5,336,193
Uncompensated care % of total expenses	2.9%	3.5%	3.0%
Average Managed Care Discounts	28%	23%	25%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.54	0.54	0.53
Medicare Payment to Cost	0.89	0.85	0.82
Medicaid Payment to Cost	0.51	0.57	0.60
Private Payment to Cost	1.32	1.32	1.33

### FINANCIAL MEASURES

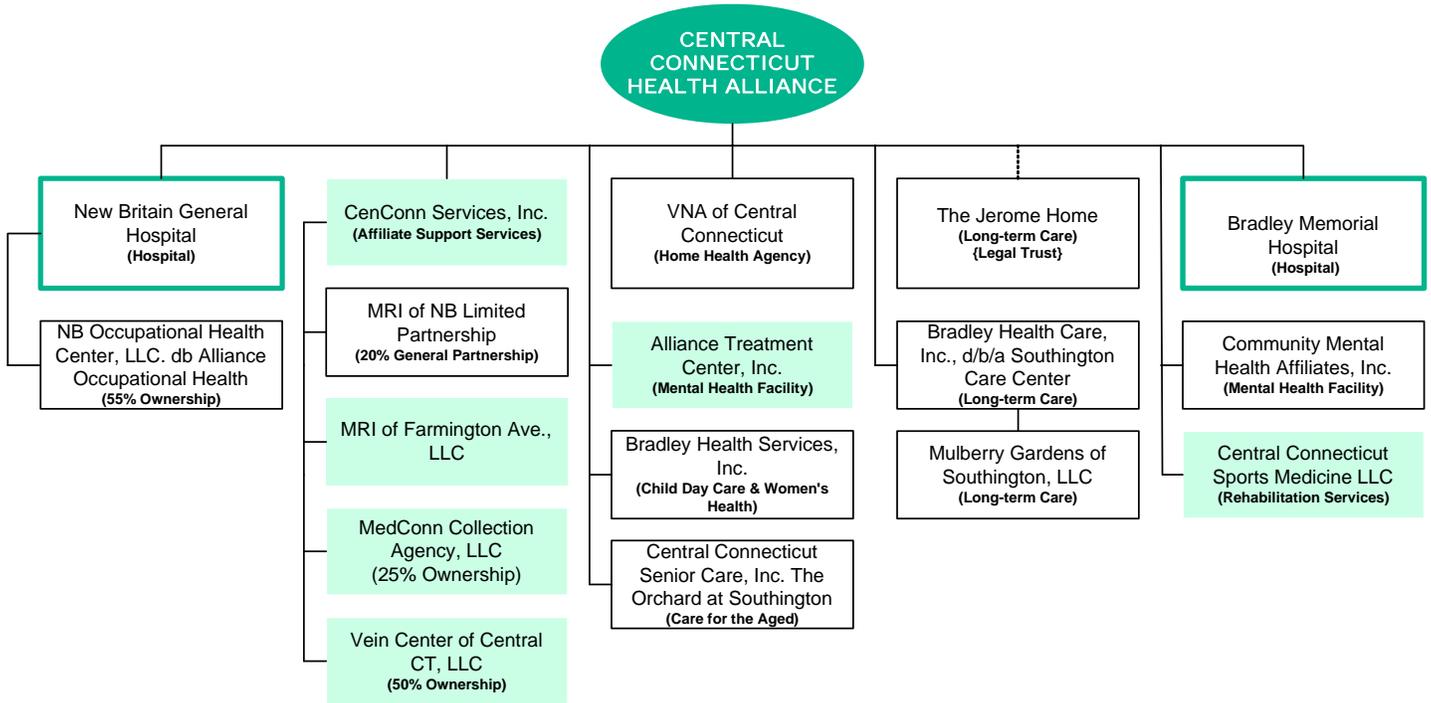
	2003	2004	2005
Days of expenses in accounts payable	37	28	35
Days cash on hand	40	39	50
Days of revenue in accounts receivable	55	53	54
Equity financing ratio	57%	61%	47%

### UTILIZATION MEASURES

	2003	2004	2005
Patient Days	50,068	52,245	52,666
Discharges	11,563	11,935	11,917
ALOS	4.3	4.4	4.4
Staffed Beds	181	197	188
Licensed Beds	233	233	233
Occupancy of staffed beds	76%	73%	77%
Occupancy of licensed beds	59%	61%	62%
FTE's	1,304	1,332	1,372

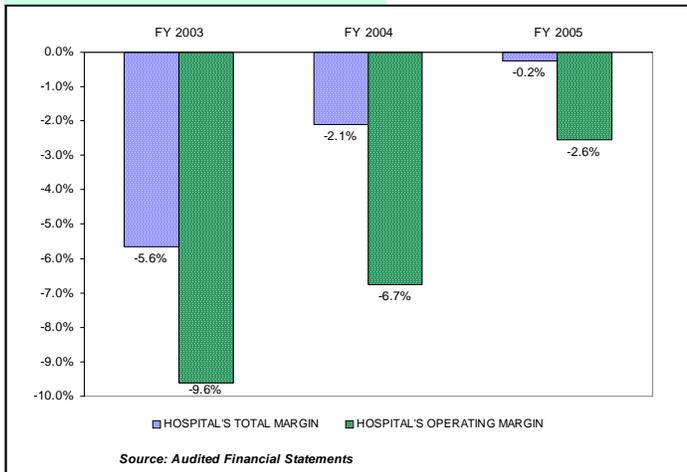
## BRADLEY MEMORIAL HOSPITAL

Bradley Memorial Hospital, founded in 1938, is located in Southington and primarily serves the residents of Southington. Bradley Memorial Hospital's parent corporation is Central Connecticut Health Alliance which also includes New Britain General Hospital. Reported below is a chart indicating all of the affiliates of Central Connecticut Health Alliance, three years of total margins and operating margins and FY 2005 CON activity for Bradley Memorial Hospital.



For Profit Entity

### HOSPITAL MARGINS

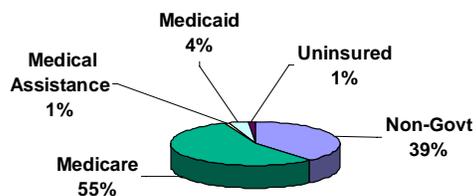


### CON ACTIVITY

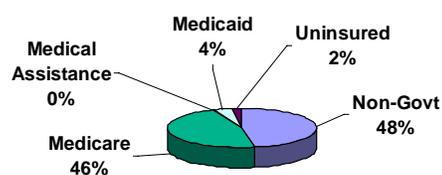
- Consolidate with New Britain General Hospital under a single license at no cost.
- Construction of a medical office building for \$2,359,023.
- Replacement of a nuclear camera for \$398,330.

## KEY RESULTS - BRADLEY MEMORIAL HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$37,017,682	\$40,213,228	\$42,208,077
Health System	\$40,247,698	\$43,528,725	\$42,208,077

### REVENUE & EXPENSE SUMMARY

Net Patient Revenue	\$30,790,569	\$32,325,556	\$35,580,950
Total expenses	\$33,836,290	\$34,748,235	\$36,516,922
Uncompensated Care Cost	\$220,778	\$782,995	\$392,123
Uncompensated care % of total expenses	0.7%	2.3%	1.1%
Average Managed Care Discounts	33%	46%	48%

### COST DATA

Ratio of cost to charges	0.65	0.46	0.43
Medicare Payment to Cost	0.84	0.81	0.82
Medicaid Payment to Cost	0.76	0.98	1.04
Private Payment to Cost	1.03	1.13	1.18

### FINANCIAL MEASURES

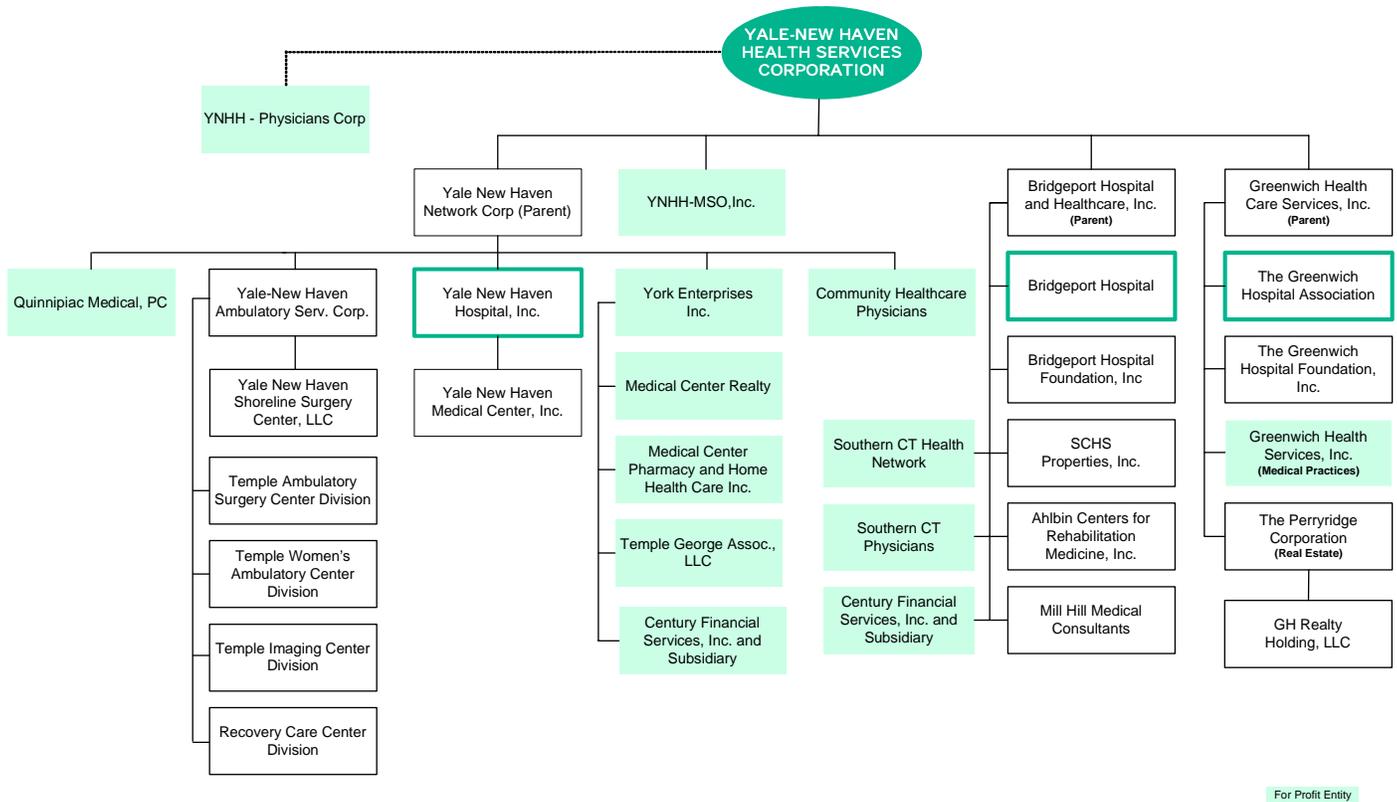
Days of expenses in accounts payable	47	63	76
Days cash on hand	5	4	1
Days of revenue in accounts receivable	35	31	40
Equity financing ratio	33%	36%	34%

### UTILIZATION MEASURES

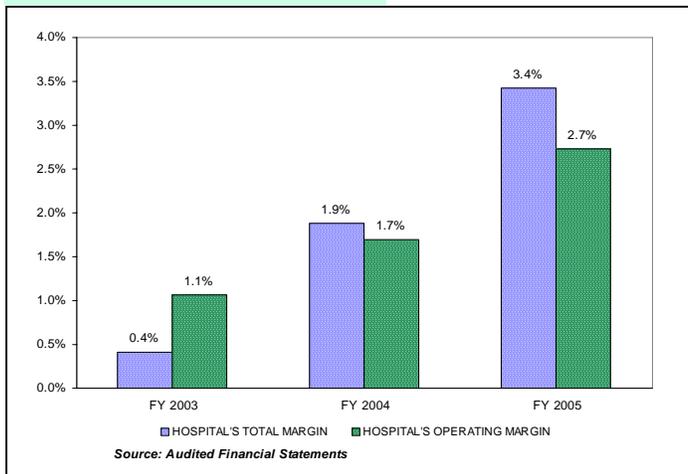
Patient Days	11,746	10,591	10,170
Discharges	2,543	2,329	2,338
ALOS	4.6	4.5	4.3
Staffed Beds	72	46	46
Licensed Beds	84	84	84
Occupancy of staffed beds	45%	63%	68%
Occupancy of licensed beds	38%	35%	37%
FTE's	325	307	313

## BRIDGEPORT HOSPITAL

Bridgeport Hospital, founded in 1878, is located in Bridgeport and primarily serves the residents of Bridgeport, Easton, Fairfield, Monroe, Stratford, and Trumbull. Bridgeport Hospital's parent corporation is Bridgeport Hospital and Health Care, Incorporated, an affiliate of the larger Yale-New Haven Health Services Corporation which includes Greenwich Hospital and Yale New Haven Hospital. Reported below is a chart indicating all of the affiliates of Yale New Haven Health Services Corporation, three years of total margins and operating margins and FY 2005 CON activity for Bridgeport Hospital.



## HOSPITAL MARGINS

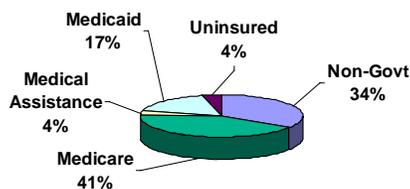


## CON ACTIVITY

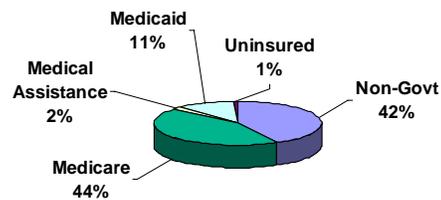
- Purchase of replacement surgical instrumentation sets at \$931,000.
- Acquisition of replacement equipment for central sterile supply for \$344,380.
- Replacement of bedside monitors for \$1,496,787.
- Acquire use of a second PET scanner and upgraded both to PET/CT - date extension.
- Replace the clinical documentation system for \$4,365,000 - date extension.
- Renovate and expansion of the emergency Department for \$16,000,000.

## KEY RESULTS - BRIDGEPORT HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$92,116,000	\$99,849,000	\$107,391,000
Health System	\$91,890,000	\$99,752,000	\$107,642,000

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$235,882,920	\$255,401,340	\$269,639,570
Total expenses	\$240,858,320	\$256,962,204	\$266,851,869
Uncompensated Care Cost	\$7,137,879	\$8,460,222	\$9,978,831
Uncompensated care % of total expenses	3.0%	3.3%	3.7%
Average Managed Care Discounts	55%	55%	56%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.41	0.39	0.36
Medicare Payment to Cost	1.07	1.10	1.10
Medicaid Payment to Cost	0.68	0.64	0.66
Private Payment to Cost	1.16	1.18	1.25

### FINANCIAL MEASURES

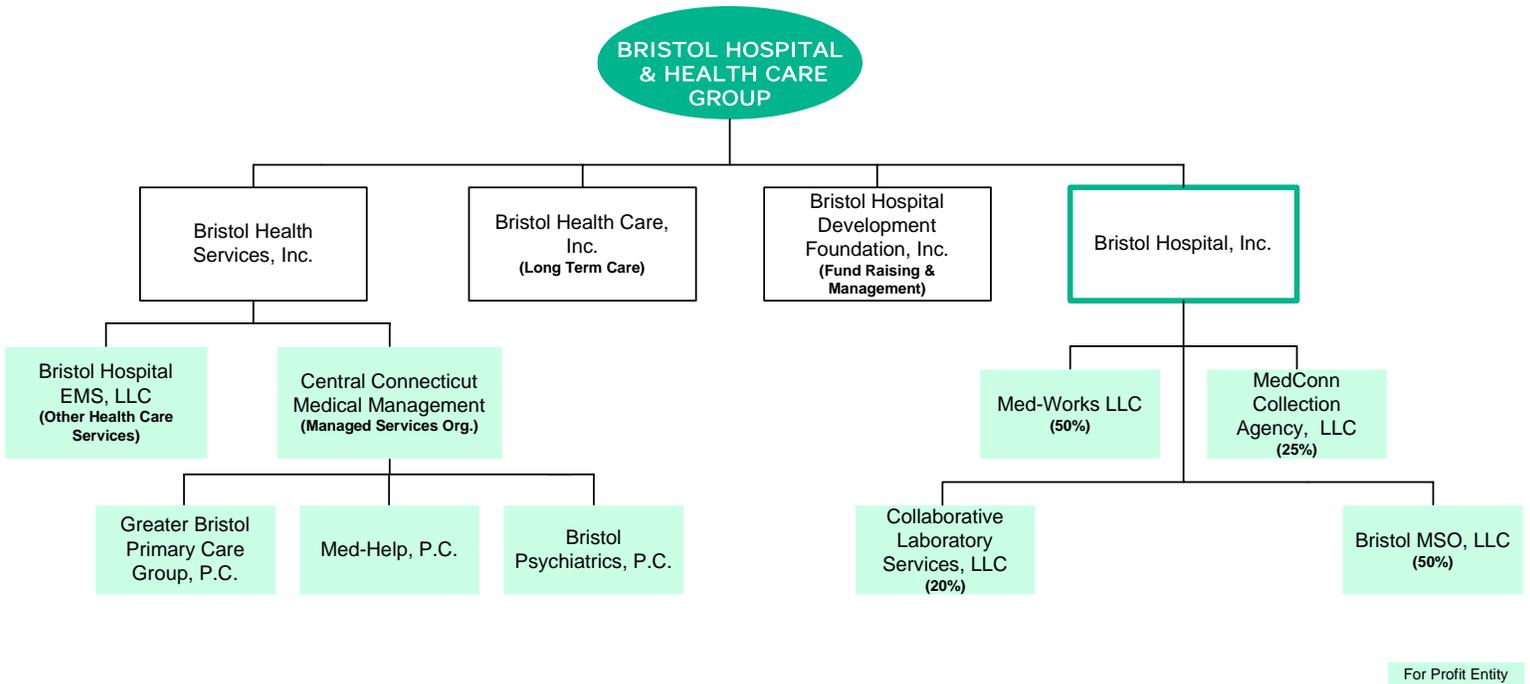
	2003	2004	2005
Days of expenses in accounts payable	60	57	60
Days cash on hand	38	41	49
Days of revenue in accounts receivable	42	38	33
Equity financing ratio	26%	29%	29%

### UTILIZATION MEASURES

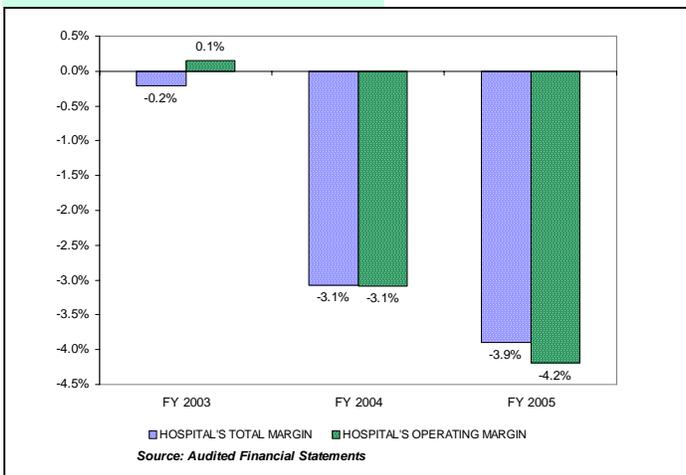
	2003	2004	2005
Patient Days	104,541	107,653	107,086
Discharges	20,014	20,091	20,109
ALOS	5.2	5.4	5.3
Staffed Beds	335	334	335
Licensed Beds	425	425	425
Occupancy of staffed beds	85%	88%	87%
Occupancy of licensed beds	67%	69%	69%
FTE's	1,850	1,864	1,864

## BRISTOL HOSPITAL

Bristol Hospital, founded in 1921, is located in Bristol and primarily serves the residents of Bristol and Plymouth. Bristol Hospital's parent corporation is Bristol Hospital and Health Care Group. Reported below is a chart indicating all of the affiliates of Bristol Hospital and Health Care Group, three years of total margins and operating margins and FY 2005 CON activity for Bristol Hospital.



### HOSPITAL MARGINS

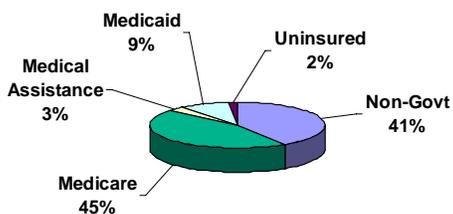


### CON ACTIVITY

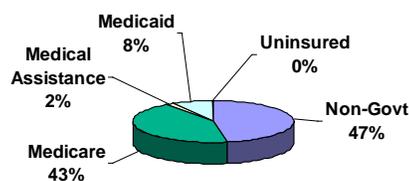
- No activity to report.

## KEY RESULTS - BRISTOL HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$45,189,959	\$42,201,103	\$37,038,793
Health System	\$46,543,813	\$43,348,434	\$39,312,034

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$91,218,193	\$94,464,256	\$96,034,271
Total expenses	\$91,598,228	\$98,067,128	\$100,399,080
Uncompensated Care Cost	\$2,916,393	\$3,246,559	\$3,067,807
Uncompensated care % of total expenses	3.2%	3.3%	3.1%
Average Managed Care Discounts	47%	48%	55%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.47	0.46	0.40
Medicare Payment to Cost	0.95	0.92	0.91
Medicaid Payment to Cost	0.86	0.82	0.82
Private Payment to Cost	1.13	1.11	1.11

### FINANCIAL MEASURES

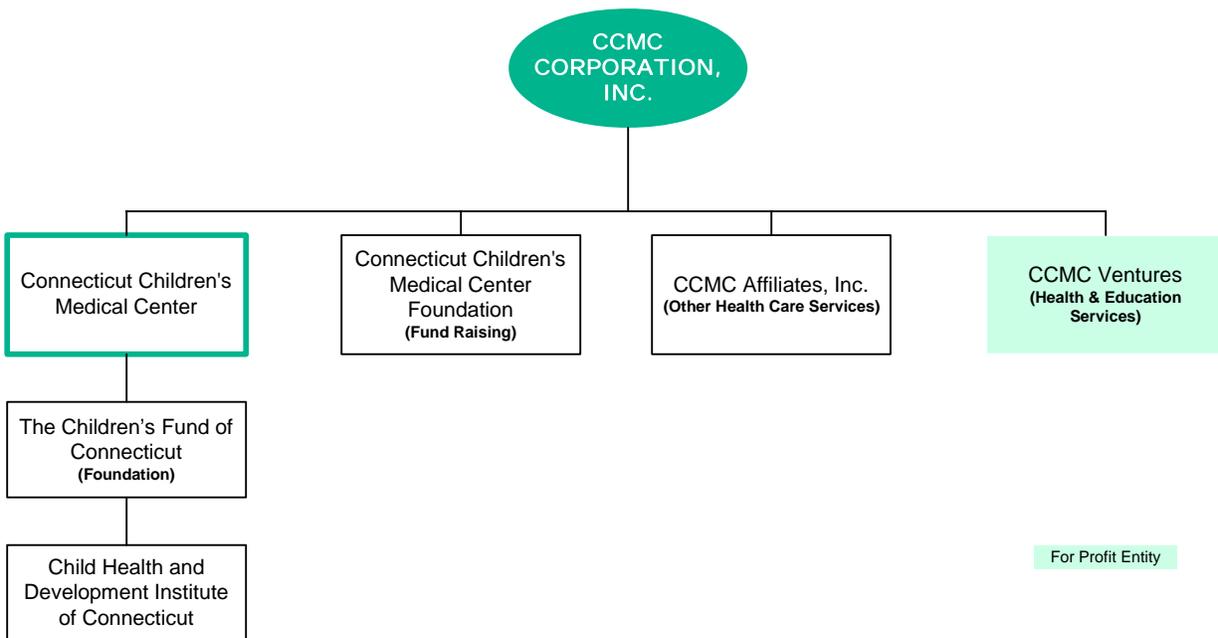
	2003	2004	2005
Days of expenses in accounts payable	56	55	50
Days cash on hand	52	29	9
Days of revenue in accounts receivable	43	47	53
Equity financing ratio	39%	37%	31%

### UTILIZATION MEASURES

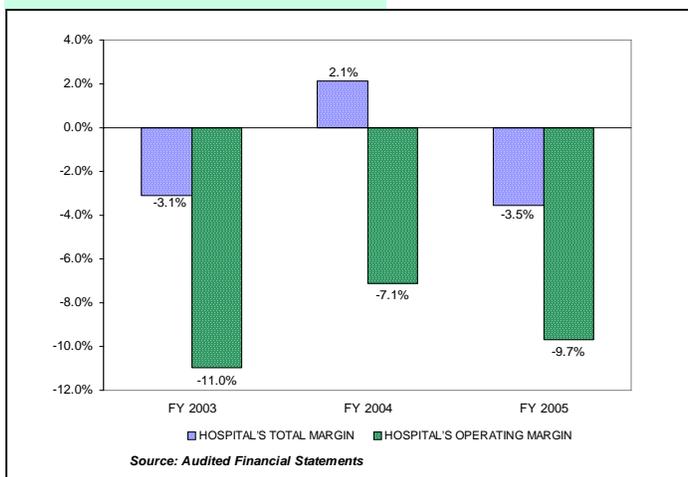
	2003	2004	2005
Patient Days	34,823	36,826	36,810
Discharges	8,187	8,375	8,054
ALOS	4.3	4.4	4.6
Staffed Beds	154	154	154
Licensed Beds	154	154	154
Occupancy of staffed beds	62%	65%	65%
Occupancy of licensed beds	62%	65%	65%
FTE's	904	921	915

## CONNECTICUT CHILDREN'S MEDICAL CENTER

Connecticut Children's Medical Center (CCMC) began operating in 1996 as the successor to Newington Children's Hospital. CCMC is a statewide referral site for pediatric care located in Hartford and primarily serves the residents of Avon, Bloomfield, Bristol, East Hartford, Enfield, Glastonbury, Hartford, Manchester, Meriden, Middletown, New Britain, Newington, Simsbury, Southington, Vernon, Waterbury, West Hartford, Wethersfield, Windham and Windsor. CCMC's parent corporation is the CCMC Corporation. Reported below is a chart indicating all of the affiliates of CCMC Corporation, three years of total margins and operating margins and FY 2005 CON activity for CCMC.



### HOSPITAL MARGINS

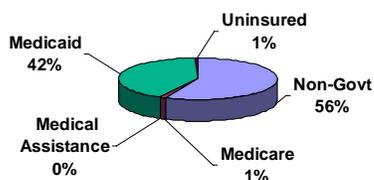


### CON ACTIVITY

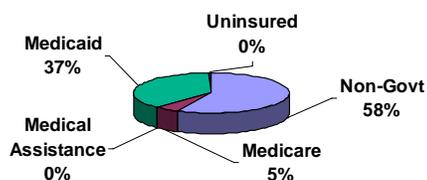
- Establish pediatric sleep lab for \$50,000.
- Expansion of Pediatric ICU and relocation of pharmacy - date extension.
- Engagement of Sterling Healthcare Initiatives, LLC to assist in the Emergency Department at no cost.
- Expansion of Neonatal Intensive Care Unit for \$3,102,150.

## KEY RESULTS - CONNECTICUT CHILDREN'S MEDICAL CENTER

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



NET ASSETS	2003	2004	2005
Hospital	\$184,218,309	\$204,581,050	\$204,545,026
Health System	\$194,025,215	\$207,972,821	\$207,251,750

### REVENUE & EXPENSE SUMMARY

Net patient revenue	\$90,619,799	\$97,996,803	\$99,493,708
Total expenses	\$103,673,770	\$107,655,334	\$113,132,148
Uncompensated Care Cost	\$2,341,918	\$1,325,745	\$1,502,788
Uncompensated care % of total expenses	2.3%	1.2%	1.3%
Average Managed Care Discounts	48%	47%	45%

### COST DATA

Ratio of cost to charges	0.64	0.61	0.61
Medicare Payment to Cost*	56.50	28.02	6.24
Medicaid Payment to Cost	0.94	0.87	0.80
Private Payment to Cost	0.80	0.90	0.90

### FINANCIAL MEASURES

Days of expenses in accounts payable	75	69	74
Days cash on hand	10	9	10
Days of revenue in accounts receivable	38	36	31
Equity financing ratio	42%	45%	42%

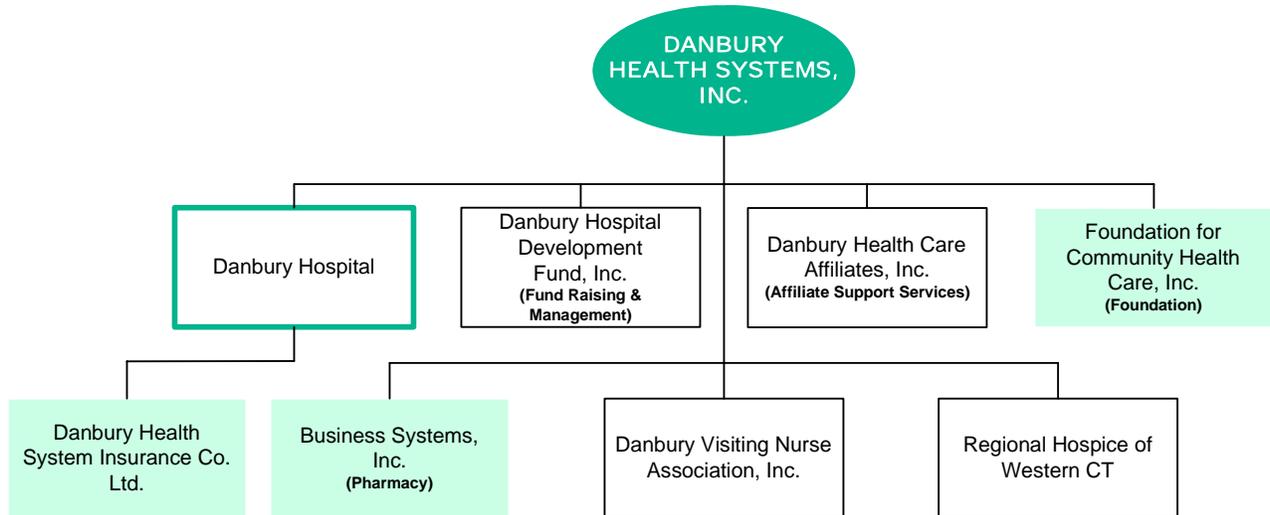
### UTILIZATION MEASURES

Patient Days	31,821	30,857	29,923
Discharges	5,223	5,521	5,535
ALOS	6.1	5.6	5.4
Staffed Beds	114	114	115
Licensed Beds	123	123	129
Occupancy of staffed beds	76%	74%	71%
Occupancy of licensed beds	71%	68%	63%
FTE's	833	847	896

(\*Calculation includes Graduate Medical Education Payments)

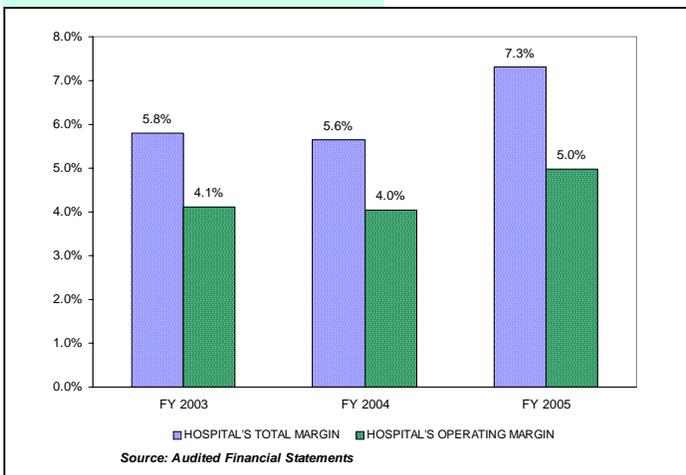
## DANBURY HOSPITAL

The Danbury Hospital, founded in 1885, is located in Danbury and primarily serves the residents of Bethel, Bridgewater, Brookfield, Danbury, New Fairfield, New Milford, Newtown, Redding, Ridgefield, Sherman, and Southbury. Danbury Hospital's parent corporation is Danbury Health Systems, Incorporated. Reported below is a chart indicating all of the affiliates of Danbury Health Systems Incorporated, three years of total margins and operating margins and FY 2005 CON activity for Danbury Hospital.



