

<b>STAMFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$6,765,949	\$9,668,000	\$2,902,051	43%
2	Short Term Investments	\$165,786	\$166,000	\$214	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$48,238,736	\$50,590,000	\$2,351,264	5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,465,067	\$2,254,000	\$788,933	54%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$5,273,018	\$5,144,000	(\$129,018)	-2%
8	Prepaid Expenses	\$2,525,075	\$3,690,000	\$1,164,925	46%
9	Other Current Assets	\$2,260,060	\$1,243,000	(\$1,017,060)	-45%
	<b>Total Current Assets</b>	<b>\$66,693,691</b>	<b>\$72,755,000</b>	<b>\$6,061,309</b>	<b>9%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$25,576,206	\$26,439,000	\$862,794	3%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$25,576,206</b>	<b>\$26,439,000</b>	<b>\$862,794</b>	<b>3%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$36,001,675	\$34,115,000	(\$1,886,675)	-5%
7	Other Noncurrent Assets	\$5,484,092	\$2,273,000	(\$3,211,092)	-59%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$440,762,227	\$458,928,000	\$18,165,773	4%
2	Less: Accumulated Depreciation	\$236,037,724	\$262,993,000	\$26,955,276	11%
	<b>Property, Plant and Equipment, Net</b>	<b>\$204,724,503</b>	<b>\$195,935,000</b>	<b>(\$8,789,503)</b>	<b>-4%</b>
3	Construction in Progress	\$29,565,121	\$14,792,000	(\$14,773,121)	-50%
	<b>Total Net Fixed Assets</b>	<b>\$234,289,624</b>	<b>\$210,727,000</b>	<b>(\$23,562,624)</b>	<b>-10%</b>
	<b>Total Assets</b>	<b>\$368,045,288</b>	<b>\$346,309,000</b>	<b>(\$21,736,288)</b>	<b>-6%</b>

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(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$20,272,866	\$24,296,000	\$4,023,134	20%
2	Salaries, Wages and Payroll Taxes	\$7,981,226	\$9,118,000	\$1,136,774	14%
3	Due To Third Party Payers	\$2,758,231	\$1,320,000	(\$1,438,231)	-52%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$8,570,645	\$6,003,000	(\$2,567,645)	-30%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$18,236,463	\$20,364,000	\$2,127,537	12%
	<b>Total Current Liabilities</b>	<b>\$57,819,431</b>	<b>\$61,101,000</b>	<b>\$3,281,569</b>	<b>6%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$111,003,223	\$110,395,000	(\$608,223)	-1%
	<b>Total Long Term Debt</b>	<b>\$111,003,223</b>	<b>\$110,395,000</b>	<b>(\$608,223)</b>	<b>-1%</b>
3	Accrued Pension Liability	\$24,149,415	\$63,748,000	\$39,598,585	164%
4	Other Long Term Liabilities	\$33,886,061	\$40,252,000	\$6,365,939	19%
	<b>Total Long Term Liabilities</b>	<b>\$169,038,699</b>	<b>\$214,395,000</b>	<b>\$45,356,301</b>	<b>27%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$111,130,289	\$42,615,000	(\$68,515,289)	-62%
2	Temporarily Restricted Net Assets	\$23,159,010	\$20,215,000	(\$2,944,010)	-13%
3	Permanently Restricted Net Assets	\$6,897,859	\$7,983,000	\$1,085,141	16%
	<b>Total Net Assets</b>	<b>\$141,187,158</b>	<b>\$70,813,000</b>	<b>(\$70,374,158)</b>	<b>-50%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$368,045,288</b>	<b>\$346,309,000</b>	<b>(\$21,736,288)</b>	<b>-6%</b>

<b>STAMFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2008 ACTUAL</b>	<b>FY 2009 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$995,360,949	\$1,157,017,320	\$161,656,371	16%
2	Less: Allowances	\$597,676,758	\$728,169,805	\$130,493,047	22%
3	Less: Charity Care	\$15,715,201	\$11,909,791	(\$3,805,410)	-24%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$381,968,990</b>	<b>\$416,937,724</b>	<b>\$34,968,734</b>	<b>9%</b>
5	Other Operating Revenue	\$21,030,483	\$23,523,556	\$2,493,073	12%
6	Net Assets Released from Restrictions	\$2,119,349	\$3,737,986	\$1,618,637	76%
	<b>Total Operating Revenue</b>	<b>\$405,118,822</b>	<b>\$444,199,266</b>	<b>\$39,080,444</b>	<b>10%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$140,256,631	\$154,502,813	\$14,246,182	10%
2	Fringe Benefits	\$30,158,207	\$33,982,479	\$3,824,272	13%
3	Physicians Fees	\$7,263,984	\$10,476,221	\$3,212,237	44%
4	Supplies and Drugs	\$36,116,193	\$40,455,414	\$4,339,221	12%
5	Depreciation and Amortization	\$22,754,170	\$26,955,434	\$4,201,264	18%
6	Bad Debts	\$44,824,866	\$47,934,677	\$3,109,811	7%
7	Interest	\$4,222,070	\$5,220,009	\$997,939	24%
8	Malpractice	\$11,023,186	\$10,211,990	(\$811,196)	-7%
9	Other Operating Expenses	\$92,514,531	\$95,780,842	\$3,266,311	4%
	<b>Total Operating Expenses</b>	<b>\$389,133,838</b>	<b>\$425,519,879</b>	<b>\$36,386,041</b>	<b>9%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$15,984,984</b>	<b>\$18,679,387</b>	<b>\$2,694,403</b>	<b>17%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$1,097,884	\$362,429	(\$735,455)	-67%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$5,303,955)	(\$1,902,592)	\$3,401,363	-64%
	<b>Total Non-Operating Revenue</b>	<b>(\$4,206,071)</b>	<b>(\$1,540,163)</b>	<b>\$2,665,908</b>	<b>-63%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$11,778,913</b>	<b>\$17,139,224</b>	<b>\$5,360,311</b>	<b>46%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$2,007,633	\$2,007,633	0%
	All Other Adjustments	\$0	(\$1,455,865)	(\$1,455,865)	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$551,768</b>	<b>\$551,768</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$11,778,913</b>	<b>\$17,690,992</b>	<b>\$5,912,079</b>	<b>50%</b>
	Principal Payments	\$0	\$33,476,000	\$33,476,000	0%