For Profit Entity

### HOSPITAL MARGINS

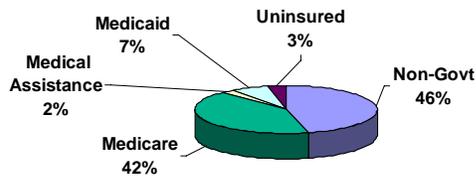


### CON ACTIVITY

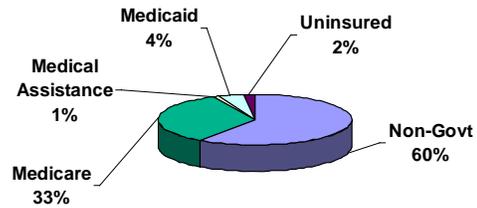
- Repair flood damage to Interventional Radiology Rooms for \$869,238.
- Establish Wound Care Center for \$784,330.
- Acquire use of a second PET scanner and upgraded both to PET/CT - date extension.

## KEY RESULTS - DANBURY HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$226,683,985	\$250,866,741	\$284,456,481
Health System	\$171,646,582	\$215,986,721	\$224,089,757

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$278,531,574	\$306,005,239	\$333,815,960
Total expenses	\$266,073,794	\$288,820,415	\$309,788,202
Uncompensated Care Cost	\$7,377,156	\$8,646,656	\$9,041,180
Uncompensated care % of total expenses	2.8%	3.0%	2.9%
Average Managed Care Discounts	32%	31%	32%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.52	0.50	0.46
Medicare Payment to Cost	0.88	0.85	0.86
Medicaid Payment to Cost	0.67	0.77	0.66
Private Payment to Cost	1.28	1.33	1.40

### FINANCIAL MEASURES

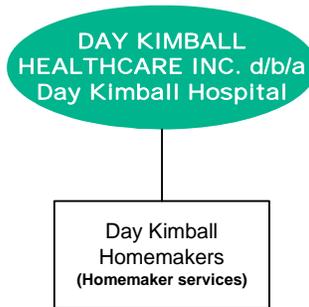
	2003	2004	2005
Days of expenses in accounts payable	46	41	43
Days cash on hand	63	65	73
Days of revenue in accounts receivable	44	41	40
Equity financing ratio	57%	59%	61%

### UTILIZATION MEASURES

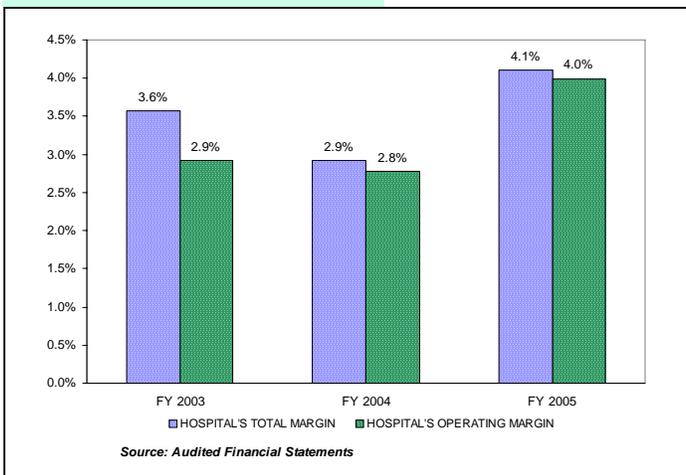
	2003	2004	2005
Patient Days	78,184	78,921	84,464
Discharges	19,008	19,548	19,907
ALOS	4.1	4.0	4.2
Staffed Beds	226	237	245
Licensed Beds	371	371	371
Occupancy of staffed beds	95%	91%	94%
Occupancy of licensed beds	58%	58%	62%
FTE's	2,103	2,176	2,276

## DAY KIMBALL HOSPITAL

Day Kimball Hospital, founded in 1894, is located in Putnam and primarily serves the residents of Brooklyn, Eastford, Killingly, Plainfield, Pomfret, Putnam, Sterling, Thompson, and Woodstock. Day Kimball Hospital's parent corporation is Day Kimball Health Care Inc. Reported below is a chart indicating all of the affiliates of Day Kimball Health Care Inc., three years of total margins and operating margins and FY 2005 CON activity for Day Kimball Hospital.



### HOSPITAL MARGINS

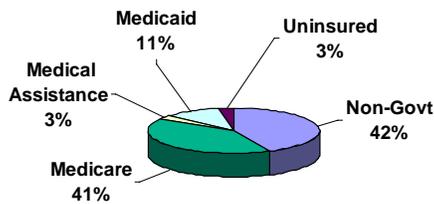


### CON ACTIVITY

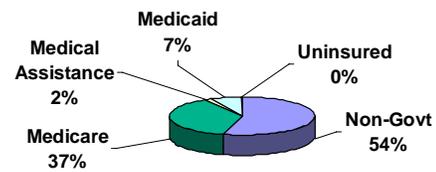
- Replacement of CT scanner for \$862,861.

**KEY RESULTS - DAY KIMBALL HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$41,510,746	\$46,172,036	\$40,759,684
Health System	\$42,234,244	\$46,559,766	\$41,173,770

**REVENUE & EXPENSE SUMMARY**

	2003	2004	2005
Net patient revenue	\$74,844,295	\$77,633,154	\$83,127,707
Total expenses	\$74,717,274	\$77,747,689	\$82,349,664
Uncompensated Care Cost	\$2,050,859	\$1,781,698	\$2,470,049
Uncompensated care % of total expenses	2.7%	2.3%	3.0%
Average Managed Care Discounts	24%	27%	27%

**COST DATA**

	2003	2004	2005
Ratio of cost to charges	0.59	0.57	0.56
Medicare Payment to Cost	0.93	0.94	0.93
Medicaid Payment to Cost	0.66	0.63	0.62
Private Payment to Cost	1.24	1.25	1.29

**FINANCIAL MEASURES**

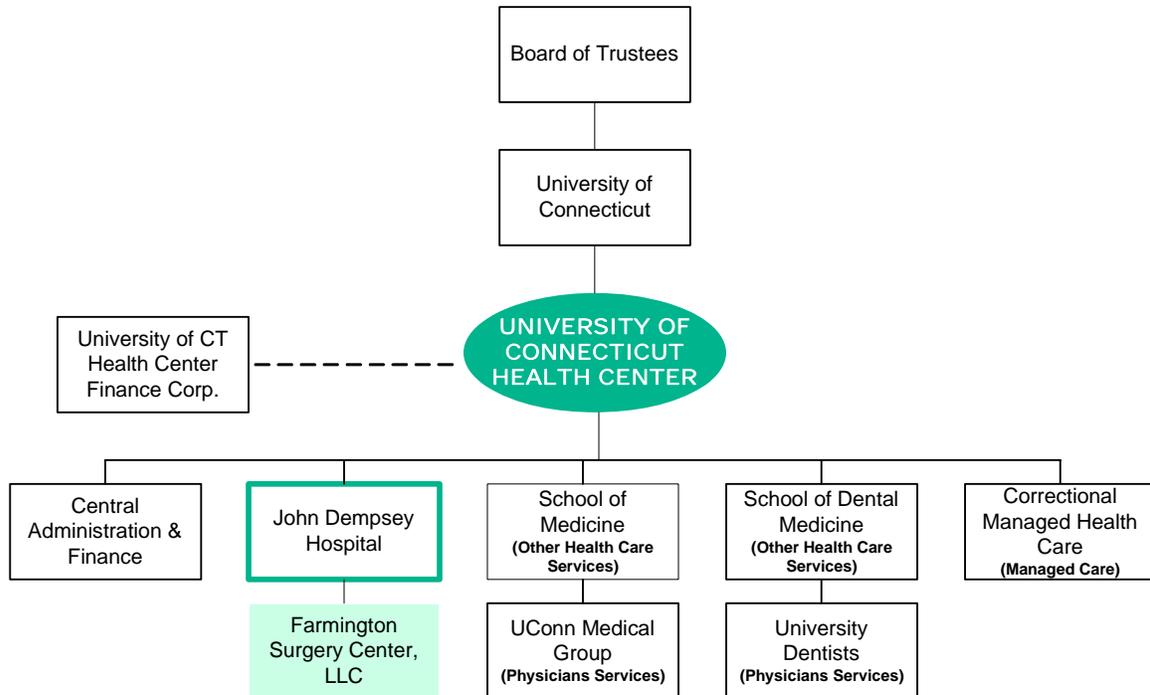
	2003	2004	2005
Days of expenses in accounts payable	53	65	61
Days cash on hand	59	54	68
Days of revenue in accounts receivable	53	48	35
Equity financing ratio	43%	50%	40%

**UTILIZATION MEASURES**

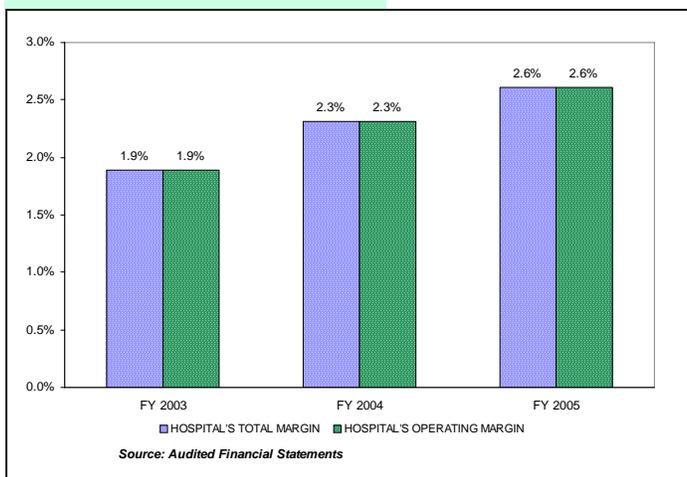
	2003	2004	2005
Patient Days	23,032	22,892	22,084
Discharges	6,430	6,480	6,477
ALOS	3.6	3.5	3.4
Staffed Beds	72	72	72
Licensed Beds	122	122	122
Occupancy of staffed beds	87%	87%	84%
Occupancy of licensed beds	52%	51%	50%
FTE's	708	701	725

## JOHN DEMPSEY HOSPITAL

John Dempsey Hospital, located in Farmington, was founded in 1975 as the teaching hospital of the University of Connecticut Health Center and is also a statewide referral site for tertiary care. John Dempsey Hospital primarily serves the residents of Avon, Bloomfield, Bristol, Canton, East Hartford, Farmington, Hartford, Manchester, New Britain, Newington, Rocky Hill, Simsbury, Southington, Torrington, and West Hartford. John Dempsey Hospital's parent corporation is the University of Connecticut Health Center. Reported below is a chart indicating all of the affiliates of the University of Connecticut Health Center, three years of total margins and operating margins and FY 2005 CON activity for John Dempsey Hospital.



### HOSPITAL MARGINS

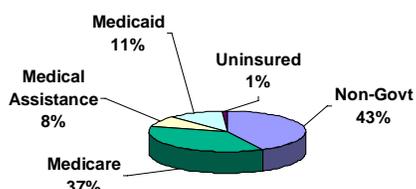


### CON ACTIVITY

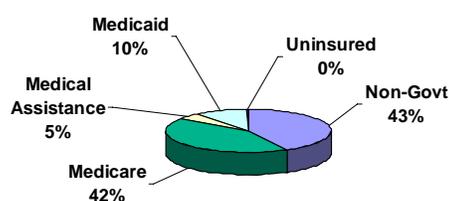
- Replace MRI at \$1,693,650.
- Acquisition of electronic Health Information System at \$1,400,848.
- Change capital expenditure for relocation of ambulatory radiology service for \$1,412,277.
- Acquisition of Picture Archiving Communications System at \$1,900,000.

## KEY RESULTS - JOHN DEMPSEY HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$55,446,577	\$53,816,541	\$59,658,374
Health System	\$225,766,144	\$230,569,010	\$248,143,420

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$158,105,861	\$181,546,897	\$199,909,190
Total expenses	\$156,507,358	\$178,719,164	\$195,141,020
Uncompensated Care Cost	\$2,224,672	\$2,173,298	\$1,847,731
Uncompensated care % of total expenses	1.4%	1.2%	0.9%
Average Managed Care Discounts	46%	47%	45%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.52	0.52	0.53
Medicare Payment to Cost	1.17	1.20	1.19
Medicaid Payment to Cost	0.91	0.87	0.93
Private Payment to Cost	1.03	1.00	1.02

### FINANCIAL MEASURES

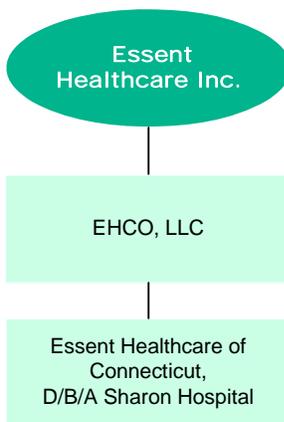
	2003	2004	2005
Days of expenses in accounts payable	69	69	69
Days cash on hand	0	23	28
Days of revenue in accounts receivable	52	43	36
Equity financing ratio	58%	54%	53%

### UTILIZATION MEASURES

	2003	2004	2005
Patient Days	55,174	59,283	60,167
Discharges	8,953	9,563	9,799
ALOS	6.2	6.2	6.1
Staffed Beds	224	224	224
Licensed Beds	224	224	224
Occupancy of staffed beds	67%	72%	73%
Occupancy of licensed beds	67%	72%	73%
FTE's	1,046	1,156	1,176

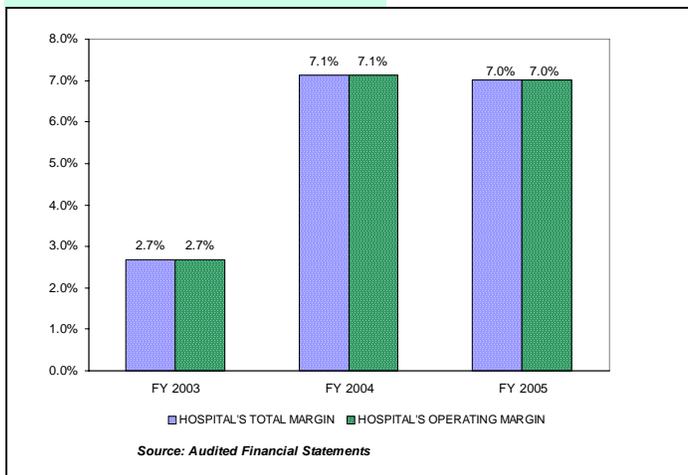
## ESSENT-SHARON HOSPITAL

Sharon Hospital, founded in 1909, is located in Sharon and primarily serves the residents of Canaan, Cornwall, Salisbury, Sharon, Warren, North Canaan and some towns in New York State. In April of 2002, Sharon Hospital became the state's first for-profit acute care hospital when it was purchased by Essent Healthcare Incorporated of Nashville Tennessee. Sharon Hospital's parent corporation is Essent Healthcare Incorporated. Reported below is a chart indicating all of the Connecticut affiliates of Essent Healthcare Incorporated, total margins and operating margins and FY 2005 CON activity for Sharon Hospital since it came under the ownership of Essent Healthcare Incorporated.



For Profit Entity

### HOSPITAL MARGINS

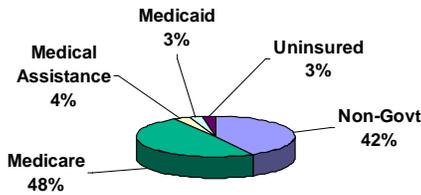


### CON ACTIVITY

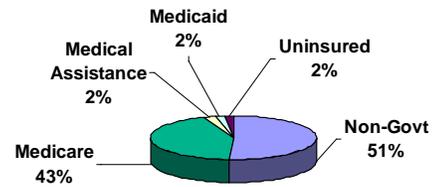
- Establish lithotripsy service at \$485,000.

**KEY RESULTS - ESSENT SHARON HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



<b>NET ASSETS</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Hospital	\$992,235	\$4,603,005	\$8,198,579
Health System	\$27,335,646	\$103,489,848	\$112,483,039

<b>REVENUE &amp; EXPENSE SUMMARY</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Net patient revenue	\$40,240,114	\$47,999,779	\$49,176,576
Total expenses	\$39,746,410	\$44,911,247	\$46,091,460
Uncompensated Care Cost	\$1,099,655	\$1,172,322	\$1,128,526
Uncompensated care % of total expenses	2.8%	2.6%	2.4%
Average Managed Care Discounts	38%	34%	37%

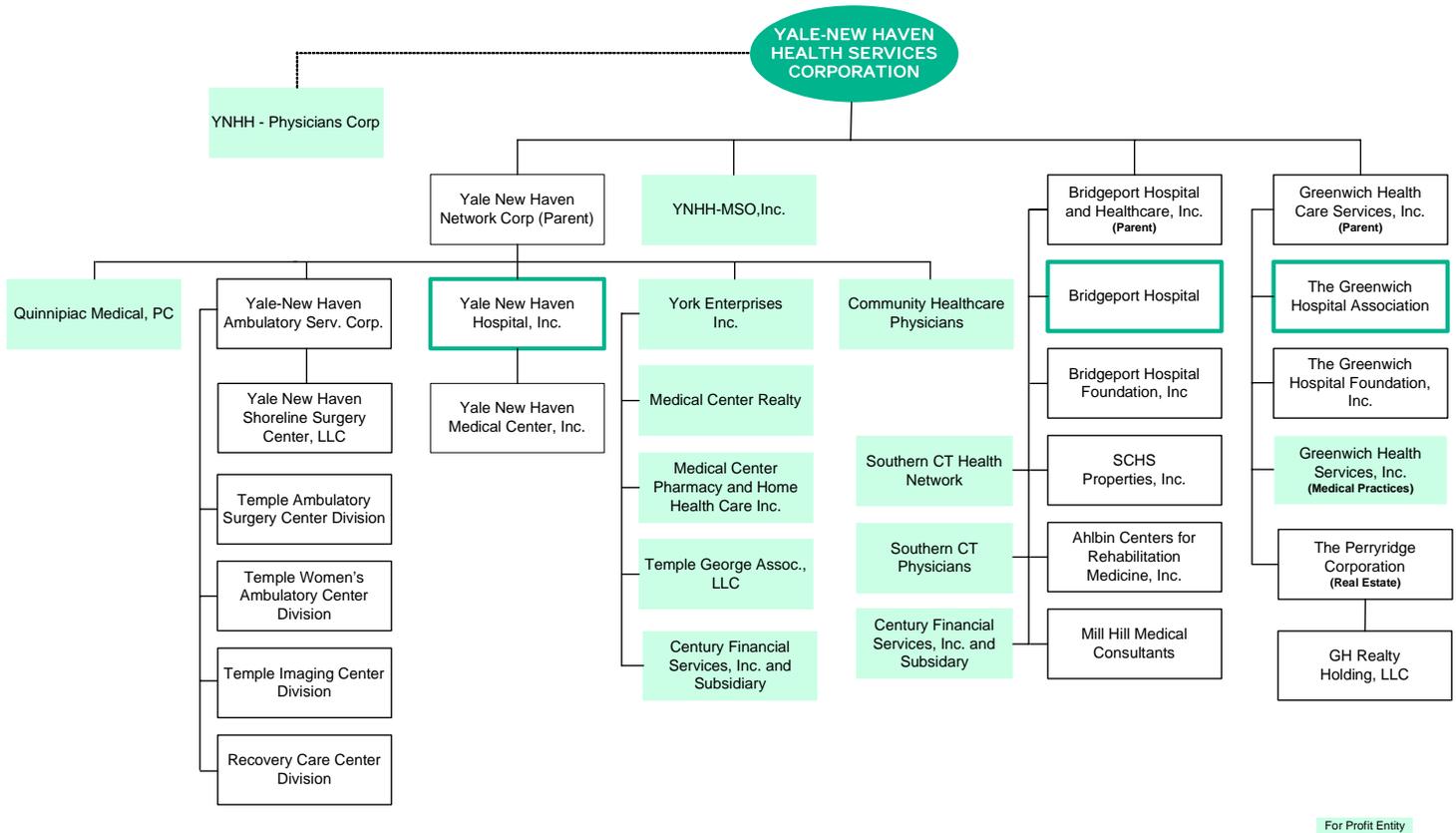
<b>COST DATA</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Ratio of cost to charges	0.48	0.49	0.47
Medicare Payment to Cost	0.87	0.96	0.95
Medicaid Payment to Cost	0.91	0.77	0.82
Private Payment to Cost	1.20	1.25	1.29

<b>FINANCIAL MEASURES</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Days of expenses in accounts payable	115	86	74
Days cash on hand	5	4	4
Days of revenue in accounts receivable	43	36	39
Equity financing ratio	0%	0%	24%

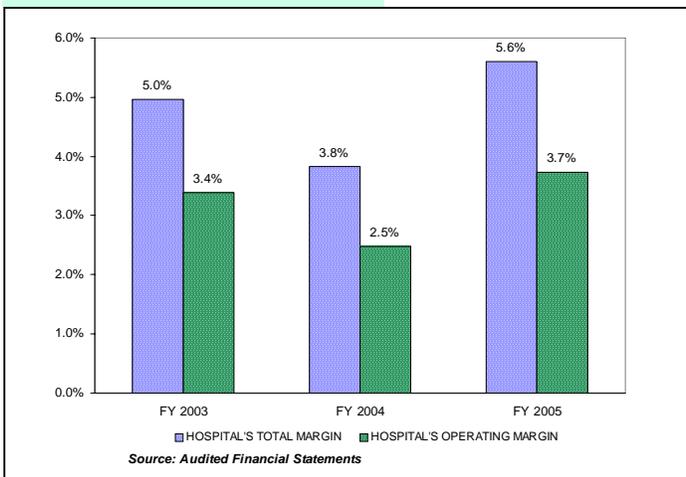
<b>UTILIZATION MEASURES</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Patient Days	12,083	12,733	12,776
Discharges	2,808	3,041	2,964
ALOS	4.3	4.2	4.3
Staffed Beds	47	47	47
Licensed Beds	86	94	94
Occupancy of staffed beds	70%	70%	74%
Occupancy of licensed beds	38%	35%	37%
FTE's	269	287	290

## GREENWICH HOSPITAL

Greenwich Hospital, founded in 1903, is located in Greenwich and primarily serves the residents of Greenwich and Westchester County New York. Greenwich Hospital's parent corporation is Greenwich Health Care Services Incorporated, an affiliate of the larger Yale-New Haven Health Services Corporation which includes Bridgeport Hospital and Yale New Haven Hospital. Reported below is a chart indicating all of the affiliates of Yale New Haven Health Services Corporation, three years of total margins and operating margins and FY 2005 CON activity for Greenwich Hospital.



### HOSPITAL MARGINS

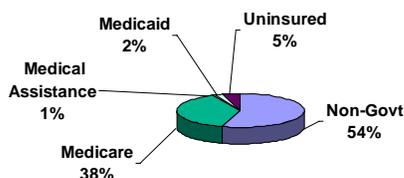


### CON ACTIVITY

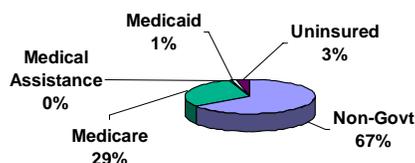
- Acquisition of a PET/CT scanner for \$2,704,590.
- Replace and relocate 1.5 Tesla MRI to Stamford and establish an imaging center for \$1,821,934.
- Establishment of a marketing collaboration with Greenwich Infertility and IVF Center, P.C. at no cost.
- Change level of care in the neonatal nursery program at no cost.
- Acquire use of a second PET scanner and upgrade both to PET/CT - date extension.
- Replaced radiation oncology simulator for \$1,129,015.

## KEY RESULTS - GREENWICH HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$286,758,000	\$314,461,000	\$345,568,000
Health System	\$302,712,000	\$331,745,000	\$363,064,000

### REVENUE & EXPENSE SUMMARY

Net patient revenue	\$181,900,587	\$201,316,972	\$208,978,359
Total expenses	\$178,834,838	\$198,741,419	\$205,110,987
Uncompensated Care Cost	\$5,869,399	\$7,237,286	\$6,947,590
Uncompensated care % of total expenses	3.3%	3.6%	3.4%
Average Managed Care Discounts	42%	46%	50%

### COST DATA

Ratio of cost to charges	0.48	0.45	0.42
Medicare Payment to Cost	0.77	0.81	0.79
Medicaid Payment to Cost	0.61	0.68	0.82
Private Payment to Cost	1.24	1.21	1.23

### FINANCIAL MEASURES

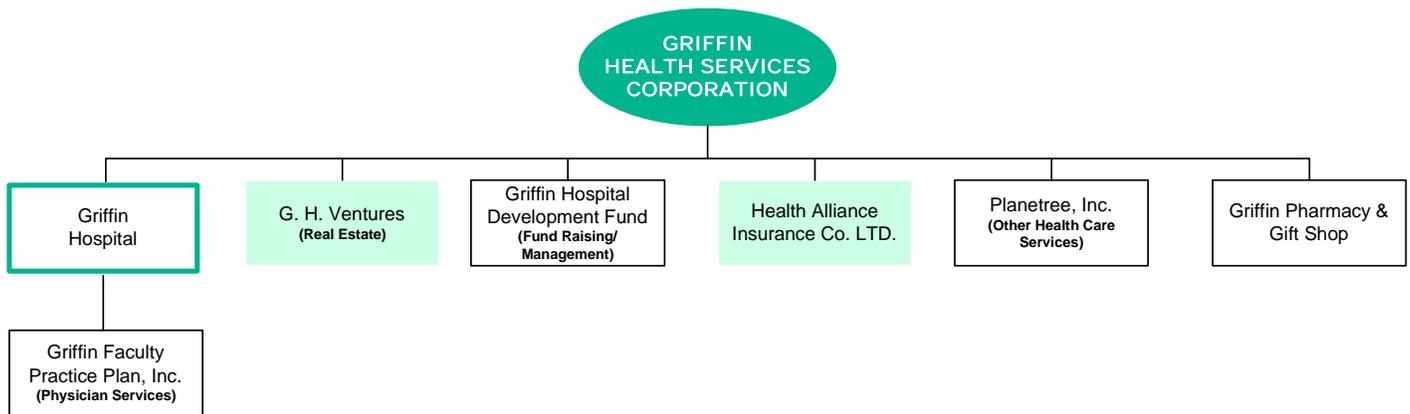
Days of expenses in accounts payable	66	67	68
Days cash on hand	43	24	24
Days of revenue in accounts receivable	48	45	43
Equity financing ratio	55%	58%	63%

### UTILIZATION MEASURES

Patient Days	45,327	47,534	45,560
Discharges	11,088	11,394	11,920
ALOS	4.1	4.2	3.8
Staffed Beds	178	194	194
Licensed Beds	178	206	206
Occupancy of staffed beds	70%	67%	64%
Occupancy of licensed beds	70%	63%	61%
FTE's	1,306	1,345	1,435

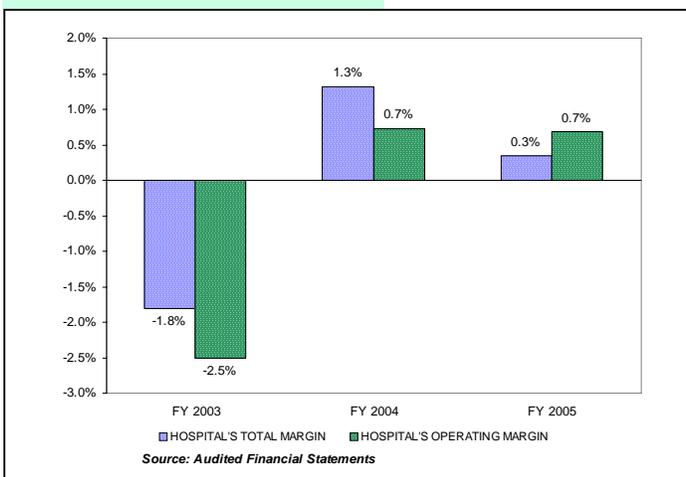
## GRIFFIN HOSPITAL

Griffin Hospital was founded in 1909 as Derby Hospital and primarily serves the residents of Ansonia, Beacon Falls, Derby, Oxford, Seymour, and Shelton. Griffin Hospital's parent corporation is Griffin Health Services Corporation. Reported below is a chart indicating all of the affiliates of Griffin Health Services Corporation, three years of total margins and operating margins and FY 2005 CON activity for Griffin Hospital.



For Profit Entity

### HOSPITAL MARGINS

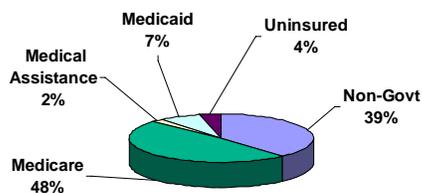


### CON ACTIVITY

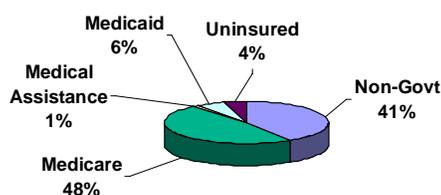
- Increase expenditure for kitchen and cafeteria renovations for \$1,381,872.
- Merger with Valley Mental Health Center for outpatient psychiatric services at no cost.

## KEY RESULTS - GRIFFIN HOSPITAL

### Hospital Gross Revenue Payer Mix



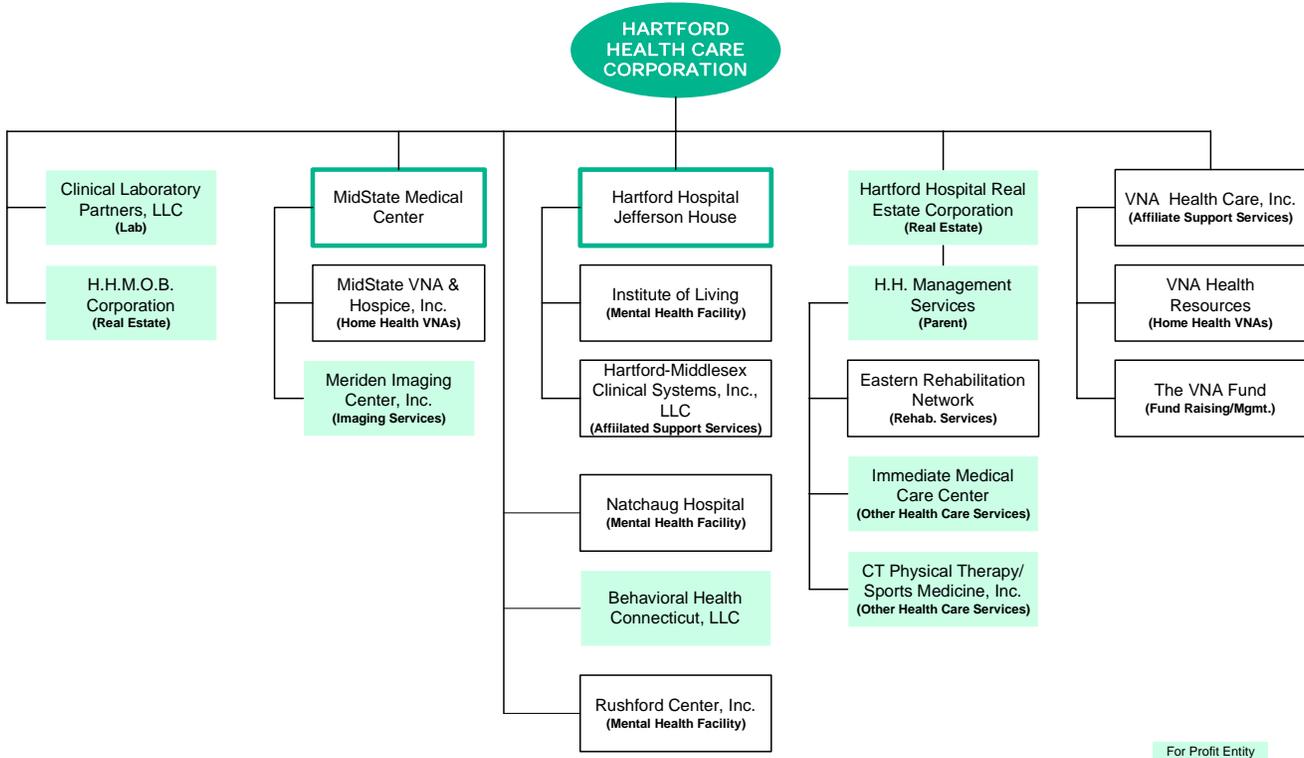
### Hospital Net Revenue Payer Mix



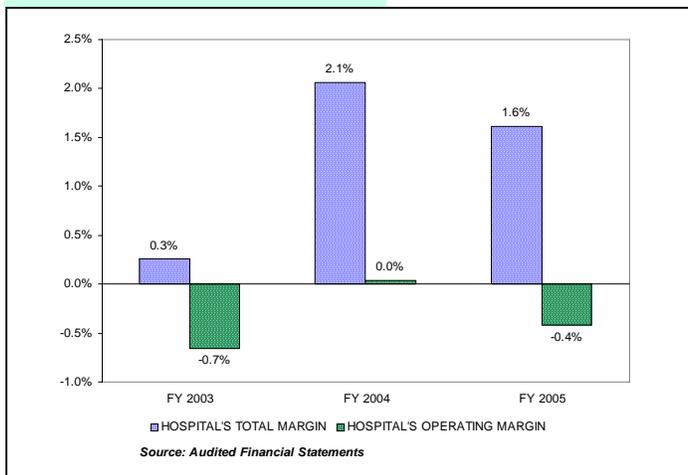
NET ASSETS	2003	2004	2005
Hospital	\$9,916,590	\$9,029,316	\$9,073,263
Health System	\$12,029,714	\$11,238,692	\$11,159,474
REVENUE & EXPENSE SUMMARY			
Net patient revenue	\$76,395,528	\$84,878,189	\$90,354,674
Total expenses	\$79,376,092	\$84,394,953	\$90,149,190
Uncompensated Care Cost	\$1,790,694	\$2,994,165	\$3,051,296
Uncompensated care % of total expenses	2.3%	3.5%	3.4%
Average Managed Care Discounts	56%	59%	58%
COST DATA			
Ratio of cost to charges	0.40	0.35	0.36
Medicare Payment to Cost	0.92	1.04	0.99
Medicaid Payment to Cost	0.77	0.82	0.82
Private Payment to Cost	0.98	1.07	1.06
FINANCIAL MEASURES			
Days of expenses in accounts payable	53	47	54
Days cash on hand	30	34	31
Days of revenue in accounts receivable	48	39	36
Equity financing ratio	9%	7%	7%
UTILIZATION MEASURES			
Patient Days	28,694	32,304	31,585
Discharges	7,215	7,348	7,220
ALOS	4.0	4.4	4.4
Staffed Beds	175	91	89
Licensed Beds	175	180	180
Occupancy of staffed beds	45%	97%	97%
Occupancy of licensed beds	45%	49%	48%
FTE's	777	810	830

## HARTFORD HOSPITAL

Hartford Hospital, founded in 1854, is located in Hartford and primarily serves the residents of Avon, Bloomfield, Canton, East Granby, East Hartford, Glastonbury, Granby, Hartford, Hartland, Hebron, Marlborough, Newington, Rocky Hill, Simsbury, West Hartford, Wethersfield, and Windsor. Hartford Hospital's parent corporation is Hartford Health Care Corporation which also includes Midstate Medical Center. Reported below is a chart indicating all of the affiliates of Hartford Health Care Corporation, three years of total margins and operating margins and FY 2005 CON activity for Hartford Hospital.



### HOSPITAL MARGINS

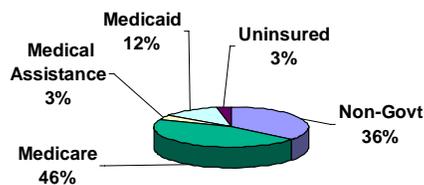


### CON ACTIVITY

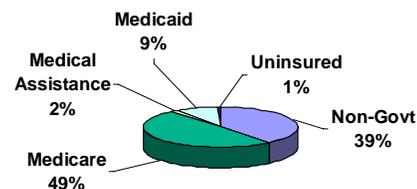
- Replacement of CT scanner for \$1,997,631.
- Replace of two MRI units for \$247,988.
- Refurbish Donnelly building patient rooms for \$639,257.
- Establish an ambulatory surgical center in West Hartford for \$4,650,721.
- Establish a disaster recovery center for Informational Services at \$3,500,000.
- Replacement of Bliss Building substation - date extension.

## KEY RESULTS - HARTFORD HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$671,554,562	\$703,473,280	\$745,141,478
Health System	\$861,111,893	\$907,597,630	\$966,774,418

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$475,231,245	\$513,463,501	\$538,298,580
Total expenses	\$487,026,318	\$521,342,927	\$550,836,345
Uncompensated Care Cost	\$18,221,337	\$18,944,057	\$20,377,700
Uncompensated care % of total expenses	3.7%	3.6%	3.7%
Average Managed Care Discounts	43%	45%	48%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.57	0.52	0.49
Medicare Payment to Cost	1.06	1.06	1.07
Medicaid Payment to Cost	0.69	0.71	0.70
Private Payment to Cost	1.03	1.09	1.07

### FINANCIAL MEASURES

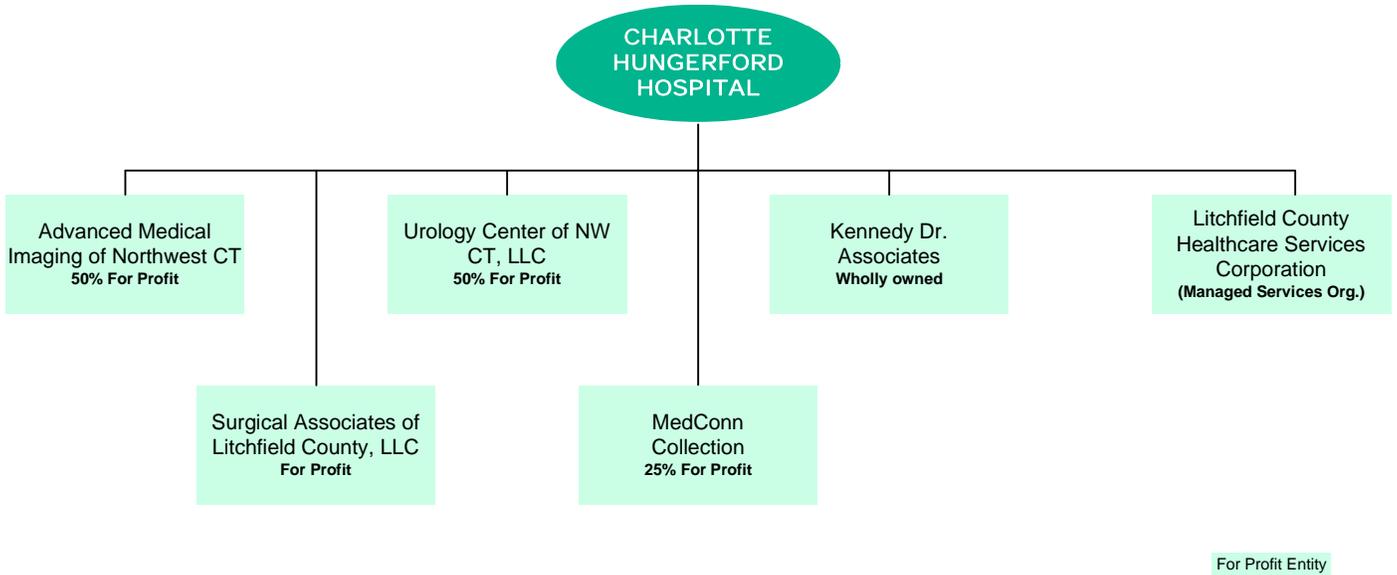
	2003	2004	2005
Days of expenses in accounts payable	46	43	42
Days cash on hand	5	12	3
Days of revenue in accounts receivable	48	46	51
Equity financing ratio	49%	49%	50%

### UTILIZATION MEASURES

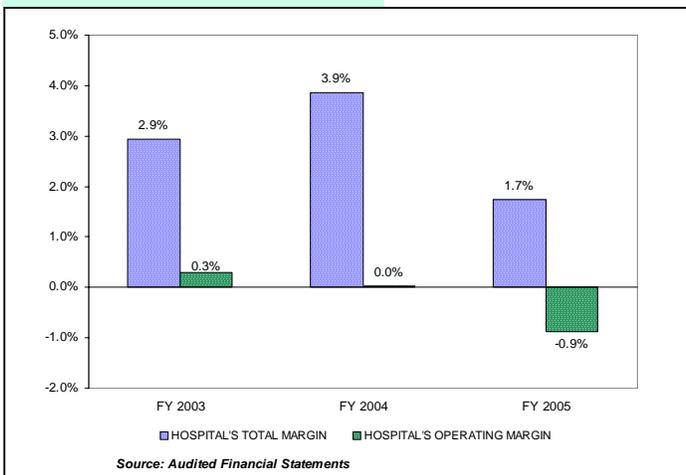
	2003	2004	2005
Patient Days	212,886	219,452	226,571
Discharges	36,806	37,446	39,045
ALOS	5.8	5.9	5.8
Staffed Beds	759	767	774
Licensed Beds	867	867	867
Occupancy of staffed beds	77%	78%	80%
Occupancy of licensed beds	67%	69%	72%
FTE's	4,995	5,029	5,028

## CHARLOTTE HUNGERFORD HOSPITAL

The Charlotte Hungerford Hospital, founded in 1916, is located in Torrington and primarily serves the residents of Barkhamsted, Colebrook, Goshen, Harwinton, Litchfield, Morris, New Hartford, Norfolk, Torrington, and Winchester. Charlotte Hungerford Hospital does not have a parent corporation. Reported below is a chart indicating all of the affiliates of Charlotte Hungerford Hospital, three years of total margins and operating margins and FY 2005 CON activity for Charlotte Hungerford Hospital.



### HOSPITAL MARGINS

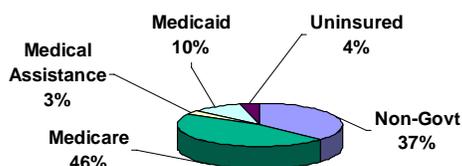


### CON ACTIVITY

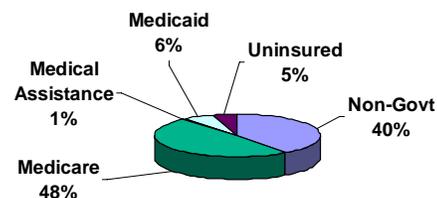
- Termination of laundry services at no cost.

## KEY RESULTS - CHARLOTTE HUNGERFORD HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$75,361,528	\$81,132,600	\$79,620,702
Health System	\$75,383,906	\$81,239,353	\$79,924,795

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$72,668,396	\$74,802,449	\$74,260,478
Total expenses	\$73,278,574	\$75,702,140	\$77,605,669
Uncompensated Care Cost	\$1,141,603	\$1,295,506	\$1,143,477
Uncompensated care % of total expenses	1.6%	1.7%	1.5%
Average Managed Care Discounts	34%	38%	39%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.60	0.57	0.59
Medicare Payment to Cost	1.00	0.99	0.99
Medicaid Payment to Cost	0.55	0.67	0.58
Private Payment to Cost	1.11	1.09	1.04

### FINANCIAL MEASURES

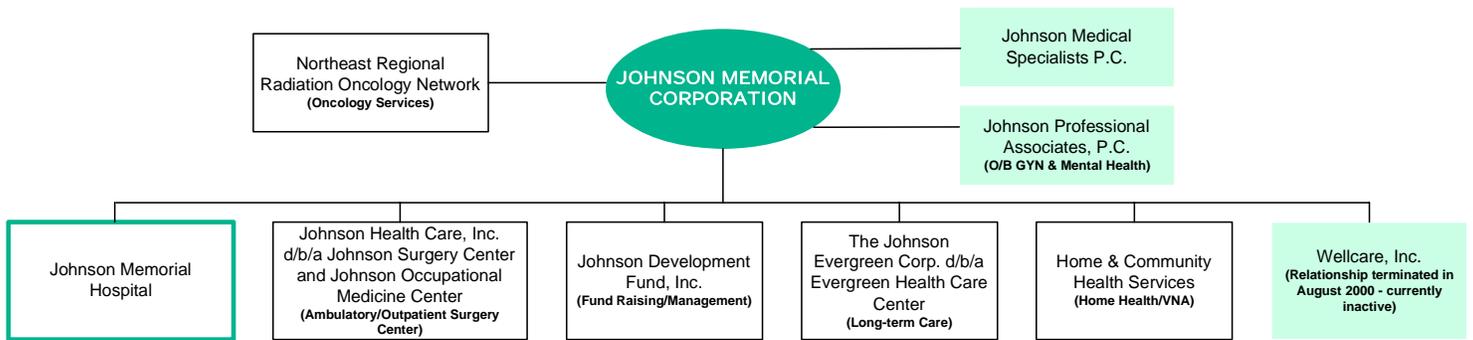
	2003	2004	2005
Days of expenses in accounts payable	49	54	43
Days cash on hand	13	9	10
Days of revenue in accounts receivable	33	37	37
Equity financing ratio	57%	59%	56%

### UTILIZATION MEASURES

	2003	2004	2005
Patient Days	29,271	28,359	27,206
Discharges	6,432	6,328	6,205
ALOS	4.6	4.5	4.4
Staffed Beds	116	114	116
Licensed Beds	124	122	122
Occupancy of staffed beds	69%	67%	64%
Occupancy of licensed beds	65%	63%	61%
FTE's	687	697	680

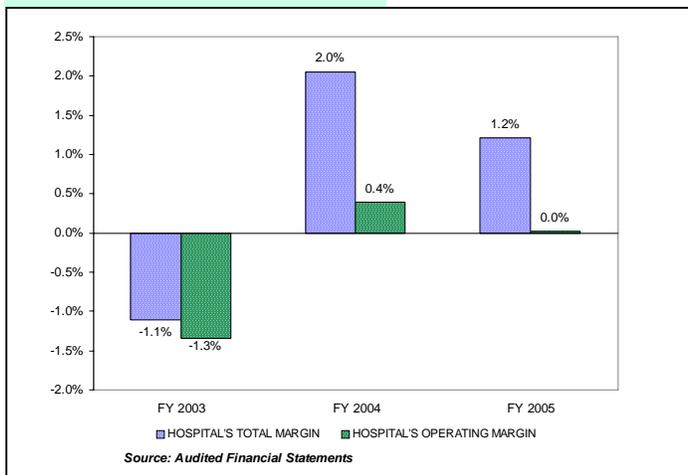
## JOHNSON MEMORIAL HOSPITAL

Johnson Memorial Hospital, founded in 1912, is located in Stafford and primarily serves the towns of Enfield, Somers, Stafford, and Union. Johnson Memorial Hospital's parent corporation is Johnson Memorial Corporation. Reported below is a chart indicating all of the affiliates of Johnson Memorial Corporation, three years of total margins and operating margins and FY 2005 CON activity for the Johnson Memorial Hospital.



For Profit Entity

### HOSPITAL MARGINS

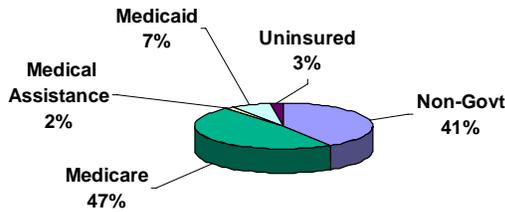


### CON ACTIVITY

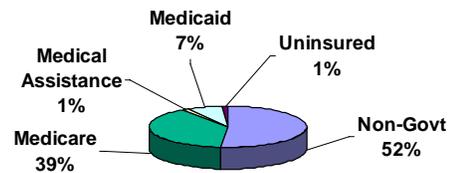
- Replacement and expansion of the Emergency Department for \$1,251,069.

**KEY RESULTS - JOHNSON MEMORIAL HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$24,417,302	\$22,099,417	\$18,289,970
Health System	\$23,475,152	\$19,647,604	\$13,977,630

**REVENUE & EXPENSE SUMMARY**

	2003	2004	2005
Net patient revenue	\$42,577,914	\$47,677,541	\$53,185,940
Total expenses	\$43,904,300	\$48,142,330	\$53,691,872
Uncompensated Care Cost	\$1,502,712	\$1,604,252	\$1,579,860
Uncompensated care % of total expenses	3.4%	3.3%	2.9%
Average Managed Care Discounts	63%	56%	61%

**COST DATA**

	2003	2004	2005
Ratio of cost to charges	0.39	0.34	0.33
Medicare Payment to Cost	0.96	0.84	0.80
Medicaid Payment to Cost	0.75	0.88	0.97
Private Payment to Cost	1.06	1.21	1.24

**FINANCIAL MEASURES**

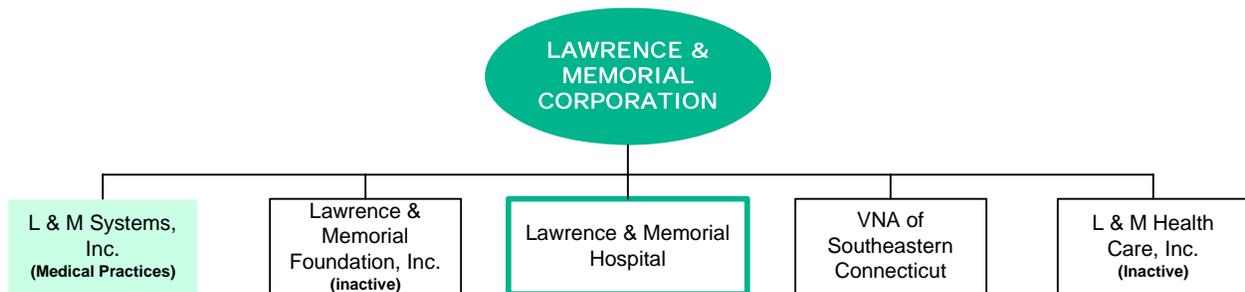
	2003	2004	2005
Days of expenses in accounts payable	85	64	73
Days cash on hand	2	5	1
Days of revenue in accounts receivable	70	60	60
Equity financing ratio	51%	45%	32%

**UTILIZATION MEASURES**

	2003	2004	2005
Patient Days	17,560	19,052	21,587
Discharges	3,711	3,634	3,848
ALOS	4.7	5.2	5.6
Staffed Beds	67	75	83
Licensed Beds	98	98	98
Occupancy of staffed beds	72%	70%	76%
Occupancy of licensed beds	49%	53%	64%
FTE's	456	468	478

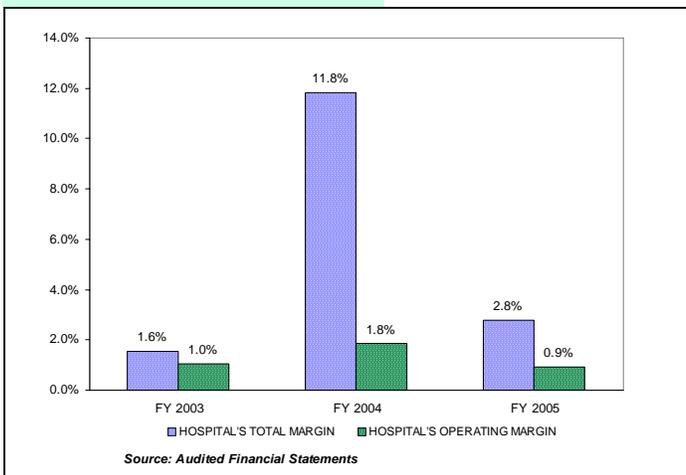
## LAWRENCE & MEMORIAL HOSPITAL

Lawrence and Memorial Hospital, founded 1912, is located in New London and primarily serves the residents of East Lyme, Groton, Ledyard, Lyme, Montville, New London, North Stonington, Old Lyme & Lyme, Salem, Stonington, and Waterford. Lawrence & Memorial Hospital's parent corporation is Lawrence & Memorial Corporation. Reported below is a chart indicating all of the affiliates of Lawrence & Memorial Corporation, three years of total margins and operating margins and FY 2005 CON activity for the Lawrence & Memorial Hospital.



For Profit Entity

### HOSPITAL MARGINS

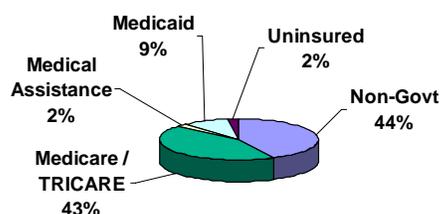


### CON ACTIVITY

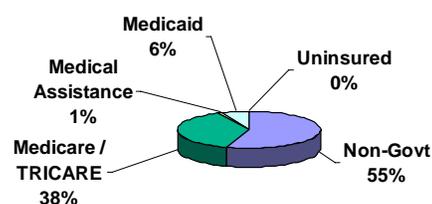
- Establish primary angioplasty service for \$7,500.
- Replacement of beds for \$2,700,976.
- Replacement of two CT scanners for \$1,875,365.

## KEY RESULTS - LAWRENCE & MEMORIAL HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$105,017,709	\$139,507,538	\$146,712,299
Health System	\$150,405,371	\$185,712,507	\$199,289,846

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$191,053,452	\$195,579,391	\$207,206,969
Total expenses	\$191,442,995	\$192,685,674	\$208,180,884
Uncompensated Care Cost	\$7,033,201	\$6,646,309	\$6,960,484
Uncompensated care % of total expenses	3.7%	3.4%	3.3%
Average Managed Care Discounts	28%	30%	30%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.53	0.52	0.52
Medicare Payment to Cost	0.88	0.90	0.87
Medicaid Payment to Cost	0.69	0.69	0.65
Private Payment to Cost	1.26	1.27	1.28

### FINANCIAL MEASURES

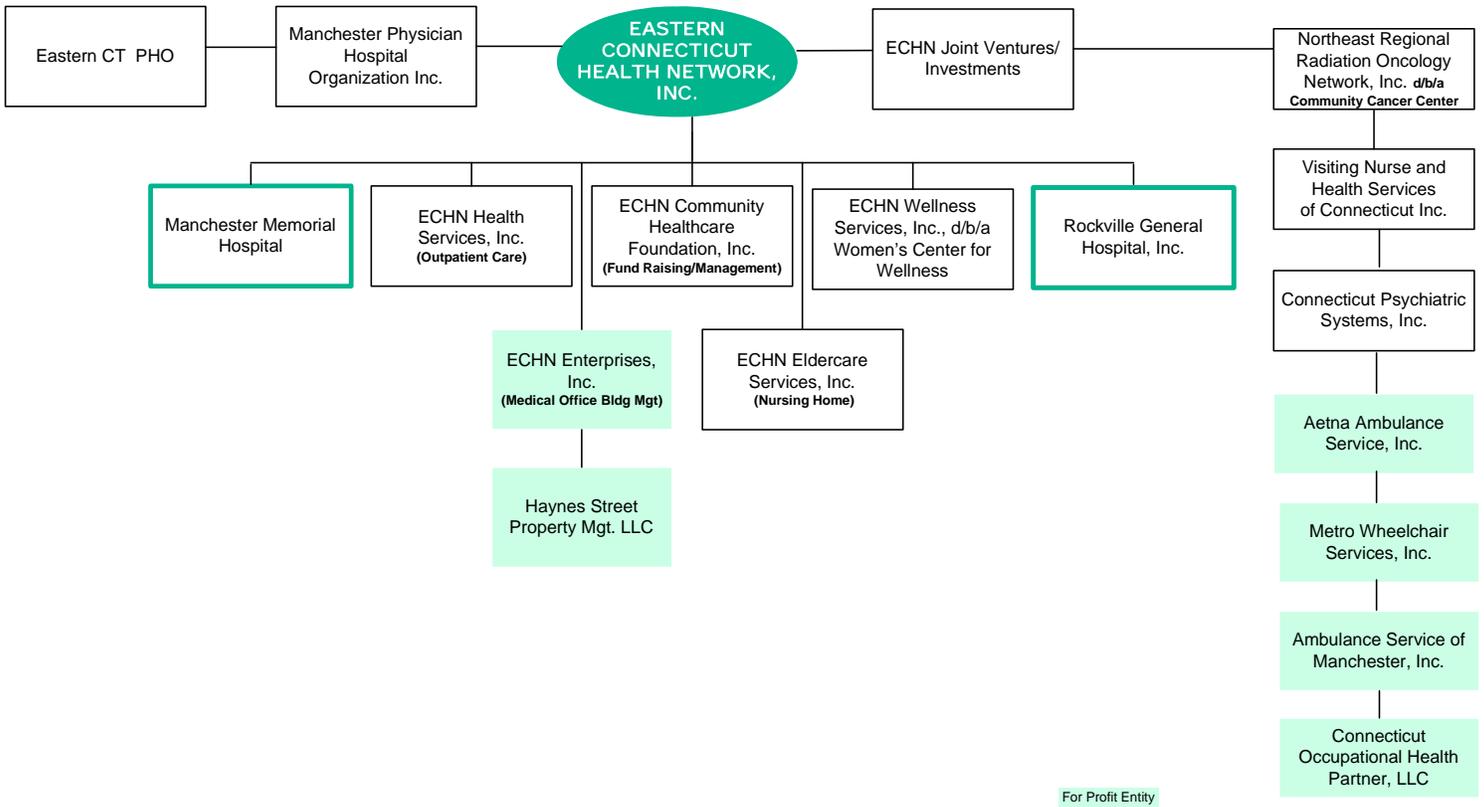
	2003	2004	2005
Days of expenses in accounts payable	64	68	47
Days cash on hand	44	15	14
Days of revenue in accounts receivable	48	45	42
Equity financing ratio	38%	45%	47%

### UTILIZATION MEASURES

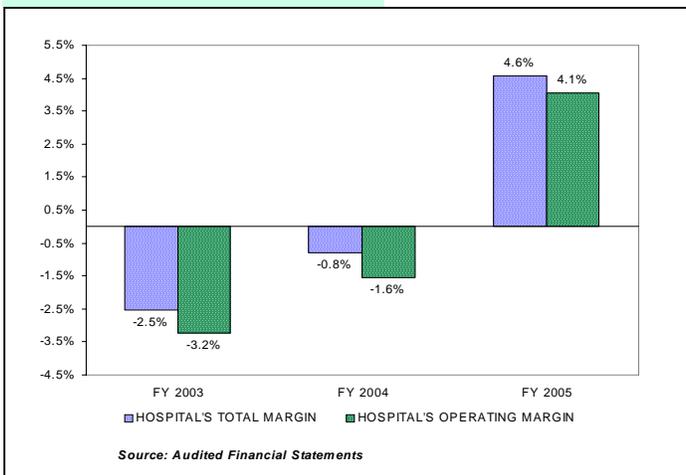
	2003	2004	2005
Patient Days	72,583	68,730	71,161
Discharges	15,382	14,868	15,212
ALOS	4.7	4.6	4.7
Staffed Beds	249	249	249
Licensed Beds	308	308	308
Occupancy of staffed beds	80%	76%	78%
Occupancy of licensed beds	64%	61%	63%
FTE's	1,737	1,769	1,821

## MANCHESTER MEMORIAL HOSPITAL

Manchester Memorial Hospital (MMH), founded in 1919, is located in Manchester and primarily serves the residents of Andover, Bolton, East Hartford, Manchester, South Windsor, and Vernon. Manchester Memorial Hospital's parent corporation is Eastern Connecticut Health Network Incorporated (ECHN) which is also the parent corporation of Rockville General Hospital. Reported below is a chart indicating all of the affiliates of Eastern Connecticut Health Network Incorporated, three years of total margins and operating margins and FY 2005 CON activity for the Manchester Memorial Hospital.



### HOSPITAL MARGINS

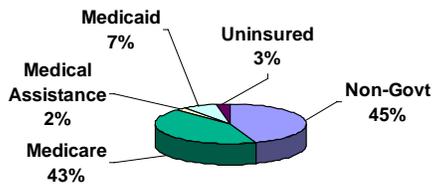


### CON ACTIVITY

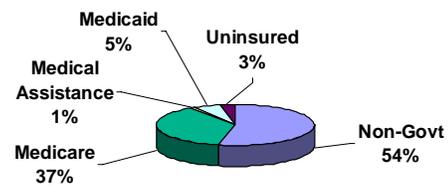
- Replace CT scanner for \$918,593.

**KEY RESULTS - MANCHESTER MEMORIAL HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



<b>NET ASSETS</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Hospital	\$40,143,763	\$34,078,205	\$36,218,383
Health System	\$49,236,854	\$44,099,565	\$49,134,925

<b>REVENUE &amp; EXPENSE SUMMARY</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Net patient revenue	\$110,904,176	\$116,541,378	\$124,833,452
Total expenses	\$118,731,596	\$123,289,732	\$124,200,584
Uncompensated Care Cost	\$2,403,677	\$2,489,984	\$2,248,535
Uncompensated care % of total expenses	2.0%	2.0%	1.8%
Average Managed Care Discounts	48%	45%	50%

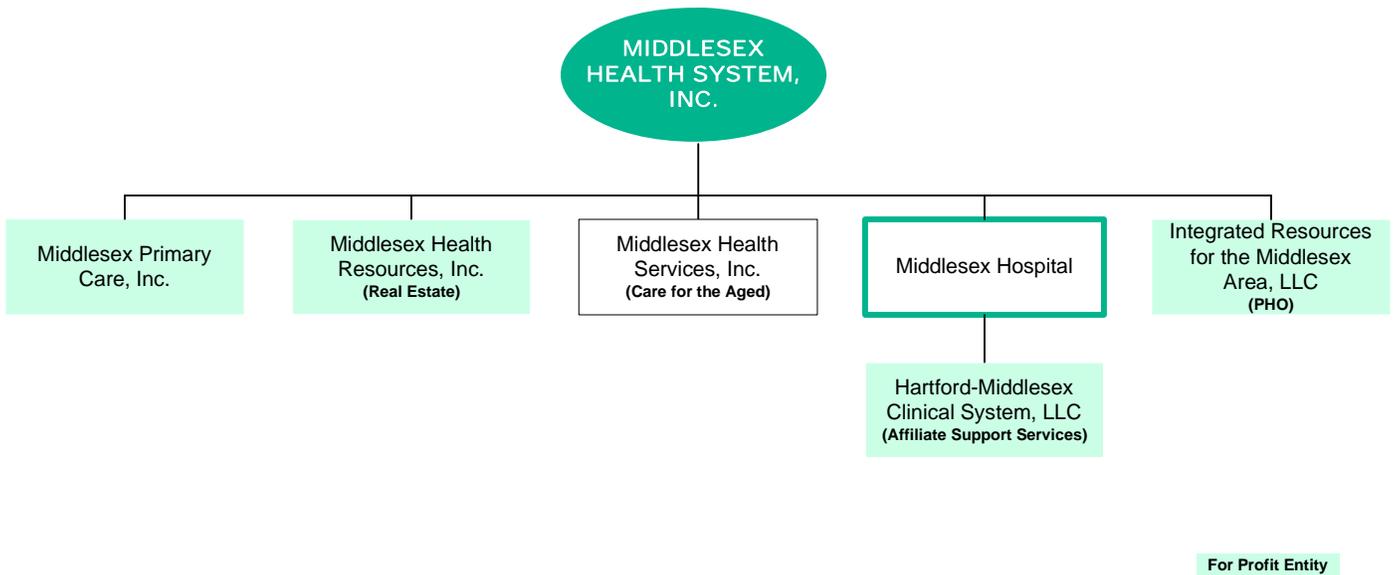
<b>COST DATA</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Ratio of cost to charges	0.47	0.46	0.41
Medicare Payment to Cost	0.88	0.86	0.87
Medicaid Payment to Cost	0.69	0.75	0.76
Private Payment to Cost	1.11	1.13	1.22

<b>LIQUIDITY MEASURES</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Days of expenses in accounts payable	73	116	66
Days cash on hand	8	53	9
Days of revenue in accounts receivable	58	52	47
Equity financing ratio	24%	18%	21%

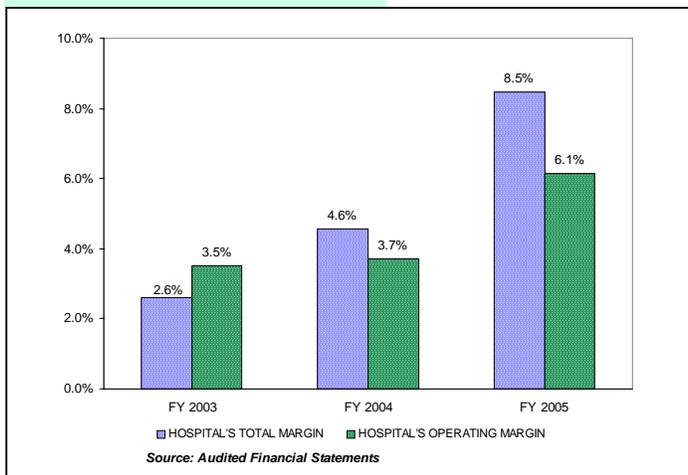
<b>UTILIZATION MEASURES</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
Patient Days	40,123	40,812	42,867
Discharges	8,389	8,826	8,961
ALOS	4.8	4.6	4.8
Staffed Beds	140	140	140
Licensed Beds	283	283	283
Occupancy of staffed beds	78%	80%	84%
Occupancy of licensed beds	39%	39%	41%
FTE's	1,056	1,099	1,143

## MIDDLESEX HOSPITAL

Middlesex Hospital, founded in 1904, is located in Middletown and primarily serves the residents of Chester, Clinton, Cromwell, Deep River, Durham, East Haddam, East Hampton, Essex, Haddam, Killingworth, Madison, Middlefield, Middletown, Old Saybrook, Portland, and Westbrook. Middlesex Hospital's parent corporation is Middlesex Health System, Incorporated. Reported below is a chart indicating all of the affiliates of Middlesex Health System, Incorporated, three years of total margins and operating margins and FY 2005 CON activity for the Middlesex Hospital.