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$207,952,662	\$216,056,717	\$8,104,055	4%
2	MEDICARE MANAGED CARE	\$25,340,332	\$29,640,715	\$4,300,383	17%
3	MEDICAID	\$27,693,230	\$36,369,364	\$8,676,134	31%
4	MEDICAID MANAGED CARE	\$11,140,768	\$16,718,919	\$5,578,151	50%
5	CHAMPUS/TRICARE	\$372,628	\$235,250	(\$137,378)	-37%
6	COMMERCIAL INSURANCE	\$44,521,777	\$41,642,818	(\$2,878,959)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$121,115,613	\$130,641,867	\$9,526,254	8%
8	WORKER'S COMPENSATION	\$3,734,334	\$5,143,937	\$1,409,603	38%
9	SELF- PAY/UNINSURED	\$17,076,371	\$21,486,553	\$4,410,182	26%
10	SAGA	\$15,450,364	\$21,092,910	\$5,642,546	37%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$474,398,079</b>	<b>\$519,029,050</b>	<b>\$44,630,971</b>	<b>9%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$125,048,765	\$153,964,334	\$28,915,569	23%
2	MEDICARE MANAGED CARE	\$15,736,087	\$24,255,325	\$8,519,238	54%
3	MEDICAID	\$13,550,474	\$17,569,966	\$4,019,492	30%
4	MEDICAID MANAGED CARE	\$20,543,587	\$28,297,687	\$7,754,100	38%
5	CHAMPUS/TRICARE	\$140,660	\$341,637	\$200,977	143%
6	COMMERCIAL INSURANCE	\$81,663,448	\$94,782,946	\$13,119,498	16%
7	NON-GOVERNMENT MANAGED CARE	\$209,926,460	\$261,111,452	\$51,184,992	24%
8	WORKER'S COMPENSATION	\$6,038,493	\$7,325,470	\$1,286,977	21%
9	SELF- PAY/UNINSURED	\$35,308,931	\$38,147,950	\$2,839,019	8%
10	SAGA	\$7,614,525	\$12,191,496	\$4,576,971	60%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$515,571,430</b>	<b>\$637,988,263</b>	<b>\$122,416,833</b>	<b>24%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$333,001,427	\$370,021,051	\$37,019,624	11%
2	MEDICARE MANAGED CARE	\$41,076,419	\$53,896,040	\$12,819,621	31%
3	MEDICAID	\$41,243,704	\$53,939,330	\$12,695,626	31%
4	MEDICAID MANAGED CARE	\$31,684,355	\$45,016,606	\$13,332,251	42%
5	CHAMPUS/TRICARE	\$513,288	\$576,887	\$63,599	12%
6	COMMERCIAL INSURANCE	\$126,185,225	\$136,425,764	\$10,240,539	8%
7	NON-GOVERNMENT MANAGED CARE	\$331,042,073	\$391,753,319	\$60,711,246	18%
8	WORKER'S COMPENSATION	\$9,772,827	\$12,469,407	\$2,696,580	28%
9	SELF- PAY/UNINSURED	\$52,385,302	\$59,634,503	\$7,249,201	14%
10	SAGA	\$23,064,889	\$33,284,406	\$10,219,517	44%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL GROSS REVENUE</b>	<b>\$989,969,509</b>	<b>\$1,157,017,313</b>	<b>\$167,047,804</b>	<b>17%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$61,374,693	\$62,259,652	\$884,959	1%
2	MEDICARE MANAGED CARE	\$7,688,994	\$7,580,994	(\$108,000)	-1%
3	MEDICAID	\$7,834,345	\$9,251,605	\$1,417,260	18%
4	MEDICAID MANAGED CARE	\$2,424,992	\$4,621,868	\$2,196,876	91%
5	CHAMPUS/TRICARE	\$83,356	\$53,861	(\$29,495)	-35%
6	COMMERCIAL INSURANCE	\$21,621,619	\$21,126,598	(\$495,021)	-2%
7	NON-GOVERNMENT MANAGED CARE	\$49,140,776	\$50,937,545	\$1,796,769	4%
8	WORKER'S COMPENSATION	\$2,497,731	\$3,261,402	\$763,671	31%
9	SELF- PAY/UNINSURED	\$768,068	\$473,462	(\$294,606)	-38%
10	SAGA	\$3,287,676	\$2,167,500	(\$1,120,176)	-34%
11	OTHER	\$0	\$0	\$0	0%