### HOSPITAL MARGINS

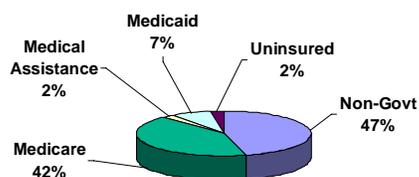


### CON ACTIVITY

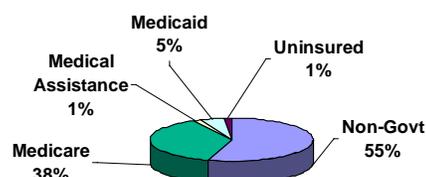
- Expansion and upgrade of PET/CT and CT services for \$1,104,508.
- Hospital Information System replacement for revenue cycle systems for \$3,500,000.

## KEY RESULTS - MIDDLESEX HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$117,857,000	\$133,609,000	\$157,828,000
Health System	\$120,480,000	\$136,752,000	\$160,991,000

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$193,062,231	\$201,495,758	\$229,613,050
Total expenses	\$185,722,732	\$195,150,706	\$214,245,177
Uncompensated Care Cost	\$5,338,080	\$6,629,830	\$5,286,765
Uncompensated care % of total expenses	2.9%	3.4%	2.5%
Average Managed Care Discounts	37%	44%	44%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.54	0.46	0.42
Medicare Payment to Cost	1.02	0.96	0.96
Medicaid Payment to Cost	0.79	0.77	0.73
Private Payment to Cost	1.16	1.21	1.28

### FINANCIAL MEASURES

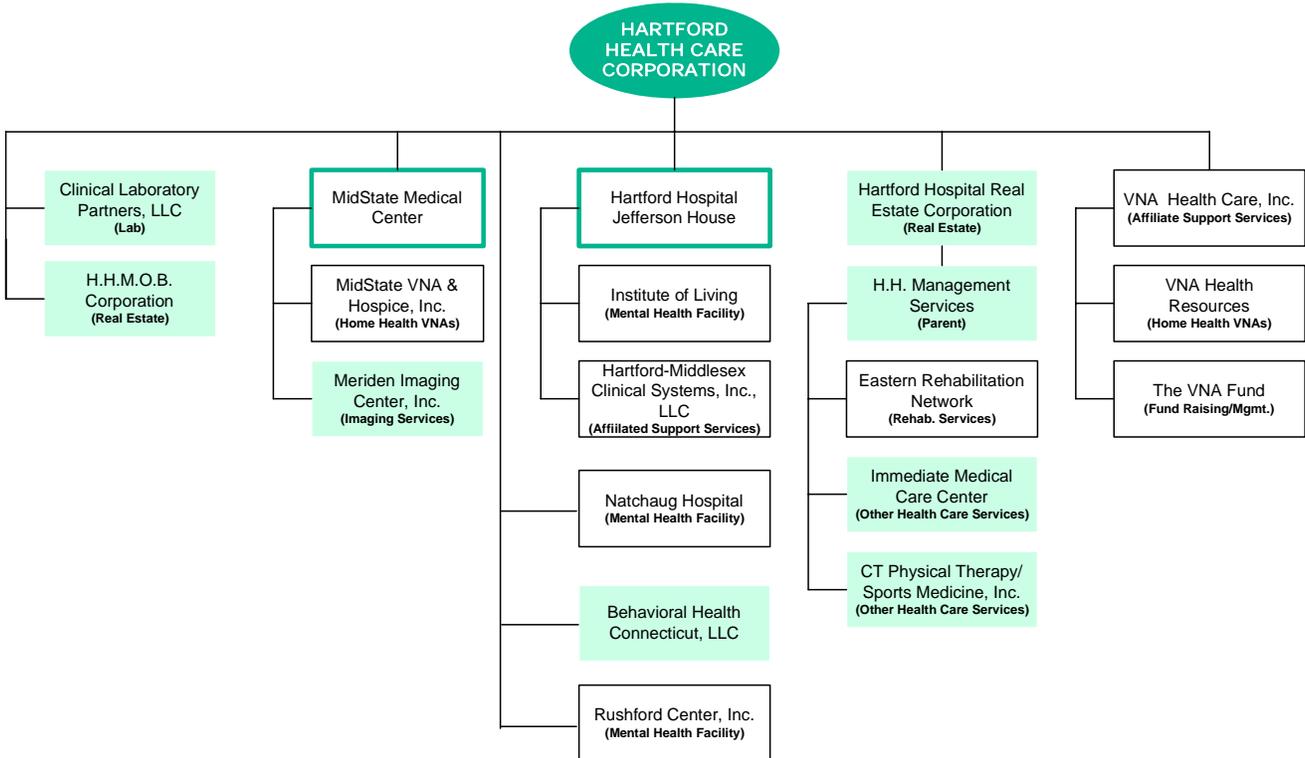
	2003	2004	2005
Days of expenses in accounts payable	72	55	62
Days cash on hand	43	41	56
Days of revenue in accounts receivable	56	51	48
Equity financing ratio	43%	47%	50%

### UTILIZATION MEASURES

	2003	2004	2005
Patient Days	52,062	51,927	54,000
Discharges	12,720	12,207	12,502
ALOS	4.1	4.3	4.3
Staffed Beds	146	159	175
Licensed Beds	297	297	297
Occupancy of staffed beds	98%	89%	84%
Occupancy of licensed beds	48%	48%	50%
FTE's	1,691	1,700	1,738

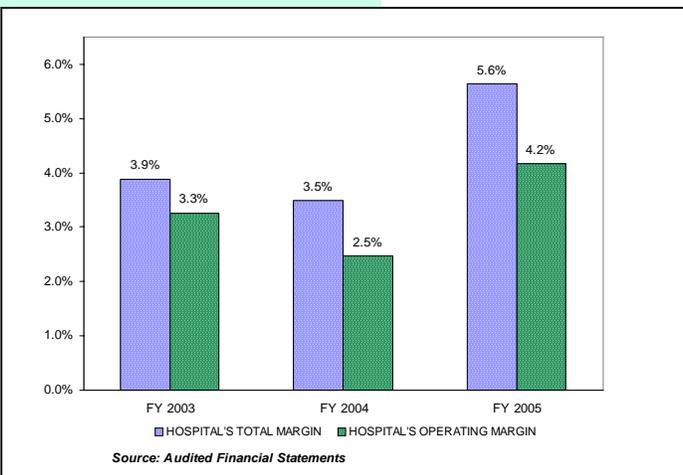
## MIDSTATE MEDICAL CENTER

MidState Medical Center opened in 1998 as the successor to Veterans Memorial Medical Center in a new facility that is located in Meriden. Midstate Medical Center primarily serves the residents of Meriden and Wallingford. MidState Medical Center's parent corporation is Hartford Health Care Corporation which also includes Hartford Hospital. Reported below is a chart indicating all of the affiliates of Hartford Health Care Corporation, three years of total margins and operating margins and FY 2005 CON activity for the Midstate Medical Center.



For Profit Entity

### HOSPITAL MARGINS

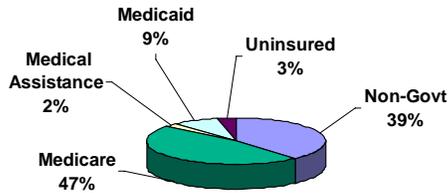


### CON ACTIVITY

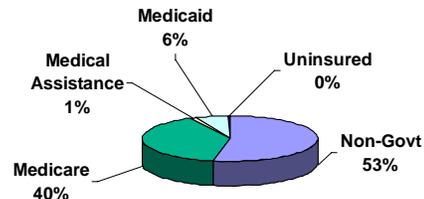
- Establish the MidState Medical Diagnostic & Specialty Center for \$505,320.
- Establish sleep lab in Meriden for \$4,500.
- Construction of an administrative building for \$7,377,000.
- Replacement of Radiation Oncology Simulator with a CT Simulator for \$75,000 - increase in capital expenditure.

## KEY RESULTS - MIDSTATE MEDICAL CENTER

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$49,212,865	\$57,411,392	\$59,311,158
Health System	\$51,966,107	\$61,494,370	\$64,034,582

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$117,797,097	\$125,372,288	\$135,975,655
Total expenses	\$110,764,010	\$121,388,812	\$129,155,661
Uncompensated Care Cost	\$3,316,283	\$3,459,632	\$4,032,625
Uncompensated care % of total expenses	3.0%	2.9%	3.1%
Average Managed Care Discounts	28%	27%	27%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.51	0.51	0.50
Medicare Payment to Cost	0.87	0.85	0.88
Medicaid Payment to Cost	0.72	0.68	0.73
Private Payment to Cost	1.44	1.43	1.45

### FINANCIAL MEASURES

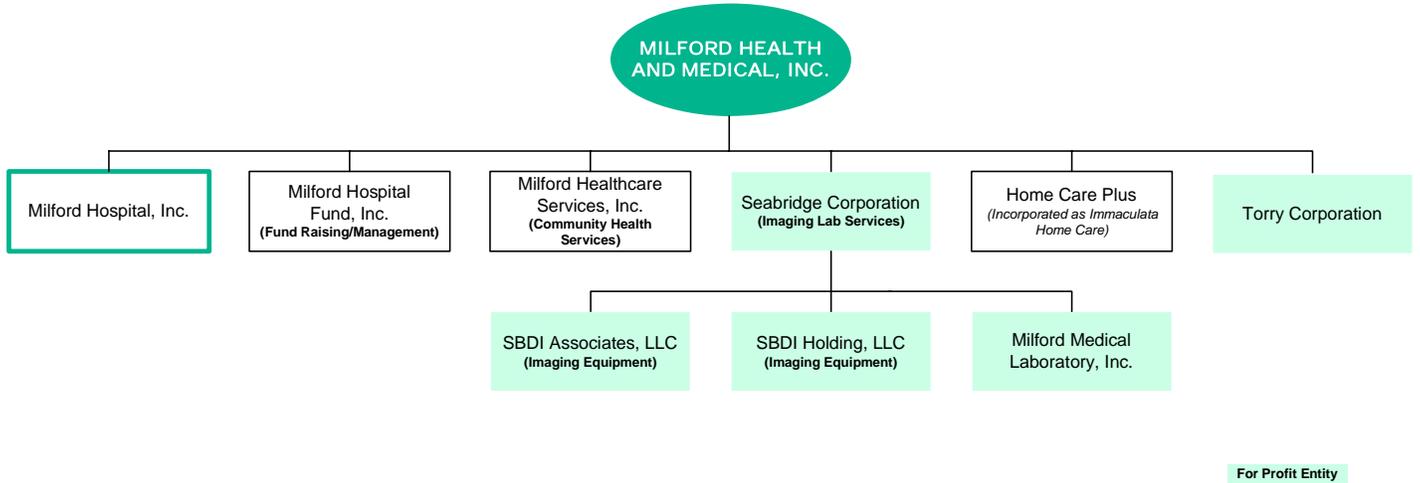
	2003	2004	2005
Days of expenses in accounts payable	45	38	41
Days cash on hand	99	99	108
Days of revenue in accounts receivable	39	44	39
Equity financing ratio	27%	32%	32%

### UTILIZATION MEASURES

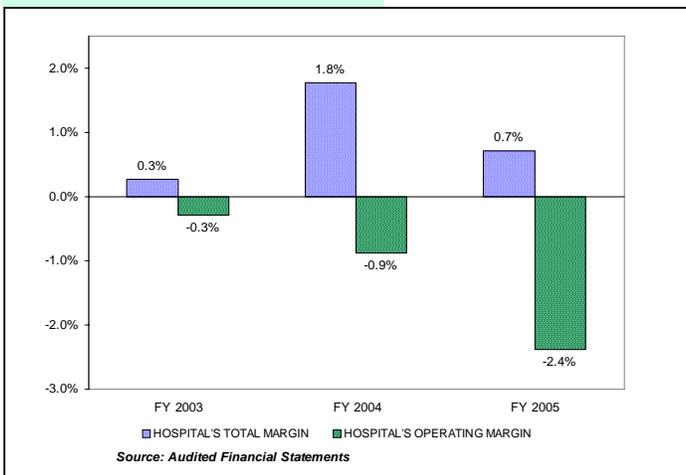
	2003	2004	2005
Patient Days	36,900	41,260	42,903
Discharges	8,765	9,045	9,866
ALOS	4.2	4.6	4.3
Staffed Beds	114	136	136
Licensed Beds	109	142	142
Occupancy of staffed beds	88%	83%	86%
Occupancy of licensed beds	93%	79%	83%
FTE's	768	832	851

## MILFORD HOSPITAL

Milford Hospital, founded in 1920, is located in Milford and primarily serves the residents of Milford and West Haven. Milford Hospital's parent corporation is Milford Health & Medical, Incorporated. Reported below is a chart indicating all of the affiliates of Milford Health, and Medical Incorporated, three years of total margins and operating margins and FY 2005 CON activity for the Milford Hospital.



### HOSPITAL MARGINS

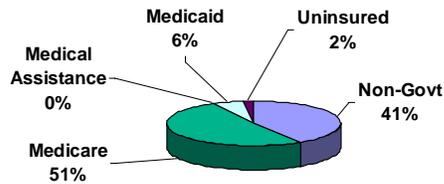


### CON ACTIVITY

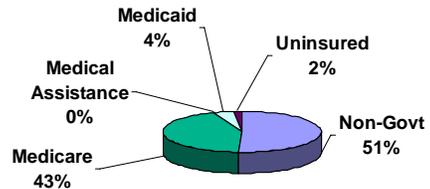
- Relocation of Urgent Care Center for \$583,230.
- Construction of office building for \$3,343,000.

**KEY RESULTS - MILFORD HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$65,558,489	\$66,497,537	\$65,246,512
Health System	\$67,441,508	\$69,189,625	\$71,433,462

**REVENUE & EXPENSE SUMMARY**

	2003	2004	2005
Net patient revenue	\$57,737,766	\$60,738,063	\$66,020,198
Total expenses	\$58,676,867	\$61,817,119	\$68,147,911
Uncompensated Care Cost	\$1,092,224	\$1,298,229	\$1,189,265
Uncompensated care % of total expenses	1.9%	2.1%	1.7%
Average Managed Care Discounts	52%	55%	53%

**COST DATA**

	2003	2004	2005
Ratio of cost to charges	0.39	0.35	0.37
Medicare Payment to Cost	0.80	0.80	0.82
Medicaid Payment to Cost	0.90	0.63	0.68
Private Payment to Cost	1.22	1.25	1.21

**FINANCIAL MEASURES**

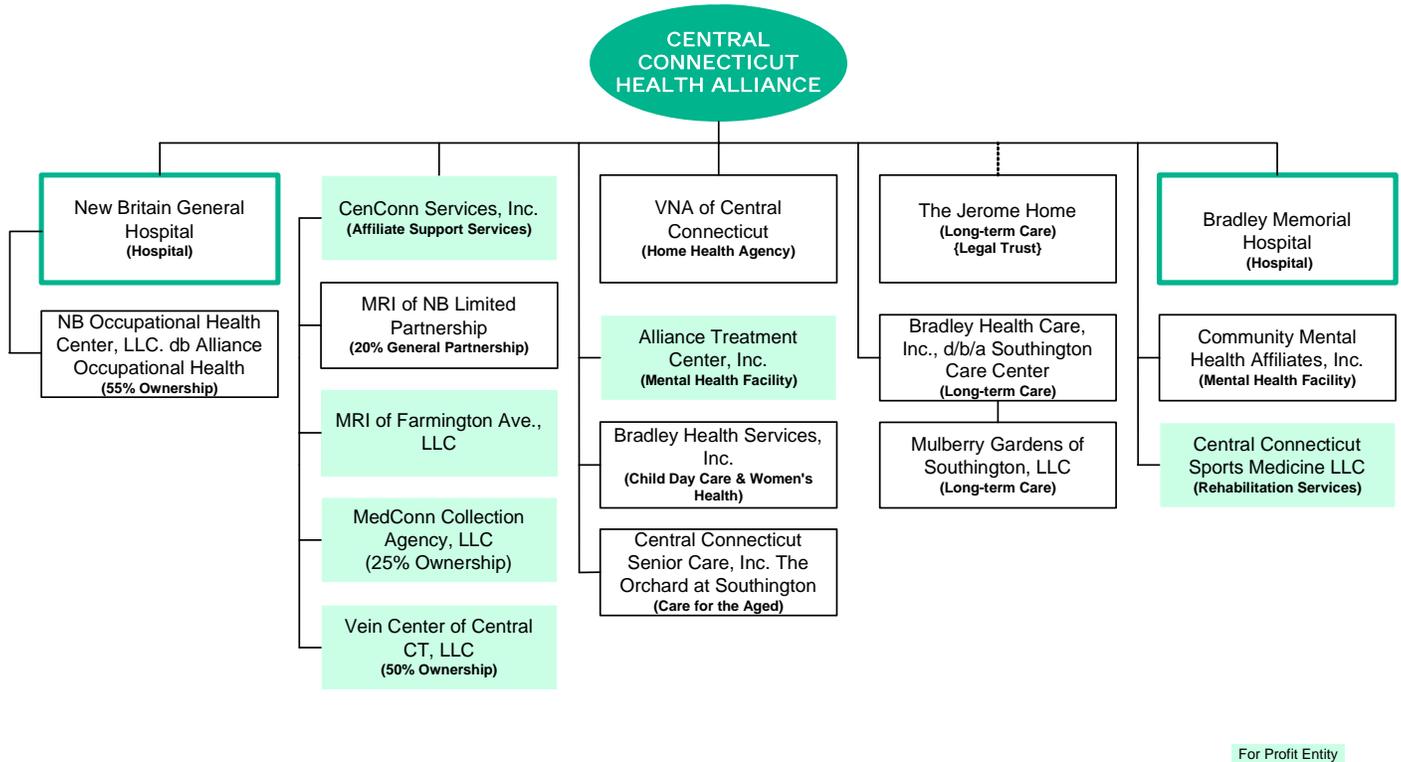
	2003	2004	2005
Days of expenses in accounts payable	77	76	71
Days cash on hand	118	103	41
Days of revenue in accounts receivable	43	36	46
Equity financing ratio	69%	69%	69%

**UTILIZATION MEASURES**

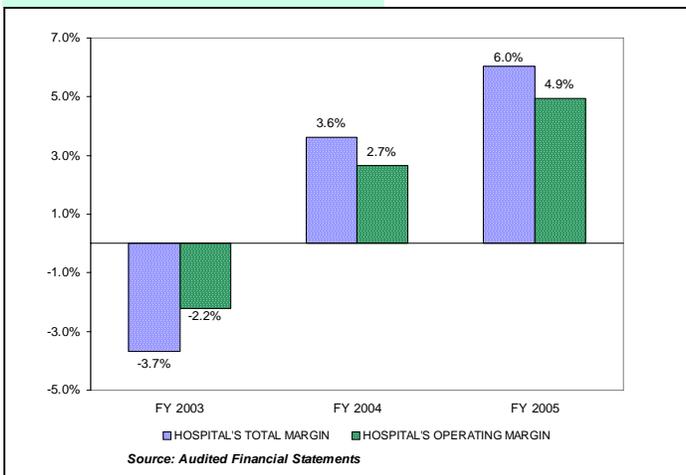
	2003	2004	2005
Patient Days	21,941	22,664	23,273
Discharges	4,700	4,986	5,058
ALOS	4.7	4.5	4.6
Staffed Beds	62	66	68
Licensed Beds	118	118	118
Occupancy of staffed beds	97%	94%	94%
Occupancy of licensed beds	51%	53%	54%
FTE's	505	524	536

## NEW BRITAIN GENERAL HOSPITAL

New Britain General Hospital, founded in 1893, is located in New Britain and primarily serves the residents of Berlin, New Britain, Newington, Plainville, and Southington. New Britain General Hospital's parent corporation is Central Connecticut Health Alliance which also includes Bradley Memorial Hospital. Reported below is a chart indicating all of the affiliates of Central Connecticut Health Alliance, three years of total margins and operating margins and FY 2005 CON activity for the New Britain General Hospital.



### HOSPITAL MARGINS

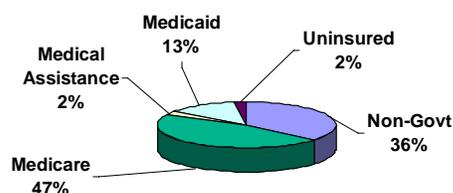


### CON ACTIVITY

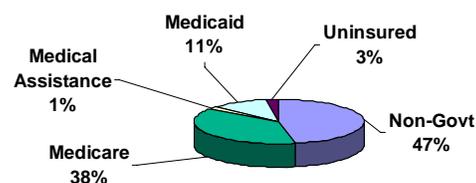
- Establish primary angioplasty service for \$25,633.
- Replacement of cardiac catheterization laboratory equipment for \$1,985,365.
- Consolidation of NBGH and Bradley Memorial Hospital under a single license at no cost.
- Change to Family Planning Clinic Service at no cost.

## KEY RESULTS - NEW BRITAIN GENERAL HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$118,889,530	\$133,469,150	\$155,342,779
Health System	\$166,342,618	\$141,419,517	\$167,952,625

### REVENUE & EXPENSE SUMMARY

Net patient revenue	\$176,121,256	\$199,920,519	\$226,161,628
Total expenses	\$185,808,402	\$199,005,990	\$218,820,627
Uncompensated Care Cost	\$3,481,502	\$4,124,844	\$4,836,816
Uncompensated care % of total expenses	1.9%	2.1%	2.2%
Average Managed Care Discounts	34%	44%	44%

### COST DATA

Ratio of cost to charges	0.56	0.41	0.39
Medicare Payment to Cost	0.89	0.86	0.86
Medicaid Payment to Cost	0.75	0.86	0.88
Private Payment to Cost	1.14	1.29	1.35

### FINANCIAL MEASURES

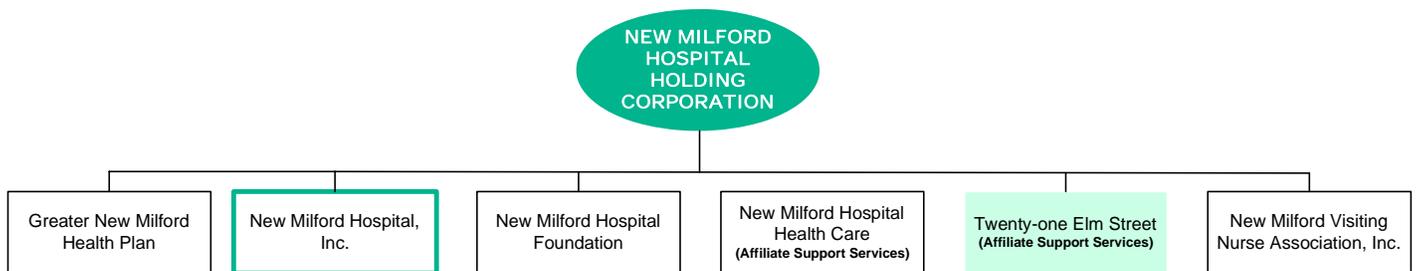
Days of expenses in accounts payable	70	70	67
Days cash on hand	21	42	64
Days of revenue in accounts receivable	38	37	37
Equity financing ratio	39%	42%	45%

### UTILIZATION MEASURES

Patient Days	66,712	68,618	75,269
Discharges	16,172	16,702	17,610
ALOS	4.1	4.1	4.3
Staffed Beds	269	272	290
Licensed Beds	362	362	362
Occupancy of staffed beds	68%	69%	71%
Occupancy of licensed beds	50%	52%	57%
FTE's	1,820	1,733	1,692

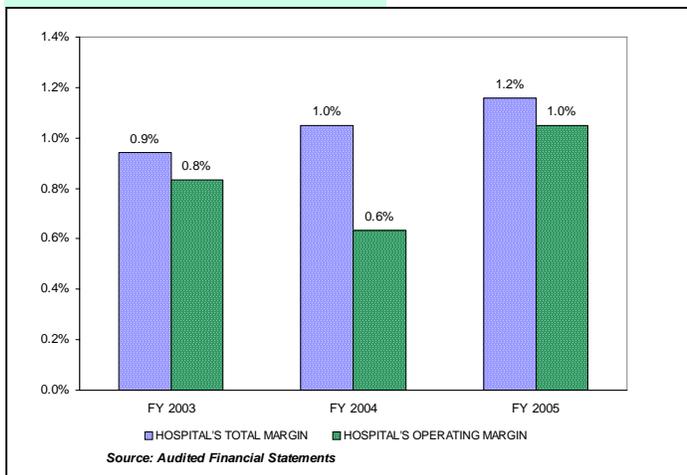
## NEW MILFORD HOSPITAL

New Milford Hospital, founded in 1921, is located in New Milford and primarily serves the residents of Bridgewater, Kent, New Milford, Roxbury, Sherman, Washington and some towns in New York State. New Milford Hospital's parent corporation is New Milford Hospital Holding Corporation. The Hospital is also an affiliate of the New York Presbyterian Healthcare System. Reported below is a chart indicating all of the affiliates of New Milford Hospital Holding Corporation, three years of total margins and operating margins and FY 2005 CON activity for New Milford Hospital.



For Profit Entity

### HOSPITAL MARGINS

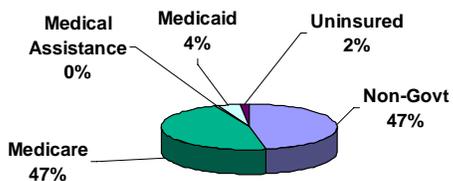


### CON ACTIVITY

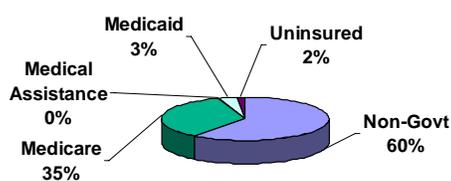
- Establish lithotripsy service at no cost.

**KEY RESULTS - NEW MILFORD HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$49,642,464	\$49,426,530	\$57,554,691
Health System	\$49,642,464	\$50,923,607	\$59,406,916

**REVENUE & EXPENSE SUMMARY**

Net patient revenue	\$57,046,998	\$62,775,301	\$72,060,538
Total expenses	\$57,081,916	\$62,707,293	\$71,585,575
Uncompensated Care Cost	\$682,612	\$843,207	\$1,411,937
Uncompensated care % of total expenses	1.2%	1.3%	2.0%
Average Managed Care Discounts	40%	41%	42%

**COST DATA**

Ratio of cost to charges	0.46	0.46	0.43
Medicare Payment to Cost	0.76	0.79	0.74
Medicaid Payment to Cost	0.58	0.56	0.77
Private Payment to Cost	1.28	1.26	1.29

**FINANCIAL MEASURES**

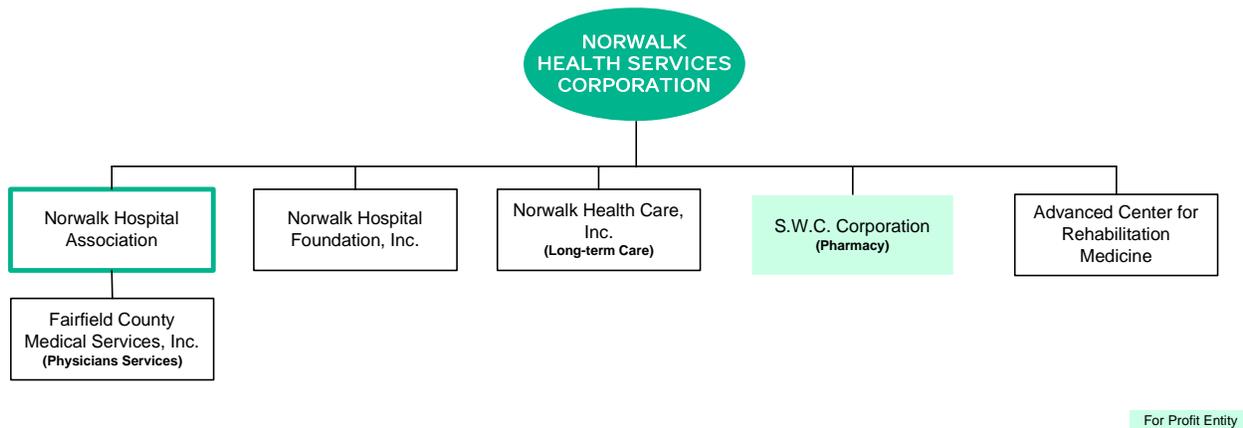
Days of expenses in accounts payable	65	63	65
Days cash on hand	6	9	17
Days of revenue in accounts receivable	45	45	46
Equity financing ratio	68%	62%	58%

**UTILIZATION MEASURES**

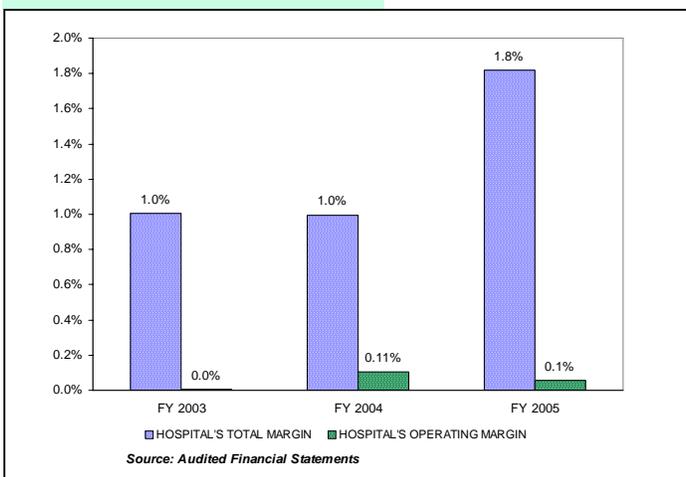
Patient Days	14,194	14,352	14,747
Discharges	3,221	3,339	3,395
ALOS	4.4	4.3	4.3
Staffed Beds	72	72	72
Licensed Beds	95	95	95
Occupancy of staffed beds	54%	55%	55%
Occupancy of licensed beds	41%	41%	42%
FTE's	443	463	486

## NORWALK HOSPITAL

Norwalk Hospital, founded in 1893, is located in Norwalk and primarily serves the residents of New Canaan, Norwalk, Weston, Westport, and Wilton. Norwalk Hospital's parent corporation is Norwalk Health Services Corporation. Reported below is a chart indicating all of the affiliates of Norwalk Health Services Corporation, three years of total margins and operating margins and FY 2005 CON activity for Norwalk Hospital.



### HOSPITAL MARGINS

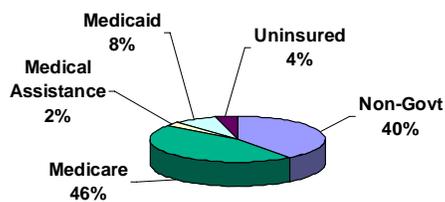


### CON ACTIVITY

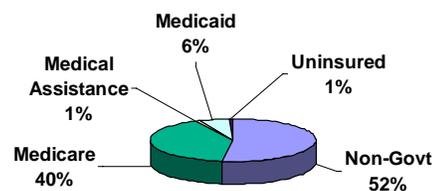
- Purchase/install replacement equipment for Information Systems (ERP) for \$1,154,000.
- Closure of The Westport Clinic at no cost.
- Replace and automate clinical chemistry laboratory equipment for \$1,200,000.
- Building repairs and maintenance at a cost of \$5,200,00.
- Renovation of lobby for \$4,300,000.
- Renovation of Obstetrical Unit for \$800,000.
- Renovations to the Radiology Department and new equipment for \$800,000.
- Acquire use of a second PET scanner and upgrade both to PET/CT - date extension.
- Renovation and expansion of Sleep Center Program for \$3,600,000.

## KEY RESULTS - NORWALK HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$133,696,897	\$143,518,697	\$142,075,447
Health System	\$164,381,510	\$176,345,808	\$176,802,787

### REVENUE & EXPENSE SUMMARY

Net patient revenue	\$195,396,000	\$210,451,295	\$222,682,142
Total expenses	\$199,703,823	\$214,611,202	\$226,588,767
Uncompensated Care Cost	\$6,382,526	\$8,486,001	\$8,642,947
Uncompensated care % of total expenses	3.2%	4.0%	3.8%
Average Managed Care Discounts	28%	26%	27%

### COST DATA

Ratio of cost to charges	0.59	0.57	0.55
Medicare Payment to Cost	0.92	0.87	0.87
Medicaid Payment to Cost	0.67	0.71	0.71
Private Payment to Cost	1.21	1.25	1.30

### FINANCIAL MEASURES

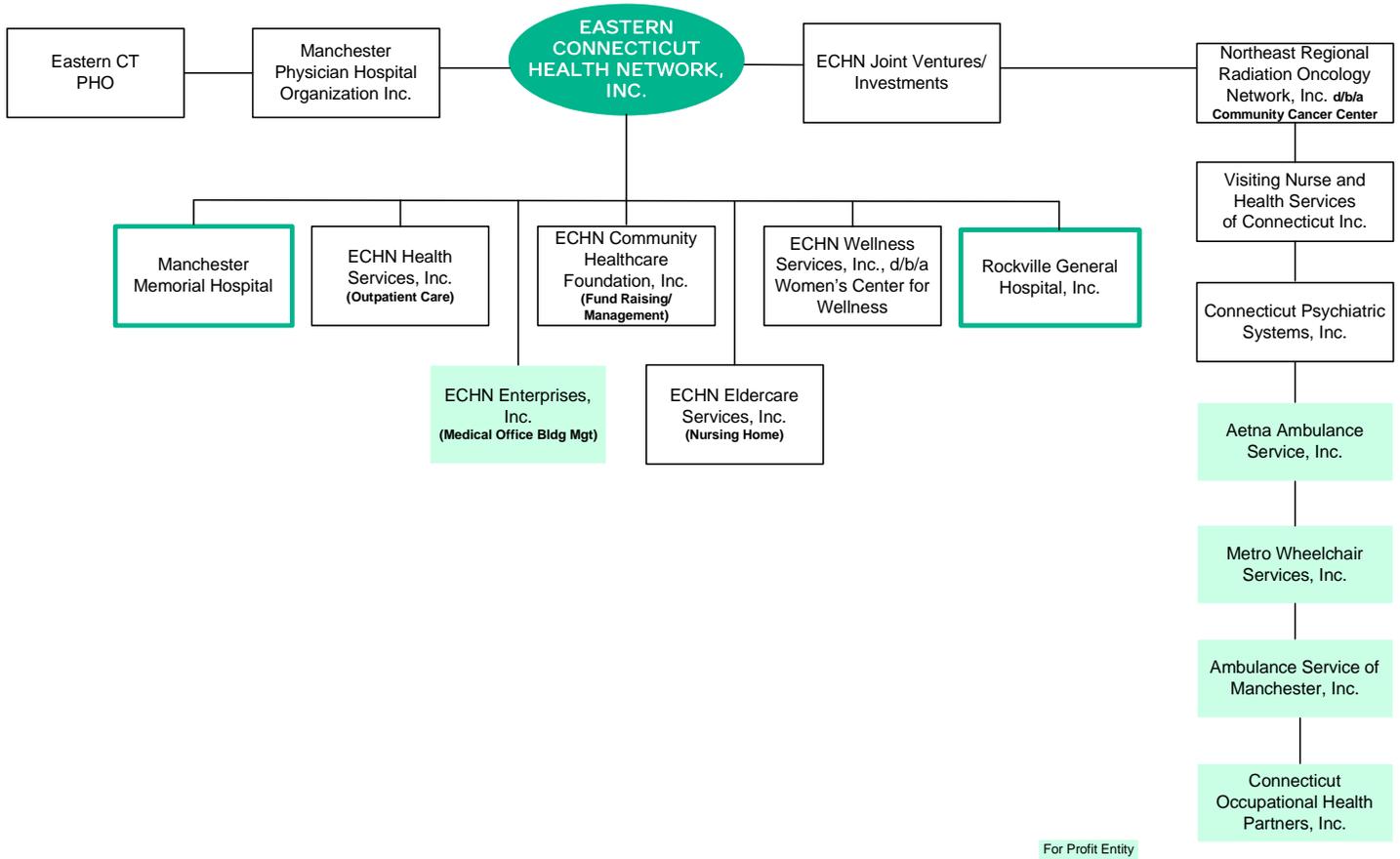
Days of expenses in accounts payable	89	74	66
Days cash on hand	11	17	19
Days of revenue in accounts receivable	44	37	37
Equity financing ratio	46%	48%	47%

### UTILIZATION MEASURES

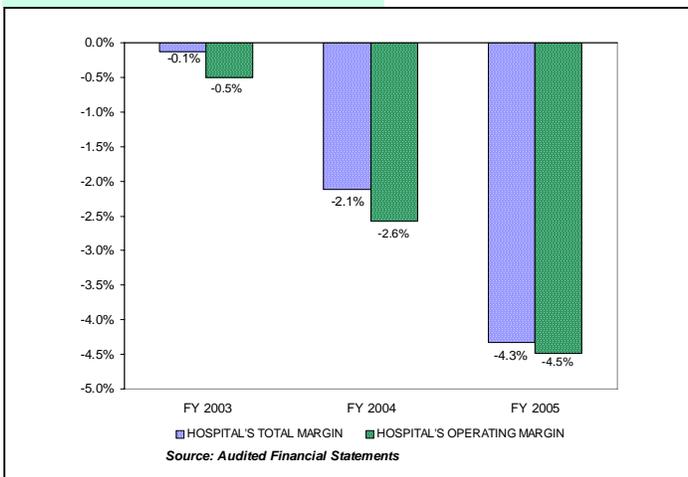
Patient Days	83,123	81,868	82,569
Discharges	15,296	15,729	15,523
ALOS	5.4	5.2	5.3
Staffed Beds	231	229	230
Licensed Beds	366	366	366
Occupancy of staffed beds	98%	98%	98%
Occupancy of licensed beds	62%	61%	62%
FTE's	1,556	1,559	1,581

# ROCKVILLE GENERAL HOSPITAL

Rockville General Hospital, founded in 1921, is located in Vernon and primarily serves the residents of Ellington, Tolland, and Vernon. Rockville General Hospital's parent corporation is Eastern Connecticut Health Network Incorporated (ECHN) which is also the parent corporation of Manchester Memorial Hospital. Reported below is a chart indicating all of the affiliates of Eastern Connecticut Health Network Incorporated, three years of total margins and operating margins and FY 2005 CON activity for the Rockville General Hospital.



## HOSPITAL MARGINS

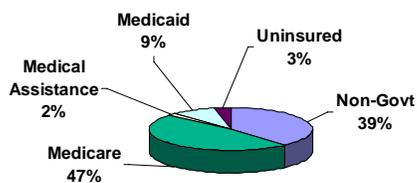


## CON ACTIVITY

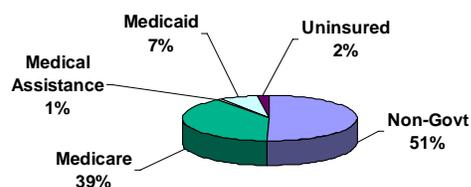
- Replace existing angiography equipment for \$499,488.

## KEY RESULTS - ROCKVILLE GENERAL HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$50,359,916	\$48,498,503	\$43,913,714
Health System	\$51,600,791	\$50,121,091	\$43,913,714

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$54,438,264	\$50,753,034	\$50,242,156
Total expenses	\$56,704,557	\$55,557,059	\$55,812,291
Uncompensated Care Cost	\$938,700	\$1,098,526	\$1,280,030
Uncompensated care % of total expenses	1.7%	2.0%	2.3%
Average Managed Care Discounts	49%	44%	47%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.45	0.45	0.42
Medicare Payment to Cost	0.91	0.80	0.76
Medicaid Payment to Cost	0.71	0.74	0.72
Private Payment to Cost	1.13	1.17	1.20

### FINANCIAL MEASURES

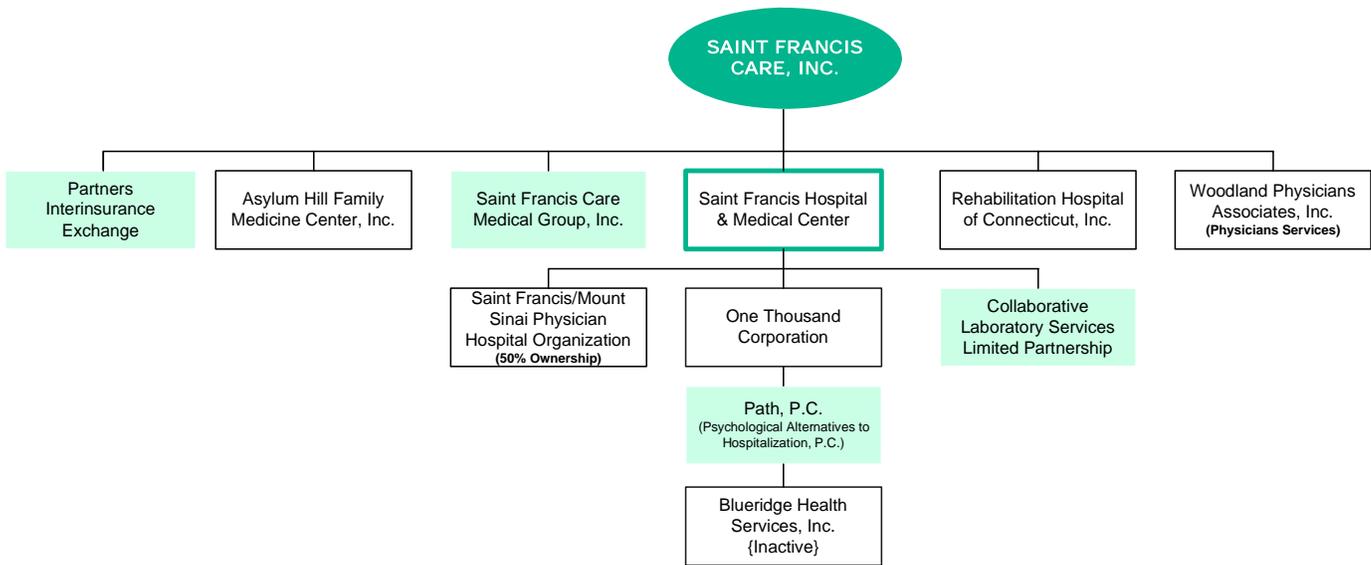
	2003	2004	2005
Days of expenses in accounts payable	89	70	62
Days cash on hand	12	4	19
Days of revenue in accounts receivable	59	53	51
Equity financing ratio	56%	45%	41%

### UTILIZATION MEASURES

	2003	2004	2005
Patient Days	17,567	16,097	15,620
Discharges	4,648	4,137	3,971
ALOS	3.8	3.9	3.9
Staffed Beds	72	66	66
Licensed Beds	118	118	118
Occupancy of staffed beds	67%	67%	65%
Occupancy of licensed beds	41%	37%	36%
FTE's	537	626	440

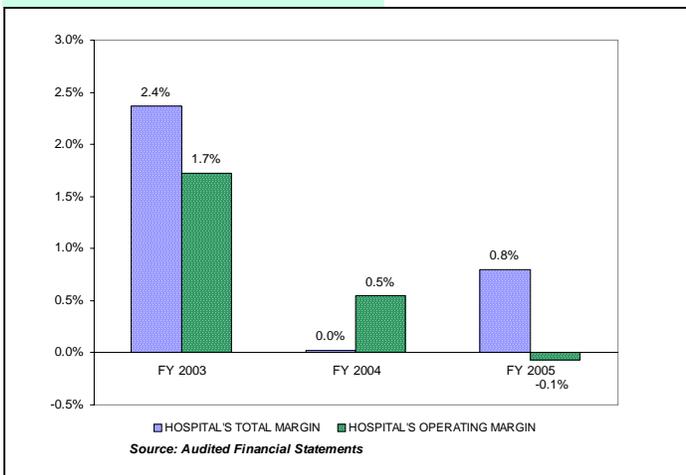
## SAINT FRANCIS HOSPITAL AND MEDICAL CENTER

St. Francis Hospital and Medical Center, founded in 1897, is located in Hartford and primarily serves the residents of Bloomfield, East Granby, East Hartford, East Windsor, Enfield, Granby, Hartford, Hartland, Manchester, Newington, Rocky Hill, Simsbury, Suffield, West Hartford, Wethersfield, Windsor, and Windsor Locks. It is the largest Catholic hospital in New England. St. Francis Hospital and Medical Center's parent corporation is St. Francis Care. Reported below is a chart indicating all of the affiliates of St. Francis Care, three years of total margins and operating margins and FY 2005 CON activity for St. Francis Hospital and Medical Center.



For Profit Services

### HOSPITAL MARGINS

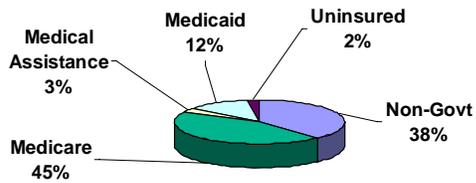


### CON ACTIVITY

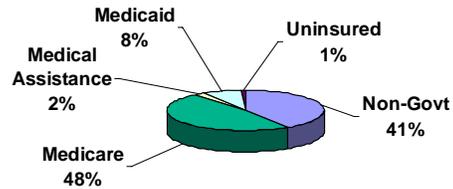
- Constructions of a new parking garage for \$11,332,853.
- Medical Office building in West Hartford at no cost.
- Acquisition of CyberKnife® for \$5,231,282.
- Formation of joint venture for diagnostic imaging services for \$460,500.
- Transfer of Teamworks to other providers at no cost.
- Replacement of angiography laboratory equipment for \$1,636,830.
- Replacement of Cancer Center simulator for \$678,296.

**KEY RESULTS - SAINT FRANCIS HOSPITAL AND MEDICAL CENTER**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$257,103,887	\$264,166,481	\$261,919,250
Health System	\$278,085,084	\$285,130,146	\$290,790,105

**REVENUE & EXPENSE SUMMARY**

Net patient revenue	\$373,811,844	\$409,563,434	\$429,124,912
Total expenses	\$372,625,163	\$409,501,999	\$428,039,476
Uncompensated Care Cost	\$7,186,572	\$9,384,359	\$9,786,892
Uncompensated care % of total expenses	1.9%	2.3%	2.3%
Average Managed Care Discounts	43%	46%	47%

**COST DATA**

Ratio of cost to charges	0.56	0.52	0.50
Medicare Payment to Cost	1.13	1.09	1.09
Medicaid Payment to Cost	0.75	0.74	0.69
Private Payment to Cost	1.04	1.06	1.08

**FINANCIAL MEASURES**

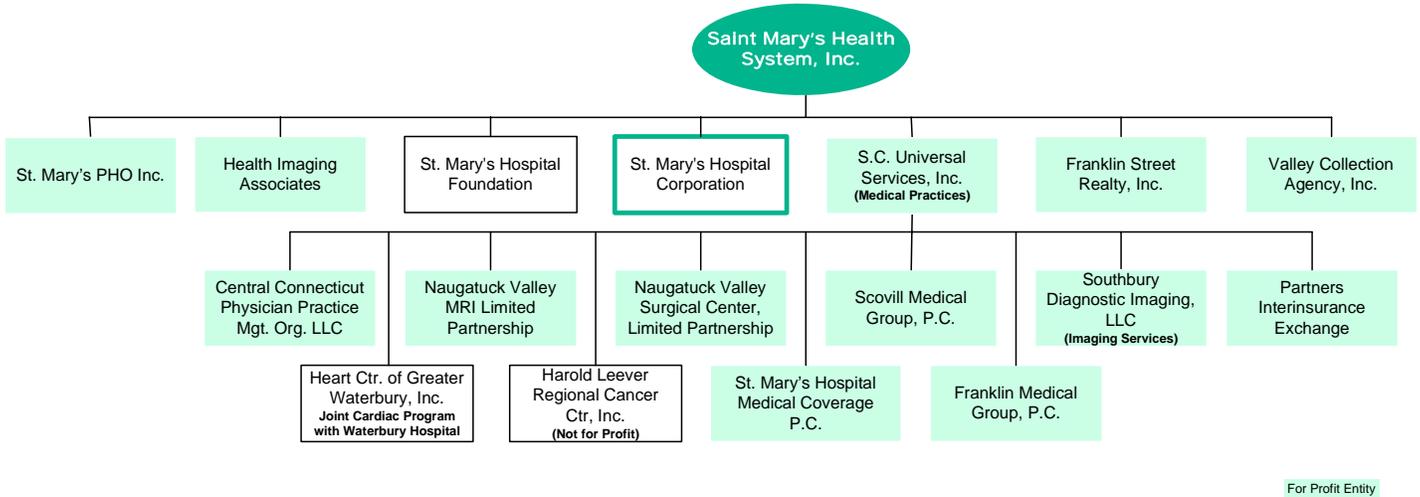
Days of expenses in accounts payable	36	29	32
Days cash on hand	10	16	13
Days of revenue in accounts receivable	43	43	45
Equity financing ratio	38%	39%	37%

**UTILIZATION MEASURES**

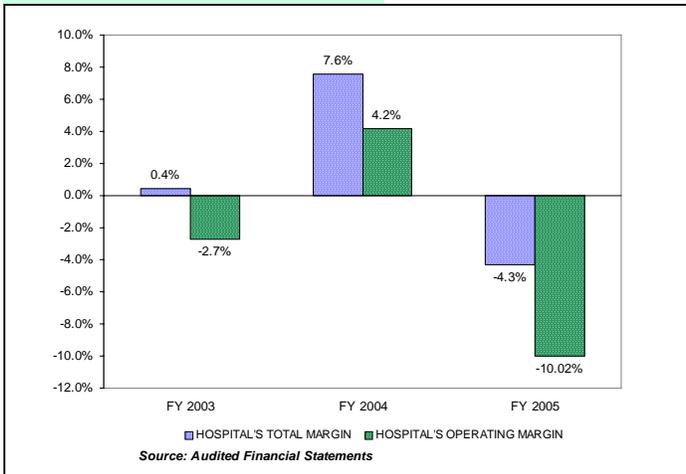
Patient Days	157,253	163,640	162,087
Discharges	31,554	32,520	32,175
ALOS	5.0	5.0	5.0
Staffed Beds	542	576	564
Licensed Beds	682	682	682
Occupancy of staffed beds	79%	78%	79%
Occupancy of licensed beds	63%	65%	65%
FTE's	3,181	3,162	3,303

# SAINT MARY'S HOSPITAL

Saint Mary's Hospital, founded in 1907, is located in Waterbury and primarily serves the residents of Naugatuck, Prospect, Waterbury, and Wolcott. St. Mary's Hospital's parent corporation is Saint Mary's Health System Incorporated. Reported below is a chart indicating all of the affiliates of Saint Mary's Health System Incorporated, three years of total margins and operating margins and FY 2005 CON activity for St. Mary's Hospital.



## HOSPITAL MARGINS

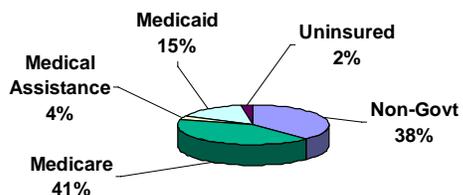


## CON ACTIVITY

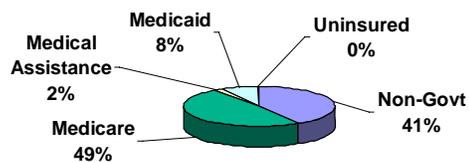
- Renovation of the Emergency Department for \$2,750,000.
- Relocation of Occupational Medicine Services for \$245,000.
- Proposal to become part-owner of Collaborative Lab Services, LLC at no cost.
- Replace existing CT and mobile PET with a fixed PET/CT for \$932,278.
- Replace interventional radiology equipment for \$1,255,201.
- Upgraded CT scanner for \$397,840.
- Bylaw changes for Slocum Corporation and St. Mary's at no cost.

**KEY RESULTS - SAINT MARY'S HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$12,850,629	\$26,430,000	\$23,760,000
Health System	\$10,146,000	\$16,197,000	\$8,469,000

**REVENUE & EXPENSE SUMMARY**

Net patient revenue	\$125,352,263	\$133,804,283	\$125,436,022
Total expenses	\$134,206,036	\$131,826,649	\$144,760,936
Uncompensated Care Cost	\$2,850,150	\$3,342,956	\$4,587,219
Uncompensated care % of total expenses	2.1%	2.5%	3.2%
Average Managed Care Discounts	56%	50%	53%

**COST DATA**

Ratio of cost to charges	0.44	0.44	0.47
Medicare Payment to Cost	1.03	1.12	1.03
Medicaid Payment to Cost	0.85	0.80	0.47
Private Payment to Cost	0.95	1.08	0.96

**FINANCIAL MEASURES**

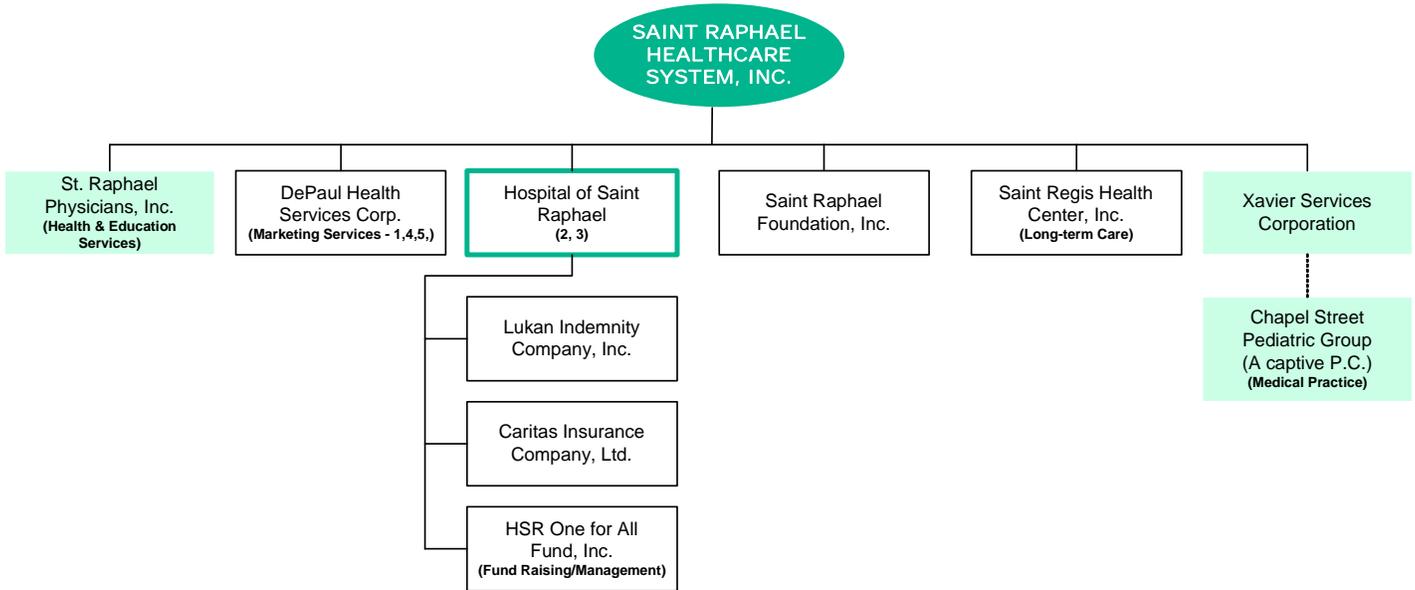
Days of expenses in accounts payable	76	69	71
Days cash on hand	5	5	3
Days of revenue in accounts receivable	56	60	48
Equity financing ratio	-2%	7%	3%

**UTILIZATION MEASURES**

Patient Days	53,009	54,510	55,099
Discharges	12,123	12,097	12,268
ALOS	4.4	4.5	4.5
Staffed Beds	161	168	169
Licensed Beds	379	379	379
Occupancy of staffed beds	90%	89%	89%
Occupancy of licensed beds	38%	39%	40%
FTE's	1,290	1,232	1,195

## HOSPITAL OF SAINT RAPHAEL

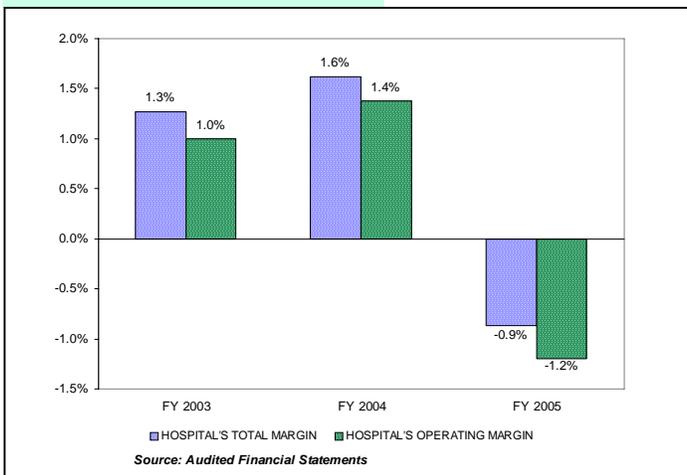
The Hospital of Saint Raphael, founded in 1907, is located in New Haven and primarily serves the residents of Branford, East Haven, Hamden, New Haven, North Branford, North Haven, Orange, West Haven, and Woodbridge. The Hospital of St. Raphael's parent corporation is St. Raphael's Health Care System Incorporated. Reported below is a chart indicating all of the affiliates of the St. Raphael's Health Care System Incorporated, three years of total margins and operating margins and FY 2005 CON activity for the Hospital of St. Raphael.



Key  
 1 - MRI Partnership  
 2 - St. Raphael Physician Hospital Organization - For Profit  
 3 - CT Hospital Laboratory Network, LLC - For Profit  
 4 - Dialysis Venture  
 5 - Hamden Surgery Center

For Profit Entity

### HOSPITAL MARGINS

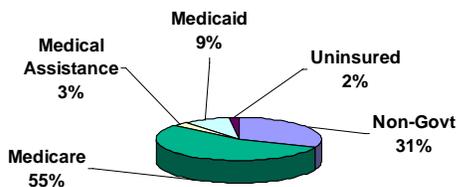


### CON ACTIVITY

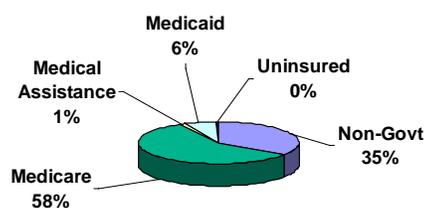
- Build-out of Verdi Low Roof Building to increase bed capacity for \$14,400,344.
- Replace cardiac catheterization equipment for \$1,233,293.
- Acquisition of three replacement mammography units for \$967,065.
- Provide senior assessment services in the town of Madison at no cost.
- Acquisition of da Vinci® Surgical System for \$1,500,000.
- Replacement of telephone switchgear for \$2,250,000.
- Replacement of Laboratory Information System for \$1,887,500.

## KEY RESULTS - HOSPITAL OF SAINT RAPHAEL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$46,424,296	\$57,012,214	\$36,343,267
Health System	\$67,283,000	\$83,604,000	\$70,073,000

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$322,223,417	\$350,335,904	\$366,466,590
Total expenses	\$318,705,692	\$345,057,886	\$369,902,759
Uncompensated Care Cost	\$7,262,583	\$6,767,499	\$7,085,735
Uncompensated care % of total expenses	2.3%	2.0%	1.9%
Average Managed Care Discounts	50%	49%	56%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.40	0.38	0.39
Medicare Payment to Cost	0.98	1.02	1.03
Medicaid Payment to Cost	0.86	0.67	0.70
Private Payment to Cost	1.19	1.24	1.11

### FINANCIAL MEASURES

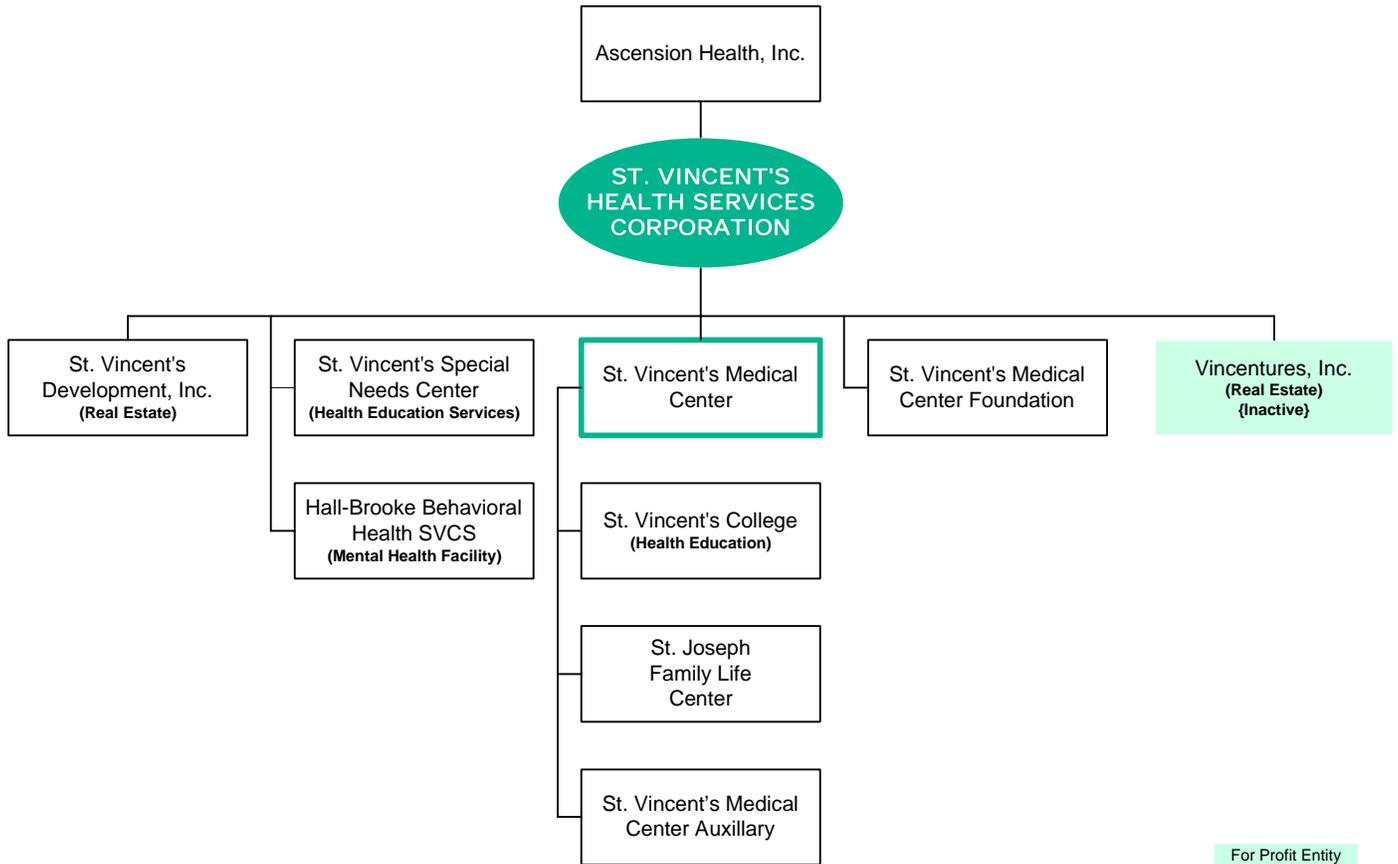
	2003	2004	2005
Days of expenses in accounts payable	80	79	65
Days cash on hand	58	43	23
Days of revenue in accounts receivable	37	38	35
Equity financing ratio	11%	14%	5%

### UTILIZATION MEASURES

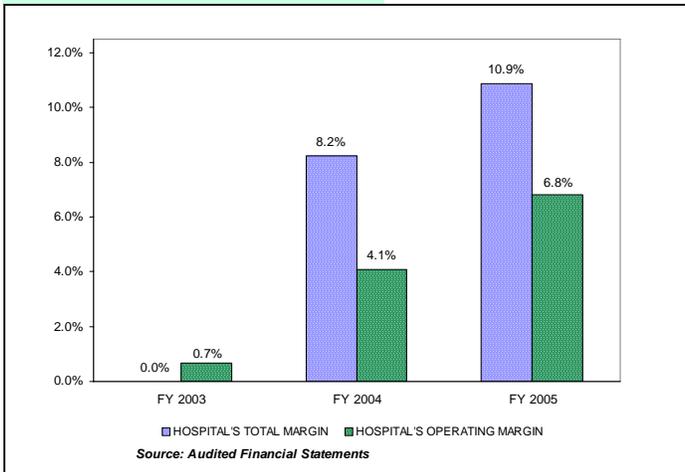
	2003	2004	2005
Patient Days	131,171	142,413	134,509
Discharges	24,548	25,090	24,841
ALOS	5.3	5.7	5.4
Staffed Beds	474	474	474
Licensed Beds	533	533	533
Occupancy of staffed beds	76%	82%	78%
Occupancy of licensed beds	67%	73%	69%
FTE's	2,562	2,697	2,824

## SAINT VINCENT'S MEDICAL CENTER

Saint Vincent's Medical Center, founded in 1903, is located in Bridgeport and primarily serves the residents of Bridgeport, Easton, Fairfield, Monroe, and Trumbull. St. Vincent's Medical Center's parent corporation is St. Vincent's Health Services Corporation. Saint Vincent's is also a member of Ascension Health System, a nationally based Catholic health system. Reported below is a chart indicating all of the affiliates of St. Vincent's Health Services Corporation, three years of total margins and operating margins and FY 2005 CON activity for St. Vincent's Hospital.



### HOSPITAL MARGINS

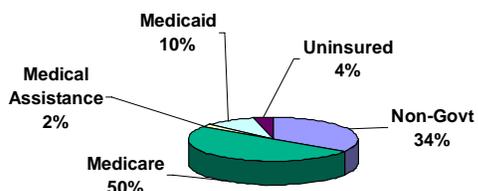


### CON ACTIVITY

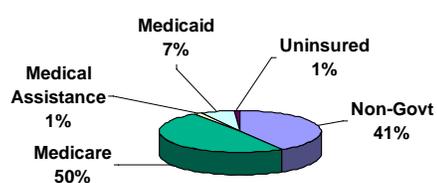
- Acquire use of a second PET scanner and upgraded both to PET/CT - date extension.
- Replace Interventional Suite Radiology equipment - date extension.
- Replace CT Scanners - date extension.
- Replace electrophysiology laboratory equipment for \$1,405,129.
- Establish Monroe Immediate Health Care Center for \$328,150.
- Replace cardiac catheterization laboratory equipment for \$1,843,980.

## KEY RESULTS - SAINT VINCENT'S MEDICAL CENTER

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$212,254,000	\$245,161,000	\$282,061,000
Health System	\$244,476,000	\$286,643,000	\$331,599,000

### REVENUE & EXPENSE SUMMARY

Net patient revenue	\$202,973,161	\$222,832,910	\$248,865,474
Total expenses	\$203,156,948	\$218,456,043	\$235,872,946
Uncompensated Care Cost	\$8,858,193	\$9,329,837	\$9,318,572
Uncompensated care % of total expenses	4.4%	4.3%	4.0%
Average Managed Care Discounts	43%	34%	36%

### COST DATA

Ratio of cost to charges	0.52	0.49	0.47
Medicare Payment to Cost	1.02	1.05	1.04
Medicaid Payment to Cost	0.67	0.67	0.75
Private Payment to Cost	1.12	1.18	1.29

### FINANCIAL MEASURES

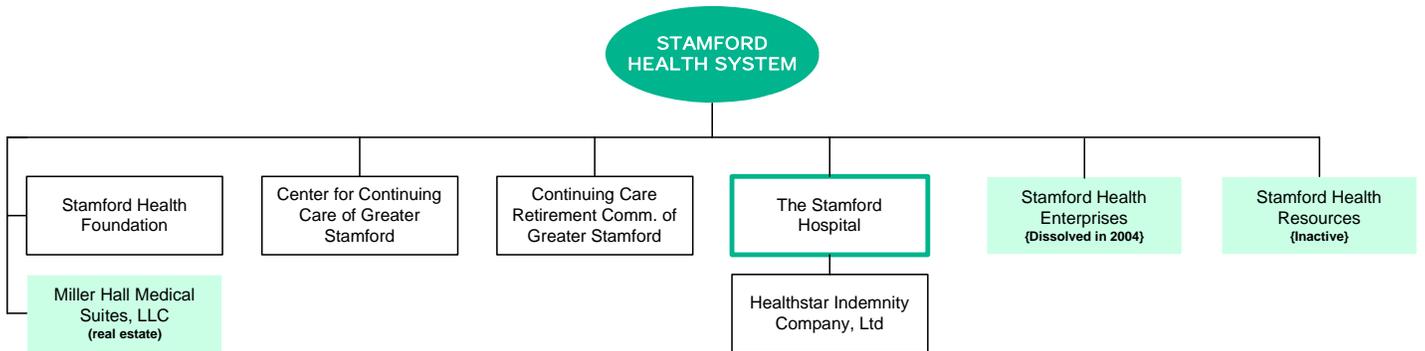
Days of expenses in accounts payable	48	71	72
Days cash on hand	34	8	6
Days of revenue in accounts receivable	44	37	37
Equity financing ratio	62%	66%	64%

### UTILIZATION MEASURES

Patient Days	94,790	99,386	102,074
Discharges	18,237	19,199	19,375
ALOS	5.2	5.2	5.3
Staffed Beds	330	337	348
Licensed Beds	429	444	444
Occupancy of staffed beds	79%	81%	82%
Occupancy of licensed beds	60%	61%	64%
FTE's	1,625	1,566	1,629

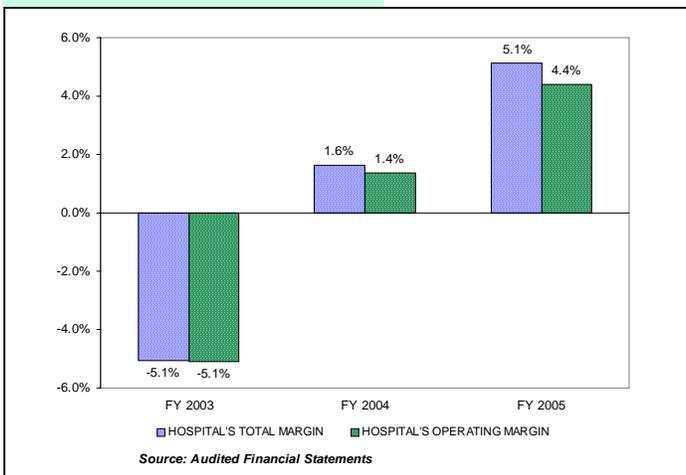
## STAMFORD HOSPITAL

The Stamford Hospital, founded in 1896, is located in Stamford and primarily serves the residents of Darien and Stamford. Stamford Hospital's parent corporation is the Stamford Health System. Reported below is a chart indicating all of the affiliates of the Stamford Health System, three years of total margins and operating margins and FY 2005 CON activity for Stamford Hospital.



For Profit Entity

### HOSPITAL MARGINS

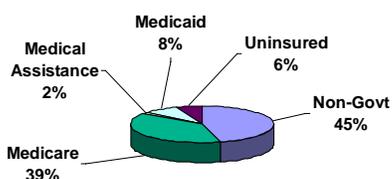


### CON ACTIVITY

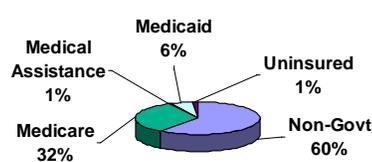
- Health Information System replacement - date extension.
- Replace MRI at Darien Imaging Center - date extension.
- Establishment of cardiac catheterization ablation therapy for \$195,000.
- Relocate and renovate Darien Imaging Center - site change.
- Acquire use of a second PET scanner and upgraded both to PET/CT - date extension.

## KEY RESULTS - STAMFORD HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$73,924,288	\$100,609,937	\$112,271,000
Health System	\$128,522,530	\$140,714,945	\$156,264,000

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$197,179,653	\$228,814,614	\$253,915,565
Total expenses	\$219,930,184	\$234,225,160	\$251,240,588
Uncompensated Care Cost	\$13,064,179	\$13,645,098	\$14,741,386
Uncompensated care % of total expenses	5.9%	5.8%	5.9%
Average Managed Care Discounts	33%	38%	41%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.53	0.45	0.42
Medicare Payment to Cost	0.81	0.85	0.84
Medicaid Payment to Cost	0.53	0.59	0.74
Private Payment to Cost	1.17	1.29	1.35

### FINANCIAL MEASURES

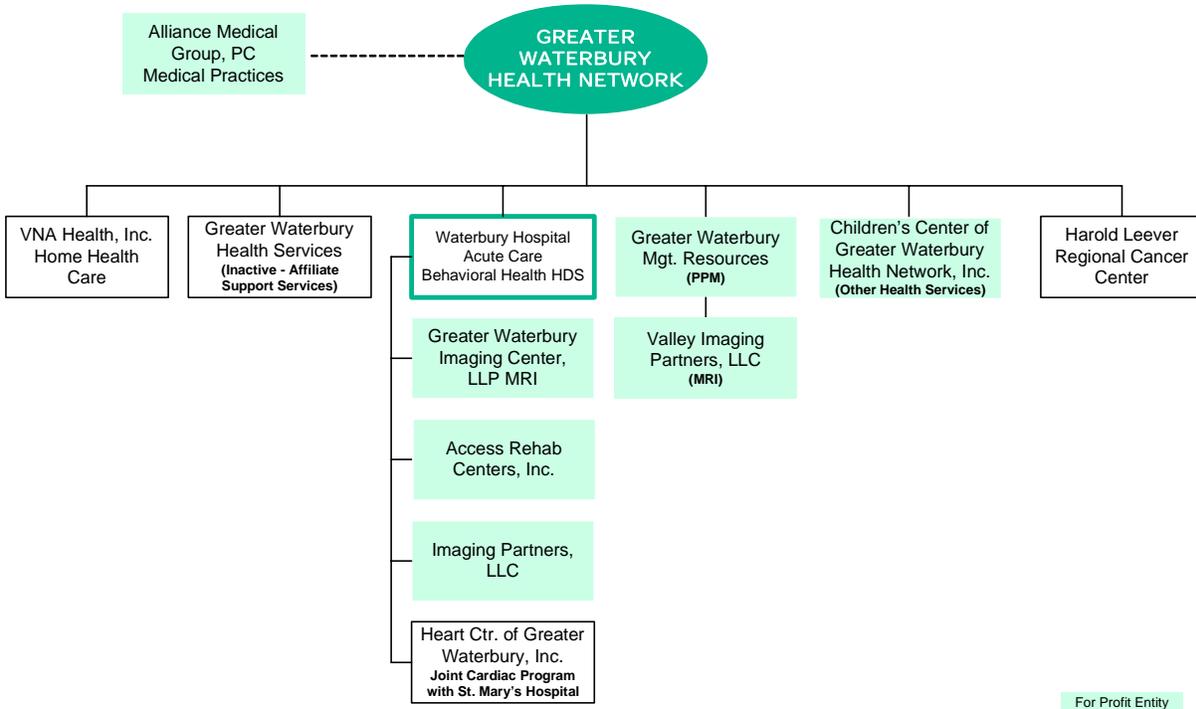
	2003	2004	2005
Days of expenses in accounts payable	71	45	51
Days cash on hand	0	13	24
Days of revenue in accounts receivable	53	42	35
Equity financing ratio	21%	29%	29%

### UTILIZATION MEASURES

	2003	2004	2005
Patient Days	83,131	78,681	79,550
Discharges	17,789	17,281	17,464
ALOS	4.7	4.6	4.6
Staffed Beds	326	321	319
Licensed Beds	330	330	330
Occupancy of staffed beds	70%	67%	68%
Occupancy of licensed beds	69%	65%	66%
FTE's	1,708	1,704	1,755

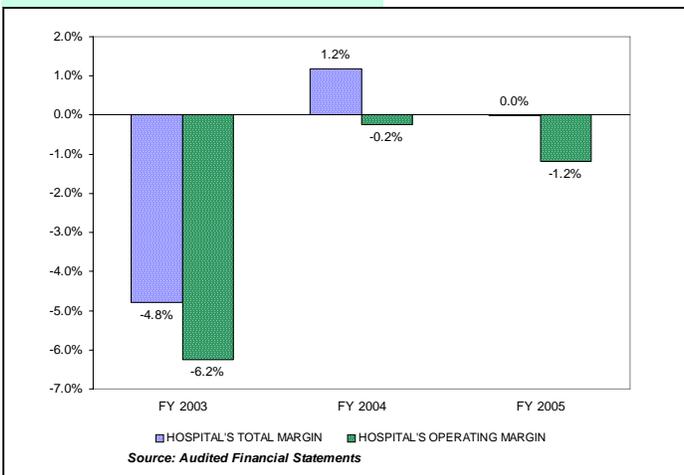
## WATERBURY HOSPITAL

The Waterbury Hospital, opened in 1890, is located in Waterbury and primarily serves the residents of Bethlehem, Middlebury, Naugatuck, Prospect, Southbury, Thomaston, Waterbury, Watertown and Woodbury. Waterbury Hospital's parent corporation is the Greater Waterbury Health Network. Reported below is a chart indicating all of the affiliates of the Greater Waterbury Health Network, three years of total margins and operating margins and FY 2005 CON activity for Waterbury Hospital.



For Profit Entity

### HOSPITAL MARGINS

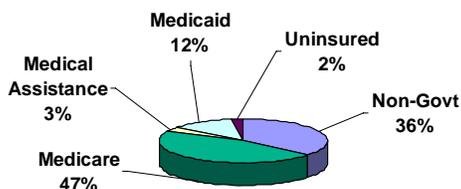


### CON ACTIVITY

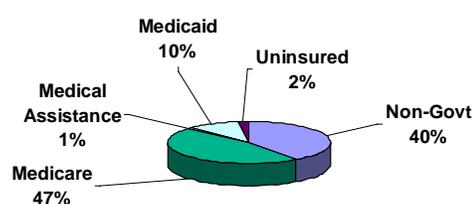
- Increase in authorized expenditure for joint Cardiac Services Program between Hospital and St. Mary's Hospital of \$745,166.
- Increase in authorized expenditure for PET/CT at Harold Leever Cancer Center for \$932,278.

## KEY RESULTS – WATERBURY HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$108,928,359	\$119,504,105	\$126,535,925
Health System	\$147,842,292	\$158,400,874	\$166,079,218

### REVENUE & EXPENSE SUMMARY

	2003	2004	2005
Net patient revenue	\$157,738,658	\$169,536,389	\$180,963,630
Total expenses	\$175,875,432	\$177,640,137	\$192,805,493
Uncompensated Care Cost	\$4,391,352	\$5,125,486	\$4,778,415
Uncompensated care % of total expenses	2.5%	2.9%	2.5%
Average Managed Care Discounts	60%	54%	61%

### COST DATA

	2003	2004	2005
Ratio of cost to charges	0.42	0.36	0.34
Medicare Payment to Cost	0.89	0.95	0.96
Medicaid Payment to Cost	0.68	0.82	0.79
Private Payment to Cost	1.02	1.07	1.06

### FINANCIAL MEASURES

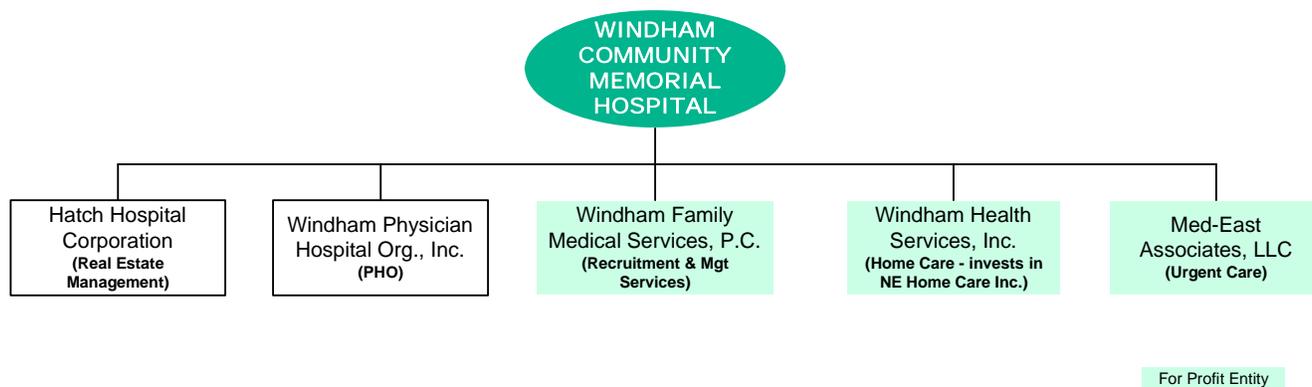
	2003	2004	2005
Days of expenses in accounts payable	49	56	47
Days cash on hand	41	42	34
Days of revenue in accounts receivable	37	37	42
Equity financing ratio	33%	36%	37%

### UTILIZATION MEASURES

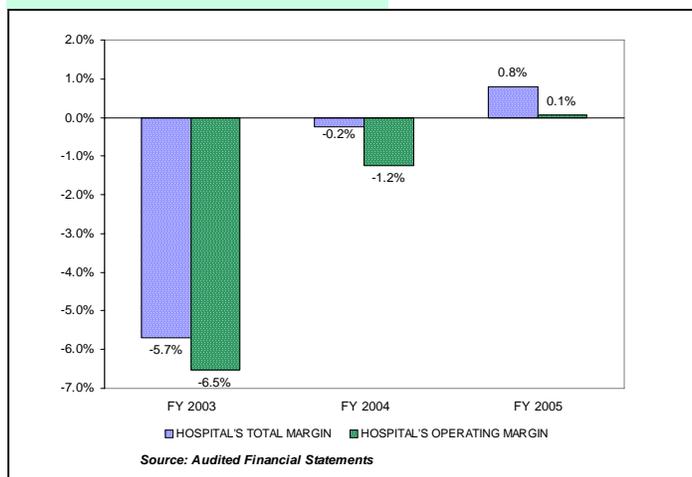
	2003	2004	2005
Patient Days	68,736	68,955	70,665
Discharges	14,770	15,113	15,535
ALOS	4.7	4.6	4.5
Staffed Beds	300	300	288
Licensed Beds	393	393	393
Occupancy of staffed beds	63%	63%	67%
Occupancy of licensed beds	48%	48%	49%
FTE's	1,623	1,607	1,636

## WINDHAM COMMUNITY MEMORIAL HOSPITAL

Windham Community Memorial Hospital, founded in 1908, is located in Willimantic and primarily serves the residents of Ashford, Chaplin, Columbia, Hampton, Lebanon, Mansfield, Scotland, and Windham. Reported below is a chart indicating all of the affiliates of the Windham Community Memorial Hospital, three years of total margins and operating margins and FY 2005 CON activity for the Windham Community Memorial Hospital.



### HOSPITAL MARGINS

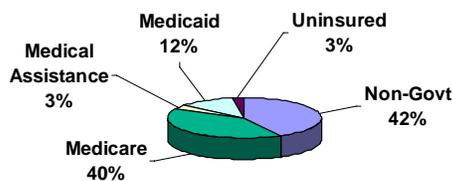


### CON ACTIVITY

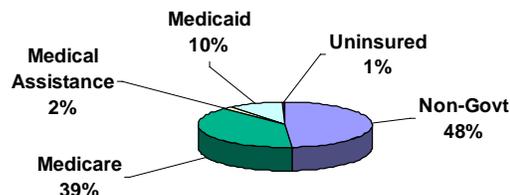
- Extension of date for completion of master plan facilities renovations with no cost.

**KEY RESULTS - WINDHAM COMMUNITY MEMORIAL HOSPITAL**

**Hospital Gross Revenue Payer Mix**



**Hospital Net Revenue Payer Mix**



**NET ASSETS**

	2003	2004	2005
Hospital	\$14,590,439	\$12,634,329	\$5,369,767
Health System	\$14,590,439	\$12,634,329	\$5,369,767

**REVENUE & EXPENSE SUMMARY**

	2003	2004	2005
Net patient revenue	\$56,986,572	\$62,459,244	\$63,256,575
Total expenses	\$61,734,401	\$63,867,156	\$63,742,310
Uncompensated Care Cost	\$2,359,354	\$2,089,675	\$1,983,659
Uncompensated care % of total expenses	3.8%	3.3%	3.1%
Average Managed Care Discounts	54%	51%	54%

**COST DATA**

	2003	2004	2005
Ratio of cost to charges	0.43	0.41	0.40
Medicare Payment to Cost	0.89	0.95	0.96
Medicaid Payment to Cost	0.75	0.78	0.83
Private Payment to Cost	1.04	1.11	1.14

**FINANCIAL MEASURES**

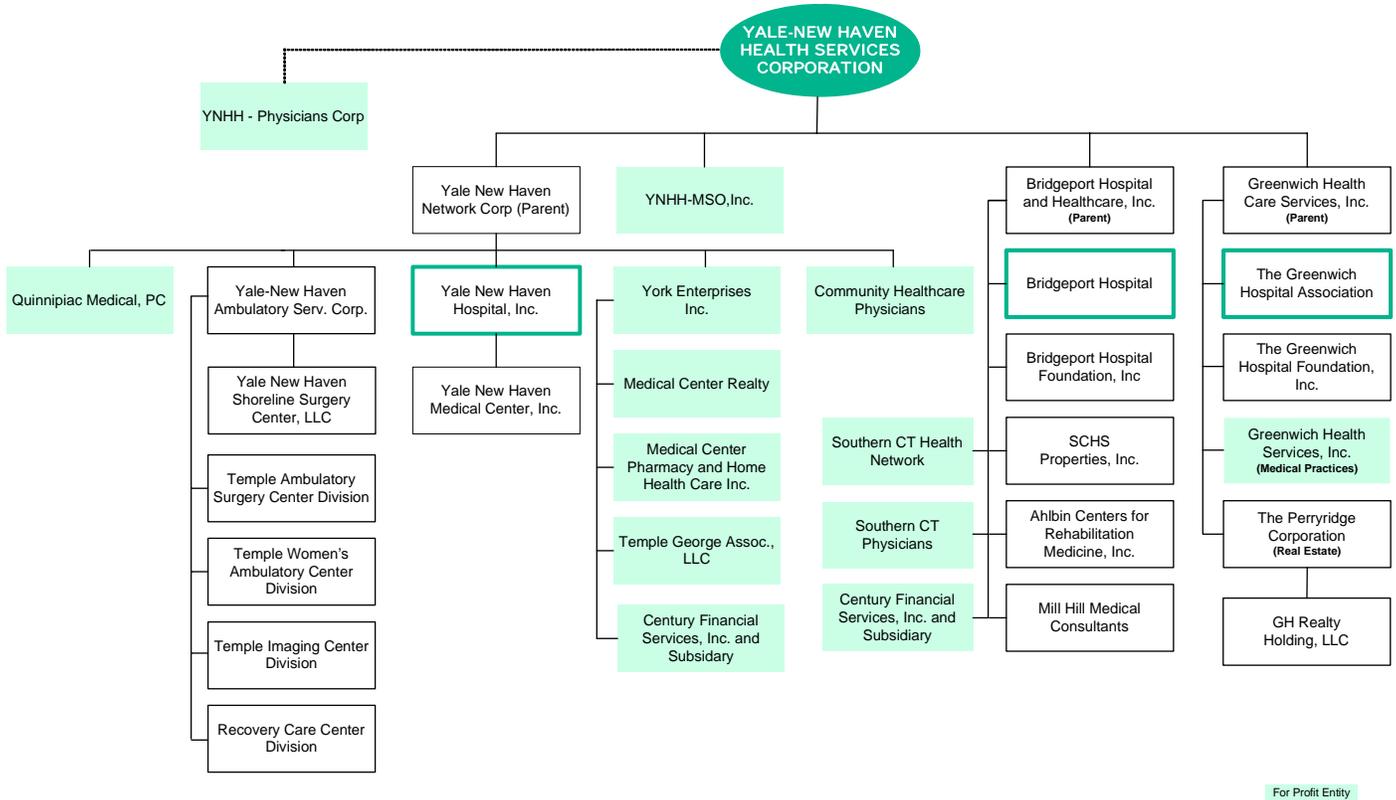
	2003	2004	2005
Days of expenses in accounts payable	68	59	61
Days cash on hand	46	48	52
Days of revenue in accounts receivable	65	49	49
Equity financing ratio	14%	11%	-2%

**Utilization Measures**

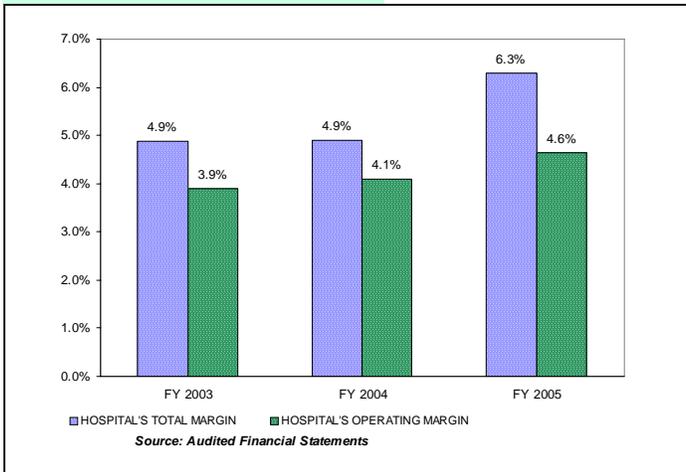
	2003	2004	2005
Patient Days	19,822	20,988	20,261
Discharges	5,170	5,093	5,207
ALOS	3.8	4.1	3.9
Staffed Beds	92	92	87
Licensed Beds	130	144	144
Occupancy of staffed beds	59%	62%	64%
Occupancy of licensed beds	42%	40%	38%
FTE's	566	560	538

## YALE-NEW HAVEN HOSPITAL

Yale-New Haven Hospital, founded in 1826, is located in New Haven and primarily serves the residents of Bethany, Branford, Clinton, East Haven, Guilford, Hamden, Killingworth, Madison, Milford, New Haven, North Branford, North Haven, Orange, Wallingford, West Haven, and Woodbridge. Yale-New Haven Hospital's parent corporation is Yale New Haven Network Corporation an affiliate of the larger Yale-New Haven Health Services Corporation which includes Greenwich Hospital and Bridgeport Hospital. Reported below is a chart indicating all of the affiliates of Yale New Haven Health Services Corporation, three years of total margins and operating margins and FY 2005 CON activity for Yale New Haven Hospital.



## HOSPITAL MARGINS

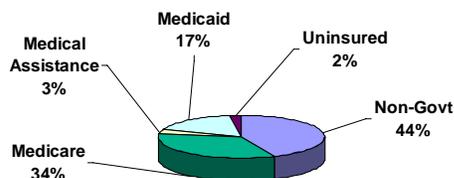


## CON ACTIVITY

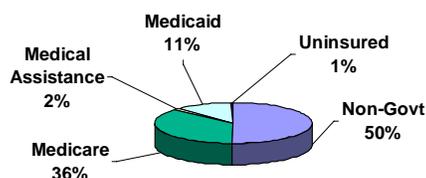
- Increase in authorized expenditure for acquisition of stand up MRI of \$90,000.
- Increase in authorized expenditure for North Pavilion enabling project of \$3,500,000.
- Acquisition of perioperative information tracking system for \$1,583,711.
- Establish Yale-New Haven Cancer Center and construction of North Pavilion for \$369,810,000.
- Replacement of electrophysiology laboratory for \$1,530,000.
- Replace patient monitors and stations for \$6,500,000.
- Replacement of patient monitors in operating rooms for \$998,468.

## KEY RESULTS - YALE-NEW HAVEN HOSPITAL

### Hospital Gross Revenue Payer Mix



### Hospital Net Revenue Payer Mix



### NET ASSETS

	2003	2004	2005
Hospital	\$481,960,000	\$513,776,000	\$572,753,000
Health System	\$573,414,000	\$616,166,000	\$673,589,000

### REVENUE & EXPENSE SUMMARY

Net patient revenue	\$625,572,389	\$680,865,022	\$762,569,000
Total expenses	\$635,618,000	\$688,459,540	\$740,545,000
Uncompensated Care Cost	\$13,810,590	\$13,940,176	\$14,312,759
Uncompensated care % of total expenses	2.2%	2.0%	1.9%
Average Managed Care Discounts	49%	50%	53%

### COST DATA

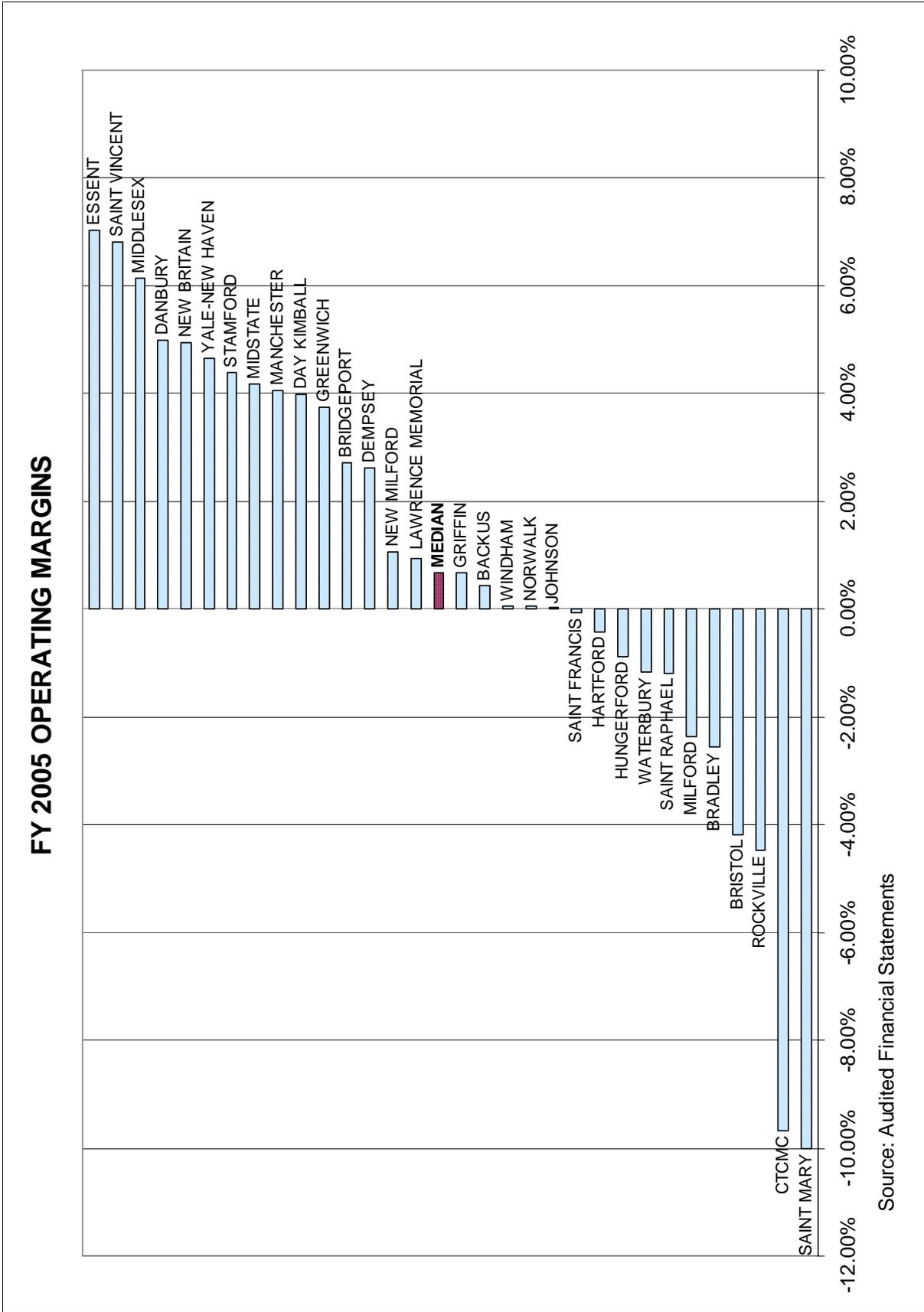
Ratio of cost to charges	0.43	0.41	0.39
Medicare Payment to Cost	1.05	1.05	1.11
Medicaid Payment to Cost	0.70	0.72	0.68
Private Payment to Cost	1.14	1.14	1.19

### FINANCIAL MEASURES

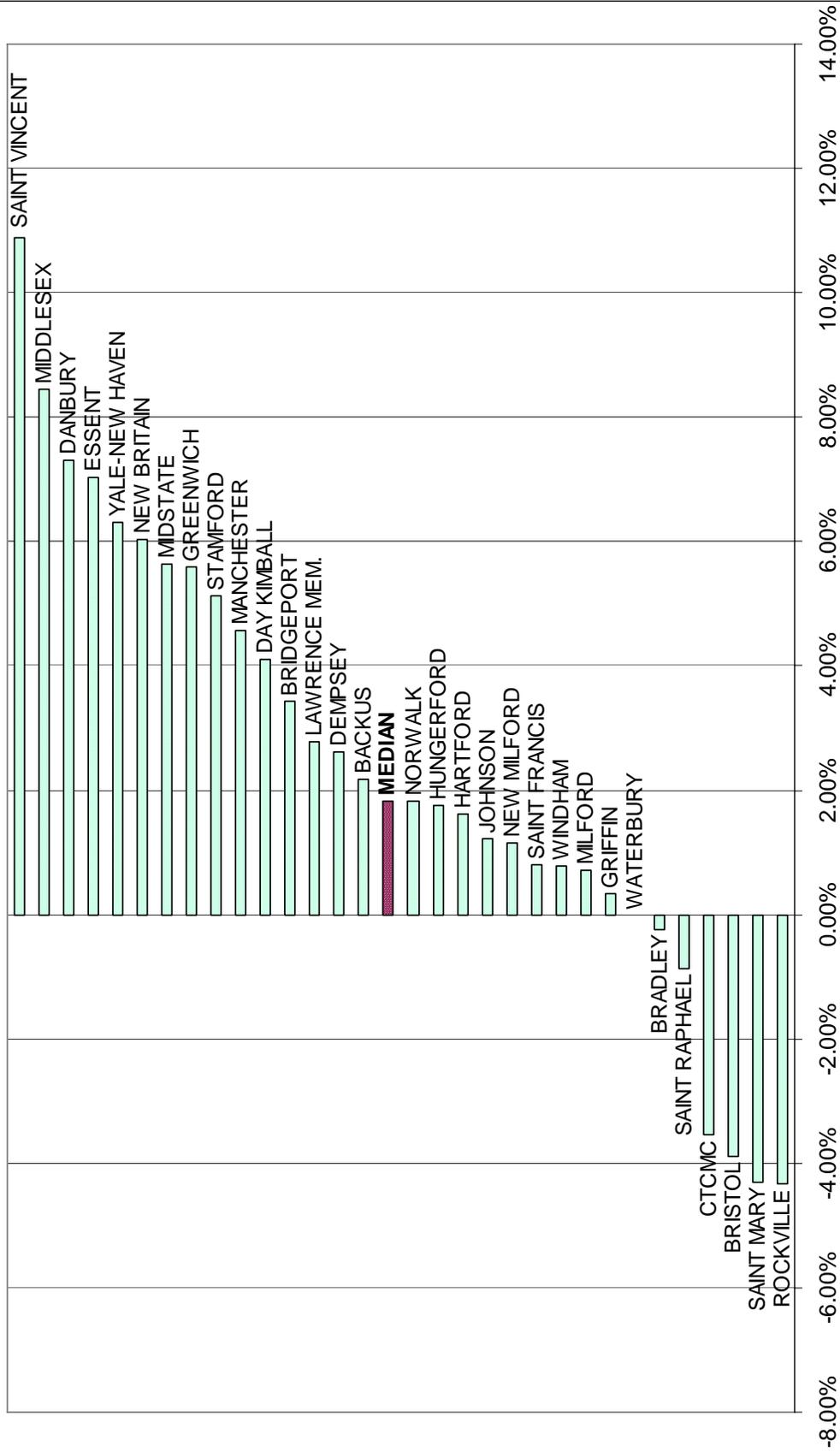
Days of expenses in accounts payable	68	62	63
Days cash on hand	13	8	10
Days of revenue in accounts receivable	46	44	40
Equity financing ratio	43%	45%	46%

### UTILIZATION MEASURES

Patient Days	239,184	246,848	258,566
Discharges	44,618	46,961	48,616
ALOS	5.4	5.3	5.3
Staffed Beds	852	859	866
Licensed Beds	944	944	944
Occupancy of staffed beds	77%	78%	82%
Occupancy of licensed beds	69%	72%	75%
FTE's	4,970	4,968	5,333



FY 2005 TOTAL MARGINS



Source: Audited Financial Statements

APPENDIX C: FY 2005 FINANCIAL MEASURES

FY 2005	MARGINS		CAPITAL STRUCTURE RATIO		LIQUIDITY MEASURES		
	Ratio:	Total Margin	Operating Margin	Equity Financing Ratio	Days in Accts Pay.	Days Cash on Hand	Days in Accts Rec.
		Net Income/(Operating Rev + Non Oper Rev)	Operating Income/ (Operating Rev + Non Operating Rev)	Unrestricted Assets/Total Assets	Current Liabilities/(Total Expense - Depr)/365	Cash/(Total Expense - Depr)/365	Net Accts Rec/(Net Pt Rev)/365
		Hospital Budget System - AFS Inputs	Hospital Budget System - AFS Inputs	Hospital Budget System - AFS Inputs	Hospital Budget System - AFS Inputs	Hospital Budget System - AFS Inputs	Hospital Budget System - AFS Inputs
<b>Calculation:</b>							
<b>Source:</b>							
BCKUS	2.17%	0.43%	47.0%	35	50	54	
BRDLY	-0.24%	-2.55%	34.2%	76	1	40	
BRGPT	3.43%	2.72%	29.1%	60	49	33	
BRSTL	-3.89%	-4.19%	31.1%	50	9	53	
CTCMC	-3.54%	-9.67%	42.2%	74	10	31	
DANBY	7.30%	4.99%	61.2%	43	73	40	
DAYKM	4.11%	3.99%	40.3%	61	68	35	
DMPSY	2.61%	2.61%	53.0%	69	28	36	
ESSN / (SHARN)	7.02%	7.02%	23.6%	74	4	39	
GRENH	5.60%	3.73%	63.1%	68	24	43	
GRIFN	0.34%	0.68%	6.8%	54	31	36	
HARTF	1.61%	-0.42%	49.6%	42	3	51	
HGRFD	1.75%	-0.89%	56.1%	43	10	37	
JINSON	1.21%	0.02%	32.3%	73	1	60	
LAMEM	2.78%	0.93%	47.3%	47	14	42	
MANCH	4.56%	4.07%	21.3%	66	9	47	
MIDST	5.64%	4.17%	31.7%	41	108	39	
MIDSX	8.46%	6.13%	49.9%	62	56	48	
MILFD	0.72%	-2.37%	68.6%	71	41	46	
NBRTN	6.04%	4.94%	45.3%	67	64	37	
NMILF	1.16%	1.05%	57.8%	65	17	46	
NRWMLK	1.82%	0.06%	46.7%	66	19	37	
RKVLK	-4.33%	-4.48%	41.3%	62	19	51	
SAFNS	0.80%	-0.07%	36.6%	32	13	45	
SAMRY	-4.32%	-10.02%	2.9%	71	3	48	
SARPH	-0.87%	-1.20%	5.4%	65	23	35	
SAVCT	10.88%	6.81%	63.6%	72	6	37	
STIMFD	5.13%	4.40%	28.8%	51	24	35	
WATBY	-0.01%	-1.17%	36.7%	47	34	42	
WNDHM	0.79%	0.06%	-2.2%	61	52	49	
YNHAV	6.30%	4.65%	46.1%	63	10	40	
<b>AVERAGE</b>	2.42%	1.68%	43.45%	56	26	42	
<b>MEDIAN</b>	1.82%	0.68%	41.3%	62	19	40	

APPENDIX D: FY 2005 PAYMENT TO COST & UNCOMPENSATED CARE

FY 2005	Ratio:	Costs to Charges (RCC)	Medicare Payments to Costs	Medicaid Payments to Costs	Private Payments to Costs	Total Uncompensated Care	Uncompensated Care Costs	Total Hospital Expenses	Uncomp Care % of Total Expenses
	<b>Calculation:</b>	$\frac{\text{Total Oper Exp}/(\text{Gross Rev} + \text{Other Oper Rev})}{\text{HBS Sched 300}}$	$\frac{\text{Medicare Payments}/(\text{Medicare Charges} * \text{RCC})}{\text{HBS Sched 300 \& UCA}}$	$\frac{\text{Medicaid Payments}/(\text{Medicaid Charges} * \text{RCC})}{\text{HBS Sched 300 \& UCA}}$	$\frac{\text{Non-Govt Pymts} - \text{Uninsrd Pymts}/(\text{Non-Govt Chrgs} - \text{Uninsrd Chrgs}) * \text{RCC}}{\text{HBS Sched 300 \& UCA}}$	(Bad Debts + Free Care)	(Bad Debts + Free Care) * RCC	N/A	$\frac{\text{Uncomp Care}/\text{Total Expenses}}{\text{HBS Sched 300 \& UCA}}$
	<b>Source:</b>	HBS Sched 300	HBS Sched 300 & UCA	HBS Sched 300 & UCA	HBS Sched 300 & UCA	HBS Sched UCA	HBS Sched 300 & UCA	HBS Sched 300	HBS Sched 300 & UCA
BACKLUS		0.53	0.82	0.60	1.33	\$10,011,674	\$5,336,193	\$178,963,810	2.98%
BRADLEY		0.43	0.82	1.04	1.18	\$910,635	\$382,123	\$36,516,922	1.07%
BRIDGEPORT		0.36	1.10	0.66	1.25	\$27,409,489	\$9,978,831	\$266,851,869	3.74%
BRISTOL		0.40	0.91	0.82	1.11	\$7,584,334	\$3,067,807	\$100,399,080	3.06%
CT CHILDREN'S		0.61	6.24	0.80	0.90	\$2,445,932	\$1,502,788	\$113,132,148	1.33%
DANBURY		0.46	0.86	0.66	1.40	\$19,468,850	\$9,041,180	\$309,788,202	2.92%
DAY KIMBALL		0.56	0.93	0.62	1.29	\$4,423,014	\$2,470,049	\$82,349,664	3.00%
DEMPSEY		0.53	1.19	0.93	1.02	\$3,476,379	\$1,847,731	\$195,141,020	0.95%
ESSENT SHARON		0.47	0.95	0.82	1.29	\$2,419,280	\$1,128,526	\$46,091,460	2.45%
GREENWICH		0.42	0.79	0.82	1.23	\$16,553,803	\$6,947,590	\$206,110,987	3.39%
GRIFFIN		0.36	0.99	0.82	1.06	\$8,509,882	\$3,051,296	\$90,149,190	3.38%
HARTFORD		0.49	1.07	0.70	1.07	\$41,985,236	\$20,377,700	\$550,836,345	3.70%
HUNGERFORD		0.59	0.99	0.58	1.04	\$1,947,497	\$1,143,477	\$77,605,669	1.47%
JOHNSON		0.33	0.80	0.97	1.24	\$4,848,034	\$1,579,860	\$53,691,872	2.94%
LAWRENCE		0.52	0.87	0.65	1.28	\$13,395,464	\$6,960,484	\$208,180,884	3.34%
MANCHESTER		0.41	0.87	0.76	1.22	\$5,451,532	\$2,248,535	\$124,200,584	1.81%
MIDDLESEX		0.50	0.88	0.73	1.45	\$7,998,165	\$4,032,625	\$129,155,661	3.12%
MIDDLESEX		0.42	0.96	0.73	1.28	\$12,614,782	\$5,286,765	\$214,245,177	2.47%
MILFORD		0.37	0.82	0.68	1.21	\$3,241,441	\$1,189,265	\$68,147,911	1.75%
NEW BRITAIN		0.39	0.86	0.88	1.35	\$12,362,379	\$4,836,816	\$218,820,627	2.21%
NEW MILFORD		0.43	0.74	0.77	1.29	\$3,269,087	\$1,411,937	\$71,585,575	1.97%
NORWALK		0.55	0.87	0.71	1.30	\$15,763,727	\$8,642,947	\$226,588,767	3.81%
ROCKVILLE		0.42	0.76	0.72	1.20	\$3,014,577	\$1,280,030	\$55,812,291	2.29%
ST. FRANCIS		0.50	1.09	0.69	1.08	\$19,654,496	\$9,786,892	\$428,039,476	2.29%
ST. MARY'S		0.47	1.03	0.47	0.96	\$9,845,637	\$4,587,219	\$144,760,936	3.17%
ST. RAPHAEL		0.39	1.03	0.70	1.11	\$18,199,402	\$7,085,735	\$369,902,759	1.92%
ST. VINCENTS		0.47	1.04	0.75	1.29	\$19,866,424	\$9,318,572	\$236,872,946	3.95%
STAMFORD		0.42	0.84	0.74	1.35	\$35,442,287	\$14,741,386	\$251,240,588	5.87%
WATERBURY		0.34	0.96	0.79	1.06	\$14,068,249	\$4,778,415	\$192,805,493	2.48%
WINDHAM		0.40	0.96	0.83	1.14	\$4,990,522	\$1,983,659	\$63,742,310	3.11%
YALE-NEW HAVEN		0.39	1.11	0.68	1.19	\$36,964,963	\$14,312,759	\$740,545,000	1.93%
STATEWIDE		0.44	0.97	0.72	1.20	\$388,137,772	\$170,349,193	\$6,050,275,224	2.82%
MEDIAN		0.43	0.93	0.73	1.22				2.98%

APPENDIX E: RATIO OF COST TO CHARGE DATA

FY 2005		Total Expenses	Total Gross Revenue	Total Other Operating Revenue	Ratio of Cost to Charge (RCC)	Medicare Charges	Medicare Payments	Medicare Payment to Cost Data
Ratio:	Total Expenses	Total Gross Revenue	Total Other Operating Revenue	Ratio of Cost to Charge (RCC)	Medicare Charges	Medicare Payments	Medicare Payment to Cost Data	Medicare Payments/ (Medicare Charges * RCC)
Calculation:				$\frac{\text{Total Oper Exp.}}{\text{Gross Rev} + \text{Other Oper Rev}}$				
Source:	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA
BACKUS	\$178,963,810	\$334,691,285	\$1,077,570	0.53	\$133,351,444	\$57,967,168	0.82	
BRADLEY	\$36,516,922	\$84,763,520	\$40,431	0.43	\$46,746,314	\$16,440,117	0.82	
BRIDGEPORT	\$266,851,869	\$728,740,909	\$4,238,081	0.36	\$296,091,991	\$118,193,463	1.10	
BRISTOL	\$100,399,080	\$248,229,557	\$0	0.40	\$111,227,505	\$40,788,727	0.91	
CT CHILDREN'S	\$113,132,148	\$181,382,738	\$2,750,659	0.61	\$1,155,814	\$4,433,633	6.24	
DANBURY	\$309,788,202	\$667,083,309	\$0	0.46	\$278,723,815	\$111,124,170	0.86	
DAY KIMBALL	\$82,349,664	\$145,637,206	\$1,822,898	0.56	\$58,451,335	\$30,394,064	0.93	
DEMPSEY	\$195,141,020	\$366,071,129	\$1,073,324	0.53	\$133,803,439	\$84,292,601	1.19	
ESSENT SHARON	\$46,091,460	\$98,535,592	\$273,058	0.47	\$48,191,744	\$21,272,768	0.95	
GREENWICH	\$205,110,987	\$485,437,785	\$3,273,709	0.42	\$183,923,054	\$61,214,450	0.79	
GRIFFIN	\$90,149,190	\$251,420,708	\$0	0.36	\$120,724,777	\$42,809,684	0.99	
HARTFORD	\$550,836,345	\$1,134,774,133	\$142,661	0.49	\$514,450,429	\$266,422,927	1.07	
HUNGERFORD	\$77,605,669	\$132,173,004	\$0	0.59	\$61,249,209	\$35,530,974	0.99	
JOHNSON	\$53,691,872	\$164,658,777	\$102,648	0.33	\$76,962,842	\$20,144,536	0.80	
LAWRENCE	\$208,180,884	\$399,671,744	\$972,761	0.52	\$154,536,219	\$69,850,291	0.87	
MANCHESTER	\$124,200,584	\$297,138,589	\$3,983,395	0.41	\$127,760,415	\$46,017,963	0.87	
MIDSTATE	\$129,155,661	\$256,162,728	\$0	0.50	\$120,157,820	\$53,506,015	0.88	
MIDDLESEX	\$214,245,177	\$510,356,122	\$855,583	0.42	\$214,680,364	\$85,942,598	0.96	
MILFORD	\$68,147,911	\$185,596,861	\$145,888	0.37	\$94,904,903	\$28,585,088	0.82	
NEW BRITAIN	\$218,820,627	\$554,521,452	\$4,760,448	0.39	\$255,531,394	\$86,188,468	0.86	
NEW MILFORD	\$71,585,575	\$165,743,574	\$0	0.43	\$77,661,086	\$24,875,883	0.74	
NORWALK	\$226,588,767	\$411,742,517	\$1,528,972	0.55	\$188,094,177	\$89,938,714	0.87	
ROCKVILLE	\$55,812,291	\$129,014,364	\$2,428,236	0.42	\$61,181,496	\$19,638,216	0.76	
ST. FRANCIS	\$428,039,476	\$859,569,196	\$39,778	0.50	\$379,539,787	\$205,568,824	1.09	
ST. MARY'S	\$144,760,936	\$307,673,431	\$3,029,769	0.47	\$125,725,308	\$60,390,517	1.03	
ST. RAPHAEL	\$369,902,759	\$947,760,575	\$2,318,560	0.39	\$522,127,943	\$208,739,085	1.03	
ST. VINCENT'S	\$235,872,946	\$499,236,769	\$3,624,805	0.47	\$252,001,279	\$122,779,299	1.04	
STAMFORD	\$251,240,588	\$597,448,647	\$6,601,797	0.42	\$231,787,315	\$80,874,798	0.84	
WATERBURY	\$192,805,493	\$561,397,448	\$6,245,978	0.34	\$255,758,435	\$82,984,016	0.96	
WINDHAM	\$63,742,310	\$160,363,953	\$0	0.40	\$63,875,100	\$24,465,909	0.96	
YALE-NEW HAVEN	\$740,545,000	\$1,910,568,000	\$2,006,498	0.39	\$629,071,000	\$271,282,000	1.11	
STATEWIDE	\$6,050,275,224	\$13,777,565,622	\$53,337,507	0.44	\$5,819,447,753	\$2,472,656,966	0.97	
<b>MEDIAN</b>	\$178,963,810	\$334,691,285	\$1,073,324	0.43	\$133,351,444	\$60,390,517	0.93	

APPENDIX E: RATIO OF COST TO CHARGE DATA

<b>FY 2005</b>	Medicaid Charges	Medicaid Payments	Medicaid Payment to Cost Data <i>(Medicaid Charges * ROC)</i>	Total Non Govt Charges	Total Non Govt Payments	Total Uninsured Charges	Total Uninsured Payments	Private Payment to Cost Data <i>(Non-Govt Pymts - Uninsrd Pymts)/(Non-Govt Chrgs-Uninsrd Chrgs)*ROC</i>
<b>Ratio:</b>	Medicaid Charges	Medicaid Payments	Medicaid Payment to Cost Data <i>(Medicaid Charges * ROC)</i>	Total Non Govt Charges	Total Non Govt Payments	Total Uninsured Charges	Total Uninsured Payments	Private Payment to Cost Data <i>(Non-Govt Pymts - Uninsrd Pymts)/(Non-Govt Chrgs-Uninsrd Chrgs)*ROC</i>
<b>Calculation:</b>	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA
<b>Source:</b>	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA	OHCA's HBS Schedule UCA
BACKUS	\$28,370,546	\$9,140,407	0.60	\$153,937,050	\$104,208,380	\$9,635,916	\$2,132,120	1.33
BRADLEY	\$3,052,414	\$1,367,742	1.04	\$34,088,821	\$17,579,558	\$1,216,833	\$812,004	1.18
BRIDGEPORT	\$124,645,553	\$29,828,339	0.66	\$280,058,809	\$116,313,630	\$28,822,201	\$2,349,166	1.25
BRISTOL	\$23,038,248	\$7,614,005	0.82	\$105,579,852	\$45,763,317	\$4,347,365	\$380,531	1.11
CT CHILDREN'S	\$75,832,624	\$37,065,425	0.80	\$103,730,102	\$63,574,761	\$991,720	\$451,971	1.00
DANBURY	\$45,575,672	\$13,887,667	0.66	\$328,544,945	\$205,949,282	\$21,330,914	\$6,399,274	1.40
DAY KIMBALL	\$15,929,403	\$5,551,367	0.62	\$66,772,251	\$45,474,165	\$4,007,246	\$324,765	1.29
DEMPSEY	\$41,544,524	\$20,496,974	0.93	\$159,690,389	\$85,411,009	\$3,923,390	\$637,708	1.02
ESSENT SHARON	\$2,492,655	\$956,829	0.82	\$44,160,185	\$25,825,447	\$2,631,990	\$885,721	1.29
GREENWICH	\$8,424,339	\$2,912,031	0.82	\$288,933,610	\$143,968,459	\$23,383,386	\$6,829,583	1.23
GRIFFIN	\$18,269,408	\$5,339,201	0.82	\$106,648,234	\$41,101,431	\$9,492,974	\$4,005,150	1.06
HARTFORD	\$138,610,110	\$46,897,211	0.70	\$441,273,857	\$213,855,666	\$35,709,093	\$2,977,069	1.07
HUNGERFORD	\$12,977,371	\$4,432,010	0.58	\$54,076,065	\$33,358,178	\$5,210,318	\$3,469,981	1.04
JOHNSON	\$11,990,414	\$3,775,030	0.97	\$71,994,755	\$27,964,359	\$4,158,989	\$630,845	1.24
LAWRENCE	\$37,514,441	\$12,691,473	0.65	\$180,263,321	\$114,033,765	\$9,170,545	\$0	1.28
MANCHESTER	\$21,789,835	\$6,816,849	0.76	\$141,624,262	\$70,345,446	\$9,193,047	\$3,741,515	1.22
MIDSTATE	\$21,979,853	\$8,105,345	0.73	\$107,536,403	\$72,733,859	\$8,483,562	\$485,397	1.45
MIDDLESEX	\$37,199,951	\$11,406,347	0.73	\$246,347,784	\$128,701,978	\$12,388,399	\$2,907,374	1.28
MILFORD	\$10,936,982	\$2,747,087	0.68	\$79,384,549	\$34,594,451	\$3,617,483	\$1,056,221	1.21
NEW BRITAIN	\$72,686,234	\$24,894,276	0.88	\$212,877,726	\$112,085,636	\$11,604,154	\$5,979,210	1.35
NEW MILFORD	\$6,826,898	\$2,267,987	0.77	\$80,509,211	\$44,650,791	\$2,897,528	\$1,304,551	1.29
NORWALK	\$33,869,059	\$13,108,123	0.71	\$179,896,095	\$117,896,607	\$16,869,248	\$1,865,948	1.30
ROCKVILLE	\$11,560,131	\$3,510,325	0.72	\$53,982,349	\$26,561,604	\$4,147,851	\$1,133,274	1.20
ST. FRANCIS	\$104,920,907	\$36,066,277	0.69	\$345,947,962	\$179,420,414	\$17,987,228	\$3,171,702	1.08
ST. MARY'S	\$45,380,763	\$9,846,236	0.47	\$123,683,215	\$52,187,269	\$7,688,638	\$423,776	0.96
ST. RAPHAEL	\$86,567,869	\$23,658,411	0.70	\$313,086,884	\$129,315,770	\$19,075,346	\$1,952,094	1.11
ST. VINCENT'S	\$48,073,380	\$16,850,367	0.75	\$190,037,006	\$105,755,819	\$20,103,400	\$2,923,668	1.29
STAMFORD	\$47,135,238	\$14,589,394	0.74	\$307,843,833	\$156,888,348	\$34,498,316	\$3,482,059	1.35
WATERBURY	\$70,085,642	\$18,800,699	0.79	\$215,652,020	\$77,006,872	\$12,556,007	\$3,896,789	1.06
WINDHAM	\$19,139,397	\$6,318,942	0.83	\$71,839,827	\$41,078,261	\$4,188,205	\$382,091	1.14
YALE-NEW HAVEN	\$330,291,000	\$86,404,000	0.68	\$872,575,000	\$387,831,000	\$41,323,571	\$4,361,529	1.19
STATEWIDE	\$1,556,710,861	\$487,346,375	0.72	\$5,962,576,373	\$3,011,435,533	\$390,654,862	\$71,353,086	1.21
<b>MEDIAN</b>	\$33,869,059	\$9,846,236	0.73	\$153,937,050	\$77,006,872	\$9,193,047	\$1,952,094	1.22

**APPENDIX F: ANALYSIS OF HOSPITAL AND PARENT NET ASSETS**

Hospital Name	Change in	Hospital	Hospital	Hospital	Hospital	Hospital	Hospital
	Unrestricted Net Assets Or Equity 9/30/2005	Total Net Assets Or Equity 9/30/2005	Total Net Assets Or Equity 9/30/2004	Total Net Assets Or Equity 9/30/2003	Total Net Assets Or Equity 2004-2005 Change	Total Net Assets Or Equity 2003-2005 Change	
BACKUS	(1,578,355)	\$129,436,267	\$130,354,858	\$121,572,964	-0.7%	6.5%	
BRADLEY	837,104	\$42,208,077	\$40,213,228	\$37,017,682	5.0%	14.0%	
BRIDGEPORT	3,018,000	\$107,391,000	\$99,849,000	\$92,116,000	7.6%	16.6%	
BRISTOL	(5,567,099)	\$37,038,793	\$42,201,103	\$45,189,959	-12.2%	-18.0%	
CTCMC	(5,113,586)	\$204,545,026	\$204,581,050	\$184,218,309	0.0%	11.0%	
DANBURY	28,853,559	\$284,456,481	\$250,866,741	\$226,683,985	13.4%	25.5%	
DAY KIMBALL	(6,361,667)	\$40,759,684	\$46,172,036	\$41,510,746	-11.7%	-1.8%	
DEMPSEY	5,807,958	\$59,658,374	\$53,816,541	\$55,446,577	10.9%	7.6%	
ESSENT-SHARON	8,198,579	\$8,198,579	\$4,603,005	\$992,235	78.1%	726.3%	
GREENWICH	38,962,000	\$345,568,000	\$314,461,000	\$286,758,000	9.9%	20.5%	
GRIFFIN	(84,683)	\$9,073,263	\$9,029,316	\$9,916,590	0.5%	-8.5%	
HARTFORD	25,816,320	\$745,141,478	\$703,473,280	\$671,554,562	5.9%	11.0%	
HUNGERFORD	(3,620,744)	\$79,620,702	\$81,132,600	\$75,361,528	-1.9%	5.7%	
JOHNSON	(4,075,247)	\$18,289,970	\$22,099,417	\$24,417,302	-17.2%	-25.1%	
LAWRENCE MEM.	5,468,109	\$146,712,299	\$139,507,538	\$105,017,709	5.2%	39.7%	
MANCHESTER	2,202,860	\$36,218,383	\$34,078,205	\$40,143,763	6.3%	-9.8%	
MIDSTATE	1,722,896	\$59,311,158	\$57,411,392	\$49,212,865	3.3%	20.5%	
MIDDLESEX	23,796,000	\$157,828,000	\$133,609,000	\$117,857,000	18.1%	33.9%	
MILFORD	(1,256,525)	\$65,246,512	\$66,497,537	\$65,558,489	-1.9%	-0.5%	
NEW BRITAIN	21,691,921	\$155,342,779	\$133,469,150	\$118,889,530	16.4%	30.7%	
NEW MILFORD**	8,518,141	\$57,554,691	\$49,426,530	\$49,642,464	16.4%	15.9%	
NORWALK	(3,199,030)	\$142,075,447	\$143,518,697	\$133,696,897	-1.0%	6.3%	
ROCKVILLE	(4,296,130)	\$43,913,714	\$48,498,503	\$50,359,916	-9.5%	-12.8%	
SAINT FRANCIS	(5,448,883)	\$261,919,250	\$264,166,481	\$257,103,887	-0.9%	1.9%	
SAINT MARY'S	(5,326,000)	\$23,760,000	\$26,430,000	\$12,850,629	-10.1%	84.9%	
SAINT RAPHAEL	(23,557,991)	\$36,343,267	\$57,012,214	\$46,424,296	-36.3%	-21.7%	
SAINT VINCENT	34,878,000	\$282,061,000	\$245,161,000	\$212,254,000	15.1%	32.9%	
STAMFORD	6,649,306	\$112,271,000	\$100,609,937	\$73,924,288	11.6%	51.9%	
WATERBURY	2,816,080	\$126,535,925	\$119,504,105	\$108,928,359	5.9%	16.2%	
WINDHAM	(8,289,797)	\$5,369,767	\$12,634,329	\$14,590,439	-57.5%	-63.2%	
YALE-NEW HAVEN	51,971,000	\$572,753,000	\$513,776,000	\$481,960,000	11.5%	18.8%	
STATEWIDE TOTAL	\$193,432,096	\$4,396,601,886	\$4,148,163,793	\$3,811,170,970	6.0%	15.4%	
<b>Source: FY 2005 Audited Financial Statements Change in Net Assets and Balance Sheets</b>							

**APPENDIX F: ANALYSIS OF HOSPITAL AND PARENT NET ASSETS**

Parent Name	Change in Unrestricted Net Assets Or Equity 9/30/2005	Consolidated Parent		Consolidated Parent		Consolidated Parent		Consolidated Parent 2004-2005 Change	Consolidated Parent 2003-2005 Change
		Total Net Assets Or Equity 9/30/2005	Total Net Assets Or Equity 9/30/2004	Total Net Assets Or Equity 9/30/2004	Total Net Assets Or Equity 9/30/2003	Total Net Assets Or Equity 9/30/2003			
Backus Corporation	2,196,012	\$133,242,735	\$134,778,983	\$134,778,983	\$123,584,349	\$123,584,349	-1.1%	7.8%	
Central Connecticut Health Alliance (See Note A)	837,104	\$42,208,077	\$43,528,725	\$43,528,725	\$40,247,698	\$40,247,698	-3.0%	4.9%	
Bridgeport Hosp. & Healthcare Services, Inc.	3,441,000	\$107,642,000	\$99,752,000	\$99,752,000	\$91,890,000	\$91,890,000	7.9%	17.1%	
Bristol Hospital and Health Care Group	(4,463,291)	\$39,312,034	\$43,348,434	\$43,348,434	\$46,543,813	\$46,543,813	-9.3%	-15.5%	
CCMC Corporation	(5,806,674)	\$207,251,750	\$207,972,821	\$207,972,821	\$194,025,215	\$194,025,215	-0.3%	6.8%	
Danbury Health Systems, Inc.	3,576,786	\$224,089,757	\$215,986,721	\$215,986,721	\$171,646,582	\$171,646,582	3.8%	30.6%	
Health Network of New England, Inc.	(5,994,645)	\$41,173,770	\$46,559,766	\$46,559,766	\$42,234,244	\$42,234,244	-11.6%	-2.5%	
University of Connecticut Health Center	(3,027,428)	\$248,143,420	\$230,569,010	\$230,569,010	\$225,766,144	\$225,766,144	7.6%	9.9%	
Essent Healthcare, Inc.	(9,224,329)	\$112,483,039	\$103,489,848	\$103,489,848	\$27,335,646	\$27,335,646	8.7%	311.5%	
Greenwich Health Care Services, Inc.	39,174,000	\$363,064,000	\$331,745,000	\$331,745,000	\$302,712,000	\$302,712,000	9.4%	19.9%	
Griffin Health Services Corporation	(207,850)	\$11,159,474	\$11,238,692	\$11,238,692	\$12,029,714	\$12,029,714	-0.7%	-7.2%	
Hartford Health Care Corporation (See Note B)	36,342,820	\$966,774,418	\$907,597,630	\$907,597,630	\$861,111,893	\$861,111,893	6.5%	12.3%	
No Corporate Parent or Holding Company	73,838	\$79,924,795	\$81,239,353	\$81,239,353	\$75,383,906	\$75,383,906	-1.6%	6.0%	
Johnson Memorial Corporation	(240,638)	\$13,977,630	\$19,647,604	\$19,647,604	\$23,475,152	\$23,475,152	-28.9%	-40.5%	
Lawrence & Memorial Corporation	11,848,087	\$199,289,846	\$185,712,507	\$185,712,507	\$150,405,371	\$150,405,371	7.3%	32.5%	
Eastern Connecticut Health Network (See Note C)	2,755,174	\$50,168,091	\$44,099,565	\$44,099,565	\$49,236,854	\$49,236,854	13.8%	1.9%	
Hartford Health Care Corporation (See Note D)	2,360,180	\$64,034,582	\$61,494,370	\$61,494,370	\$51,966,107	\$51,966,107	4.1%	23.2%	
Middlesex Health System, Inc.	23,816,000	\$160,991,000	\$136,752,000	\$136,752,000	\$120,480,000	\$120,480,000	17.7%	33.6%	
Milford Health & Medical, Inc.	2,670,728	\$71,433,462	\$69,189,625	\$69,189,625	\$67,441,508	\$67,441,508	3.2%	5.9%	
Central Connecticut Health Alliance (Note E)	22,994,991	\$167,952,625	\$141,419,517	\$141,419,517	\$126,094,920	\$126,094,920	18.8%	33.2%	
New Milford Hospital Holding Corp.	8,799,299	\$59,406,916	\$50,923,607	\$50,923,607	\$49,642,464	\$49,642,464	16.7%	19.7%	
Nonwalk Health Services Corporation	(1,411,948)	\$176,802,787	\$176,345,808	\$176,345,808	\$164,381,510	\$164,381,510	0.3%	7.6%	
Eastern Connecticut Health Network (See Notes F)	(4,296,130)	\$43,913,714	\$50,121,091	\$50,121,091	\$51,600,791	\$51,600,791	-12.4%	-14.9%	
Saint Francis Care, Inc.	2,446,592	\$290,790,105	\$285,130,146	\$285,130,146	\$278,085,084	\$278,085,084	2.0%	4.6%	
Saint Mary's Health System (See Note G)	(12,474,000)	\$8,469,000	\$16,197,000	\$16,197,000	\$8,236,000	\$8,236,000	-47.7%	2.8%	
St. Raphael Health Care System, Inc.	(14,908,000)	\$70,073,000	\$83,604,000	\$83,604,000	\$67,283,000	\$67,283,000	-16.2%	4.1%	
St. Vincent's Health Services	42,264,000	\$331,599,000	\$286,643,000	\$286,643,000	\$244,476,000	\$244,476,000	15.7%	35.6%	
Stamford Health System	14,805,000	\$156,264,000	\$140,714,945	\$140,714,945	\$128,522,530	\$128,522,530	11.1%	21.6%	
Greater Waterbury Health Network, Inc.	3,462,604	\$166,079,218	\$158,400,874	\$158,400,874	\$147,842,292	\$147,842,292	4.8%	12.3%	
Windham Comm. Memorial Hosp, Inc.	(7,010,153)	\$5,369,767	\$12,634,329	\$12,634,329	\$14,590,439	\$14,590,439	-57.5%	-63.2%	
Yale-New Haven Health Services Corporation (See Note H)	50,623,000	\$673,589,000	\$616,166,000	\$616,166,000	\$573,414,000	\$573,414,000	9.3%	17.5%	
<b>Statewide Total</b>	<b>\$205,422,129</b>	<b>\$5,286,673,012</b>	<b>\$4,993,002,971</b>	<b>\$4,993,002,971</b>	<b>\$4,531,685,226</b>	<b>\$4,531,685,226</b>	<b>5.9%</b>	<b>16.7%</b>	

**Source: FY 2005 Audited Consolidated Financial Statements Change in Net Assets and Balance Sheets**

Note A - Prior to FY 2005, the net assets included subsidiaries owned by the Parent Corporation of Bradley Memorial Hospital prior to merger. The FY 2005 amounts include Bradley Memorial Hospital only.  
 Note B: Excludes the net assets of Midstate Medical Center and all of Midstate Medical Center's subsidiaries.  
 Note C - Prior to FY 2005, the net assets included subsidiaries owned by the Parent Corporation of Rockville General Hospital prior to merger. The FY 2005 net assets exclude Rockville General Hospital only.  
 Note D: Includes the net assets of Midstate Medical Center and all of Midstate Medical Center's subsidiaries.  
 Note E - Prior to FY 2005, the net assets excluded subsidiaries owned by the Parent Corporation of Bradley Memorial Hospital prior to the merger. The FY 2005 amounts exclude Bradley Memorial Hospital only.  
 Note F - Prior to FY 2005, the net assets included subsidiaries owned by the Parent Corporation of Rockville General Hospital prior to merger. The FY 2005 net assets include Rockville General Hospital only.  
 Note G - The sole member's name was legally changed from Slocum Corporation to St Mary's Health System, Inc.  
 Note H: The net asset amounts for Bridgeport Hospital and Healthcare Services, Inc and Subsidiaries and Greenwich Health Care Services, Inc and Subsidiaries have been excluded.

**APPENDIX G: FY 2005 CON ACTIVITY**

<b>Hospital Name</b>	<b>Docket Number</b>	<b>Activity Approved or Modified in FY 2005</b>	<b>Capital Cost</b>
Backus	04-30376-CON	Addition of hyperbaric oxygen therapy service.	\$342,853
	05-30524-WVR	Replacement of radiotherapy simulator.	\$854,000
	05-30519-DTR	Relocate outpatient rehabilitation services.	\$475,000
	05-30481-DTR	Change in provision of prenatal services.	\$0
	04-30390-CON	Acquisition of a second linear accelerator w/IMRT.	\$4,482,495
	04-30424-CON	Facility enhancement project.	\$42,075,688
Bradley	04-30280-CON	Consolidate New Britain General Hospital and Bradley under a single license.	\$0
	04-30394-CON	Construction of a medical office building.	\$2,359,023
	05-30574-DTR	Replacement of nuclear camera.	\$398,330
Bridgeport	05-30566-DTR	Purchase of replacement surgical instrumentation sets.	\$931,000
	05-30559-DTR	Acquisition of replacement equipment for central sterile supply.	\$344,380
	05-30445-DTR	Bedside monitoring replacement project.	\$1,496,787
	05-22953-MDF	Use of a second mobile PET Scanner and upgrade both units to PET/CT capability – date extension.	\$0
	05-30014-MDF	Replace clinical documentation system – date extension.	\$4,365,000
	04-30352-CON	Emergency department renovation and expansion project.	\$16,000,000
Bristol		No activity to report.	n/a
CT Children's	05-30507-DTR	Pediatric sleep lab.	\$50,000
	05-22913-MDF	Expansion of Pediatric Intensive Care Unit and relocation of pharmacy – date extension.	\$0
	05-30590-DTR	Engagement of Sterling Healthcare Initiatives, LLC.	\$0
	04-30330-CON	Six bed expansion of Neonatal Intensive Care Unit.	\$2,369,650
	05-30330-MDF	Six bed expansion of Neonatal Intensive Care Unit – increase in authorized capital expenditure.	\$732,500
Danbury	04-30405-CON	Flood damage in Danbury Hospital's Interventional Radiology rooms.	\$869,238
	05-30477-CON	Establishment of Wound Care Center at Danbury Hospital.	\$784,330
	05-22953-MDF	Use of a second mobile PET Scanner and upgrade both units to PET/CT capability – date extension.	\$0

**APPENDIX G: FY 2005 CON ACTIVITY**

<b>Hospital Name</b>	<b>Docket Number</b>	<b>Activity Approved or Modified in FY 2005</b>	<b>Capital Cost</b>
Day Kimball	04-30392-WVR	Replacement of CT Scanner.	\$862,861
Dempsey	04-30341-CON	MRI replacement.	\$1,693,650
	04-30344-CON	Acquisition of electronic Health Information Management System.	\$1,400,848
	04-30397-DTR	Change in capital expenditure for the relocation of Ambulatory Radiology Service under 04-30306-DTR.	\$1,412,277
	05-30440-CON	Acquisition of Picture Archiving Communication System.	\$1,900,000
Essent-Sharon	04-30379-CON	Establish lithotripsy service.	\$485,000
Greenwich	05-30329-CON	Acquisition of a fixed PET/CT scanner.	\$2,704,590
	04-30372-CON	Replacement and relocation of 1.5 Tesla MRI to Stamford and establishment of an Imaging Center.	\$1,422,335
	04-30382-DTR	Greenwich Hospital and Greenwich Infertility and IVF Center, PC.	\$0
	05-30473-DTR	Change in neonatal nursery program's level of care.	\$0
	05-22953-MDF	Use of a second mobile PET Scanner and upgrade both units to PET/CT capability – date extension.	\$0
	05-30500-WVR	Replacement of Radiation Oncology Simulator.	\$1,129,015
	05-30372-MDF	Replacement and relocation of 1.5 Tesla MRI to Stamford and establishment of an Imaging Center – increased approved capital expenditure.	\$399,599
Griffin	04-22709-MDF	Kitchen and cafeteria renovation project – increase authorized expenditure and date extension.	\$1,381,872
	05-30196-MDF	Merger of Griffin Hospital and Valley Mental Health Center related to outpatient psychiatric services – date extension.	\$0

**APPENDIX G: FY 2005 CON ACTIVITY**

<b>Hospital Name</b>	<b>Docket Number</b>	<b>Activity Approved or Modified in FY 2005</b>	<b>Capital Cost</b>
Hartford	04-30419-CON	CT scanner replacement.	\$1,997,631
	04-30015-MDF	Replacement of two existing MRI Units – increase in authorized expenditure.	\$247,988
	05-30276-MDF	Refurbishment of Donnelly Building patient rooms – increased approved capital expenditure.	\$639,257
	04-30307-CON	Establish an ambulatory surgical center in West Hartford.	\$4,650,721
	04-30415-CON	Informational services disaster recovery center.	\$3,500,000
	04-22943-MDF	Replacement of Bliss Building substation – date Extension.	\$0
Hungerford	05-30502-DTR	Terminate laundry services.	\$0
Johnson	05-30434-CON	Emergency Department replacement and expansion project	\$1,251,069
Lawrence & Memorial	04-30297-CON	Establish primary angioplasty service.	\$7,500
	04-30358-CON	Bed replacement project.	\$2,700,976
	05-30482-WVR	Replacement of two existing CT Scanners.	\$1,875,365
Manchester	05-30442-WVR	Waiver request to replace existing CT Scanner.	\$918,593
Middlesex	04-30367-CON	Expansion and upgrade of PET/CT and CT services.	\$1,104,508
	05-30508-CON	Hospital Information System replacement for revenue cycle systems.	\$3,500,000
MidState	05-30533-DTR	Establish the MidState Medical Diagnostic & Specialty Center.	\$505,320
	05-30447-DTR	Establish a sleep lab in Meriden.	\$4,500
	05-30426-CON	Construction of an administrative building.	\$7,377,000
	04-30222-MDF	Replacement of Radiation Oncology Simulator with a CT Simulator – increase in authorized expenditure.	\$75,000
Milford	05-30501-DTR	Relocation of Urgent Care Center.	\$583,230
	05-30512-DTR	Office building.	\$3,343,000
New Britain	03-30207-CON	Establish primary angioplasty service.	\$25,633
	05-30462-WVR	Replacement of cardiac catheterization laboratory equipment.	\$1,985,365
	04-30280-CON	Consolidate New Britain General Hospital & Bradley Memorial Hospital under a single license.	\$0
	04-30420-DTR	Change to Family Planning Clinic Services.	\$0

**APPENDIX G: FY 2005 CON ACTIVITY**

<b>Hospital Name</b>	<b>Docket Number</b>	<b>Activity Approved or Modified in FY 2005</b>	<b>Capital Cost</b>
New Milford	04-30356-CON	Establish lithotripsy service.	\$0
Norwalk	05-30099-MDF	Purchase and install replacement equipment for Information System ("ERP") – increase in authorized expenditure and date extension.	\$650,000
	05-30099-MD2	Purchase and install replacement equipment for Information System ("ERP") – additional increase in authorized expenditure and date extension.	\$504,000
	04-30334-CON	Closure of The Westport Clinic in Westport.	\$0
	04-30322-CON	Clinical Chemistry Laboratory Equipment Replacement and Automation.	\$1,200,000
	05-30556-DTR	Various repairs and maintenance to building.	\$5,200,000
	05-30466-CON	Renovate lobby.	\$4,300,000
	05-30294-MDF	Renovation of the Obstetrical Unit – increase in authorized expenditure.	\$800,000
	05-25552-MDF	Renovations to Radiology Department and acquisition of replacement equipment – increase in authorized expenditure.	\$800,000
	05-22953-MDF	Use a second mobile PET Scanner and upgrade both units to PET/CT capability – date extension.	\$0
	04-30395-CON	Renovation and expansion of Sleep Center Program.	\$3,600,000
Rockville	05-30441-WVR	Waiver request to replace existing angiography equipment.	\$499,488
Saint Francis	04-30407-CON	Construction of a new parking garage.	\$11,332,853
	05-30493-DTR	Medical Office Building in West Hartford.	\$0
	05-30429-CON	Acquisition of CyberKnife® for the Radiation Therapy Department.	\$5,231,282
	04-30406-DTR	Formation of a joint venture for diagnostic imaging services.	\$460,500
	04-30386-CON	Transfer ownership of Teamworks to other behavioral health providers.	\$0
	04-30368-WVR	Angiography laboratory equipment replacement.	\$1,636,830
	05-30476-WVR	Waiver request to replace existing Cancer Center Simulator.	\$678,296

**APPENDIX G: FY 2005 CON ACTIVITY**

<b>Hospital Name</b>	<b>Docket Number</b>	<b>Activity Approved or Modified in FY 2005</b>	<b>Capital Cost</b>
Saint Mary's	04-30400-CON	Emergency department renovation.	\$2,500,000
	05-30400-MDF	Emergency department renovation – increase in authorized expenditure.	\$250,000
	04-30385-DTR	Relocation of Occupational Medicine Services.	\$245,000
	04-30423-DTR	Proposal to become part-owner of Collaborative Lab Services, LLC.	\$0
	05-30200-MDF	Replace existing CT Scanner and mobile PET Scanner with fixed PET/CT Scanner at The Harold Leever Cancer Center – increase in authorized expenditure and date extension.	\$932,278
	04-30384-CON	Replacement of interventional radiology equipment.	\$1,255,201
	04-30413-WVR	Request to Waive CON requirements for the CT Scanner upgrade.	\$397,840
	04-30404-DTR	Changes in Bylaws of Slocum Corporation and St. Mary's Hospital.	\$0
Saint Raphael	04-30417-CON	Increase Bed Capacity by building out the Verdi Low Roof Building.	\$14,400,344
	04-30428-WVR	Replace cardiac catheterization equipment.	\$1,233,293
	05-30553-DTR	Acquisition of three replacement mammography units.	\$967,065
	04-30416-DTR	Provide senior assessment services in the town of Madison.	\$0
	04-30412-CON	Acquisition of da Vinci Surgical System.	\$1,500,000
	04-30282-CON	Replacement of telephone switchgear.	\$2,250,000
	04-30409-CON	Replacement of Laboratory Information System.	\$1,887,500
	05-30409-MDF	Replacement of Laboratory Information System – date extension.	\$0
Saint Vincent's	05-22953-MDF	Use of a second mobile PET Scanner and upgrade both units to PET/CT capability – date extension.	\$0
	04-30291-MDF	Replacement of Interventional Suite Radiology equipment – date extension.	\$0
	05-30292-MDF	Replacement of CT Scanner #1- date extension.	\$0
	05-30293-MDF	Replacement of CT Scanner #2- date extension.	\$0
	04-30333-CON	Replacement of electrophysiology laboratory equipment.	\$1,405,129
	05-30455-CON	Establish Monroe Immediate Health Care Center.	\$328,150
	05-30577-WVR	Replacement of cardiac catheterization laboratory equipment.	\$1,843,980

**APPENDIX G: FY 2005 CON ACTIVITY**

<b>Hospital Name</b>	<b>Docket Number</b>	<b>Activity Approved or Modified in FY 2005</b>	<b>Capital Cost</b>
Stamford	05-30156-MDF	Health Information System replacement –date extension.	\$0
	05-30369-MDF	Darien Imaging Center - MRI replacement – date extension.	\$0
	03-30159-CON	Cardiac catheterization ablation therapy.	\$195,000
	05-30354-MDF	Relocation and renovation of the Darien Imaging Center – site change.	\$0
	05-22953-MDF	Use of a second mobile PET Scanner and upgrade both units to PET/CT capability – date extension.	\$0
Waterbury	05-30167-MDF	St. Mary's Hospital Corp. And Waterbury Hospital Joint Cardiac Services Program – increase in authorized expenditure.	\$745,166
	05-30200-MDF	Replace existing CT Scanner and mobile PET Scanner with fixed PET/CT Scanner at The Harold Leever Cancer Center – increase in authorized expenditure and date extension.	\$932,278
Windham	05-22664-MDF	Master plan/facilities renovation – date extension.	\$0
Yale-New Haven	05-22954-MDF	Acquisition of stand-up MRI unit – increase in authorized expenditure.	\$90,000
	05-30244-MDF	YNHH North Pavilion Enabling project – increase in authorized expenditure.	\$3,500,000
	04-30388-CON	Perioperative information tracking system ("POINTS").	\$1,583,711
	04-30410-CON	Yale-New Haven Cancer Center and North Pavilion.	\$369,810,000
	05-30531-WVR	Replacement of electrophysiology laboratory.	\$1,530,000
	04-30421-CON	Patient monitor and station replacement.	\$6,500,000
	04-30422-DTR	Replacement of patient monitors in operating rooms.	\$998,468

**APPENDIX H: UTILIZATION MEASURES**

<b>FY 2005</b>								
<b>Utilization Measure</b>	<b>Patient Days</b>	<b>Discharges</b>	<b>Average Length of Stay</b>	<b>Staffed Beds</b>	<b>Licensed Beds</b>	<b>Occupancy of Staffed Beds</b>	<b>Occupancy of Licensed Beds</b>	<b>Full Time Equivalent</b>
<b>Source:</b>	<i>HBS Sched 500 - Column 8</i>	<i>HBS Sched 500</i>	<i>HBS Sched 500</i>	<i>HBS Sched 500</i>	<i>HBS Sched 500</i>	<i>HBS Sched 500</i>	<i>HBS Sched 500</i>	<i>HBS Sched 500</i>
BACKUS	52,666	11,917	4.42	188	233	77%	62%	1,372
BRADLEY	10,170	2,338	4.35	46	84	68%	37%	313
BRIDGEPORT	107,086	20,109	5.33	335	425	87%	69%	1,864
BRISTOL	36,810	8,054	4.57	154	154	65%	65%	915
CT CHILDREN'S	29,923	5,535	5.41	115	129	71%	63%	896
DANBURY	84,464	19,907	4.24	245	371	94%	62%	2,276
DAY KIMBALL	22,084	6,477	3.41	72	122	84%	50%	725
DEMPSEY	60,167	9,799	6.14	224	224	73%	73%	1,176
ESSENT SHARON	12,776	2,964	4.31	47	94	74%	37%	290
GREENWICH	45,560	11,920	3.82	194	206	64%	61%	1,435
GRIFFIN	31,585	7,220	4.37	89	180	97%	48%	830
HARTFORD	226,571	39,045	5.80	774	867	80%	72%	5,028
HUNGERFORD	27,206	6,205	4.38	116	122	64%	61%	680
JOHNSON	21,587	3,848	5.61	83	98	76%	64%	478
LAWRENCE	71,161	15,212	4.68	249	308	78%	63%	1,821
MANCHESTER	42,867	8,961	4.78	140	283	84%	41%	1,143
MIDSTATE	42,903	9,866	4.35	136	142	86%	83%	851
MIDDLESEX	54,000	12,502	4.32	175	297	84%	50%	1,738
MILFORD	23,273	5,058	4.60	68	118	94%	54%	536
NEW BRITAIN	75,269	17,610	4.27	290	362	71%	57%	1,692
NEW MILFORD	14,747	3,395	4.34	72	95	55%	42%	486
NORWALK	82,569	15,523	5.32	230	366	98%	62%	1,581
ROCKVILLE	15,620	3,971	3.93	66	118	65%	36%	440
ST. FRANCIS	162,087	32,175	5.04	564	682	79%	65%	3,303
ST. MARY'S	55,099	12,268	4.49	169	379	89%	40%	1,195
ST. RAPHAEL	134,509	24,841	5.41	474	533	78%	69%	2,824
ST. VINCENT'S	102,074	19,375	5.27	348	444	82%	64%	1,629
STAMFORD	79,550	17,464	4.56	319	330	68%	66%	1,755
WATERBURY	70,665	15,535	4.55	288	393	67%	49%	1,636
WINDHAM	20,261	5,207	3.89	87	144	64%	38%	538
YALE-NEW HAVEN	258,566	48,616	5.32	866	944	82%	75%	5,333
<b>STATEWIDE</b>	<b>2,073,875</b>	<b>422,917</b>	<b>4.91</b>	<b>7,223</b>	<b>9,247</b>	<b>79%</b>	<b>62%</b>	<b>46,779</b>

## APPENDIX I: GLOSSARY OF TERMS

**Bad Debts:** the income lost to a hospital because patients who were billed and from whom payment was expected did not pay amounts owed the hospital for services provided. Bad debts net of recoveries will become bad debt expense, if after reasonable collection efforts are made, the hospital determines that the accounts are uncollectible.

**Days Cash on Hand:** the average number of days of cash available to pay for expenses that the hospital maintains in its cash accounts. A higher number is favorable, since it indicates a greater ability of the hospital to meet its outstanding obligations.

**Days of Expenses in Accounts Payable:** the average number of days that are required for the hospital to meet its current liabilities. A lower number is favorable, since it indicates a more favorable liquidity position.

**Days of Revenue in Accounts Receivable:** the average number of days in collection that accounts receivable remains outstanding. A lower number is favorable, since it indicates good collection practices that result in sufficient cash flow and infrequent short-term financing.

**Disproportionate Share Hospital (DSH) Program Payments:** the payments provided to Connecticut's acute care hospitals based on each hospital's cost of uncompensated care and medical assistance underpayment as a percentage of the statewide total of hospital uncompensated care and medical assistance underpayment.

**Equity Financing Ratio:** the ratio related to the hospital's capital structure that indicates the percentage of total assets that have been financed from equity sources. A higher ratio is more favorable, since it indicates that the hospital has utilized a higher level of equity and a lower level of debt financing in acquiring plant and equipment assets.

**Free Care:** the difference between the hospital's published charges and the amount of reimbursement received for services provided to patients from whom reimbursement was not expected.

**Health System:** the hospital's parent corporation that controls both the hospital and other hospital affiliates.

**Hospital Operating Margin:** the ratio related to the hospital's profitability indicating the percentage of a total operating surplus or loss to the hospital's total operating revenue. A higher positive ratio indicates more favorable operating results.

**Hospital Total Margin:** the ratio related to the hospital's profitability indicating the percentage of a total operating and non-operating surplus or loss to the hospital's total operating revenue. A higher positive ratio indicates more favorable operating results.

**Operating Revenue:** the total of net patient revenue from the reimbursement of patient services from government and nongovernment payers plus other operating revenue.

**Non-Operating Revenue:** the unrestricted revenue not directly derived from providing patient services but obtained from either philanthropic or non-philanthropic sources.

**Payer Mix:** the proportion of each government or nongovernment payer's reimbursement to the hospital's total reimbursement for patient services. Payer mix is derived from the amount of net patient revenue that the hospital receives from each government and nongovernment payer.

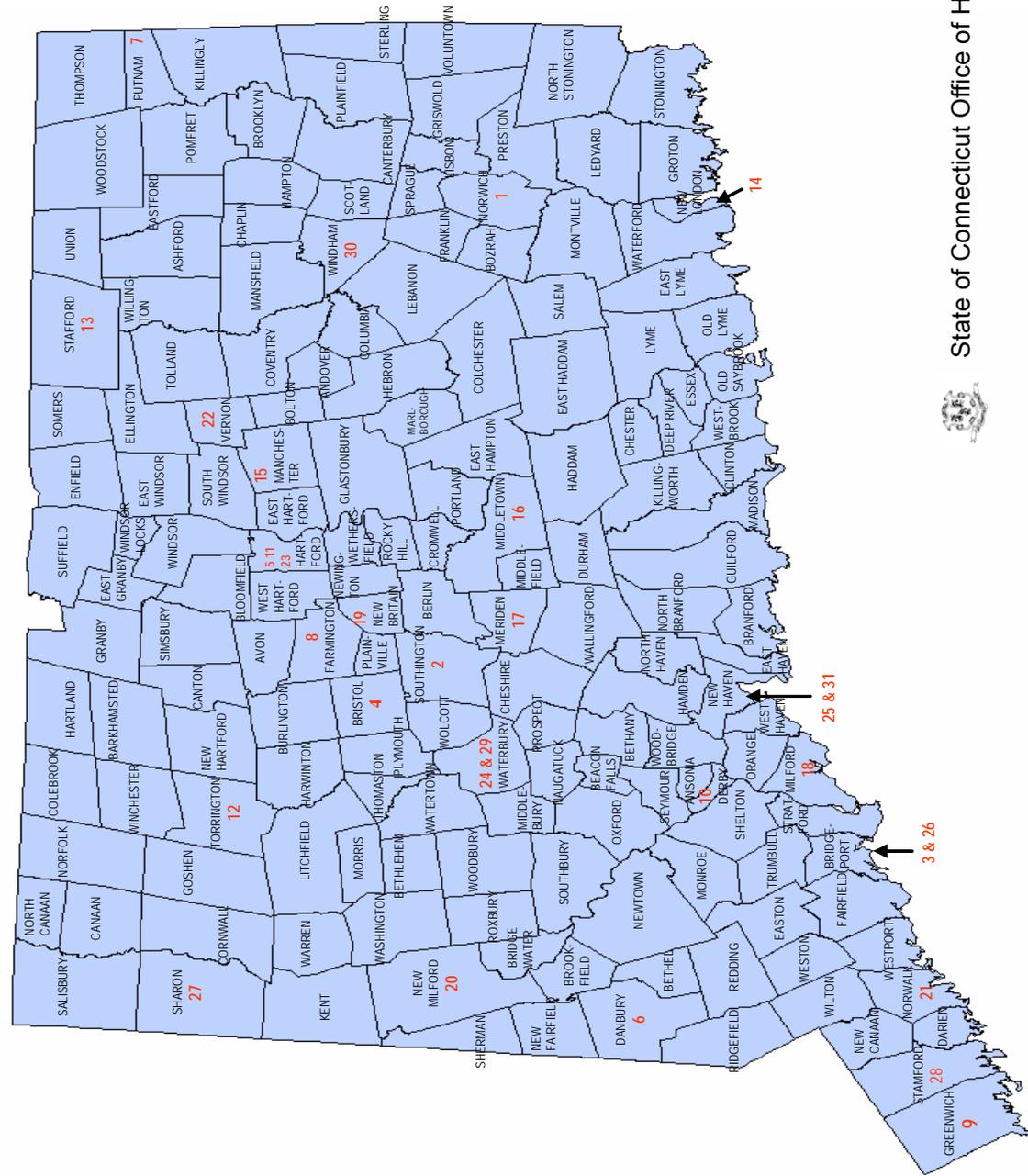
**Payment to Cost Ratio:** the ratio that indicates the percentage above or below cost that a hospital is reimbursed by a government or nongovernment payer. A ratio that is higher than 1.00 is favorable, since it indicates reimbursement by a payor that is greater than the cost of providing patient services. A ratio that is less than 1.00 is unfavorable, since it indicates reimbursement by a payer that is less than the cost of providing patient services.

**Ratio of Cost to Charges:** the ratio that indicates the percentage of total operating expense to the total of gross patient charges plus other operating revenue. A lower ratio is more favorable, since it indicates a greater difference between the cost and charges billed for providing patient services.

**Uncompensated Care:** the total amount of a hospital's free care and bad debts resulting from unreimbursed patient services.

## Connecticut Acute Care Hospitals and Medical Centers

1. William W. Backus Hospital
2. Bradley Memorial Hospital & Medical Center
3. Bridgeport Hospital
4. Bristol Hospital
5. Connecticut Children's Medical Center
6. Danbury Hospital
7. Day Kimball Hospital
8. John Dempsey Hospital
9. Greenwich Hospital
10. Griffin Hospital
11. Hartford Hospital
12. Charlotte Hungerford Hospital
13. Johnson Memorial Hospital
14. Lawrence & Memorial Hospital
15. Manchester Memorial Hospital
16. Middlesex Memorial Hospital
17. MidState Medical Center
18. Milford Hospital
19. New Britain General Hospital
20. New Milford Hospital
21. Norwalk Hospital
22. Rockville General Hospital
23. Saint Francis Hospital & Medical Center
24. Saint Mary's Hospital
25. Hospital of Saint Raphael
26. Saint Vincent's Medical Center
27. Essent-Sharon Hospital
28. Stamford Hospital
29. Waterbury Hospital
30. Windham Community Memorial Hospital
31. Yale-New Haven Hospital







State of Connecticut  
Office of Health Care Access

*M. Jodi Rell*  
Governor

*Cristine A. Vogel*  
Commissioner

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410 Capitol Avenue  
MS#13HCA  
PO Box 340308  
Hartford, CT 06134  
(860) 418-7001  
(800) 797-9688

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