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FISCAL YEAR 2009  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$156,722,250</b>	<b>\$161,734,487</b>	<b>\$5,012,237</b>	<b>3%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$20,260,950	\$22,676,376	\$2,415,426	12%
2	MEDICARE MANAGED CARE	\$2,687,312	\$3,516,547	\$829,235	31%
3	MEDICAID	\$2,285,883	\$2,984,227	\$698,344	31%
4	MEDICAID MANAGED CARE	\$3,874,227	\$5,003,005	\$1,128,778	29%
5	CHAMPUS/TRICARE	\$78,594	\$126,599	\$48,005	61%
6	COMMERCIAL INSURANCE	\$52,607,532	\$58,993,535	\$6,386,003	12%
7	NON-GOVERNMENT MANAGED CARE	\$99,917,487	\$118,143,235	\$18,225,748	18%
8	WORKER'S COMPENSATION	\$3,403,550	\$5,020,545	\$1,616,995	48%
9	SELF- PAY/UNINSURED	\$1,929,713	\$1,764,297	(\$165,416)	-9%
10	SAGA	\$914,112	\$1,493,424	\$579,312	63%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$187,959,360</b>	<b>\$219,721,790</b>	<b>\$31,762,430</b>	<b>17%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$81,635,643	\$84,936,028	\$3,300,385	4%
2	MEDICARE MANAGED CARE	\$10,376,306	\$11,097,541	\$721,235	7%
3	MEDICAID	\$10,120,228	\$12,235,832	\$2,115,604	21%
4	MEDICAID MANAGED CARE	\$6,299,219	\$9,624,873	\$3,325,654	53%
5	CHAMPUS/TRICARE	\$161,950	\$180,460	\$18,510	11%
6	COMMERCIAL INSURANCE	\$74,229,151	\$80,120,133	\$5,890,982	8%
7	NON-GOVERNMENT MANAGED CARE	\$149,058,263	\$169,080,780	\$20,022,517	13%
8	WORKER'S COMPENSATION	\$5,901,281	\$8,281,947	\$2,380,666	40%
9	SELF- PAY/UNINSURED	\$2,697,781	\$2,237,759	(\$460,022)	-17%
10	SAGA	\$4,201,788	\$3,660,924	(\$540,864)	-13%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL NET REVENUE</b>	<b>\$344,681,610</b>	<b>\$381,456,277</b>	<b>\$36,774,667</b>	<b>11%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	5,131	4,487	(644)	-13%
2	MEDICARE MANAGED CARE	632	606	(26)	-4%
3	MEDICAID	1,463	1,363	(100)	-7%
4	MEDICAID MANAGED CARE	746	922	176	24%
5	CHAMPUS/TRICARE	7	11	4	57%
6	COMMERCIAL INSURANCE	1,670	1,522	(148)	-9%
7	NON-GOVERNMENT MANAGED CARE	5,118	4,833	(285)	-6%
8	WORKER'S COMPENSATION	78	83	5	6%
9	SELF- PAY/UNINSURED	590	590	0	0%
10	SAGA	421	471	50	12%
11	OTHER	0	0	0	0%
	<b>TOTAL DISCHARGES</b>	<b>15,856</b>	<b>14,888</b>	<b>(968)</b>	<b>-6%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	32,145	30,298	(1,847)	-6%
2	MEDICARE MANAGED CARE	3,534	3,722	188	5%
3	MEDICAID	6,696	6,979	283	4%
4	MEDICAID MANAGED CARE	2,192	3,165	973	44%
5	CHAMPUS/TRICARE	54	34	(20)	-37%
6	COMMERCIAL INSURANCE	6,858	5,662	(1,196)	-17%
7	NON-GOVERNMENT MANAGED CARE	19,814	18,917	(897)	-5%
8	WORKER'S COMPENSATION	267	415	148	55%
9	SELF- PAY/UNINSURED	2,335	2,636	301	13%
10	SAGA	3,076	3,444	368	12%
11	OTHER	0	0	0	0%
	<b>TOTAL PATIENT DAYS</b>	<b>76,971</b>	<b>75,272</b>	<b>(1,699)</b>	<b>-2%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	49,817	53,834	4,017	8%
2	MEDICARE MANAGED CARE	6,352	8,295	1,943	31%
3	MEDICAID	8,913	8,826	(87)	-1%
4	MEDICAID MANAGED CARE	16,769	20,914	4,145	25%
5	CHAMPUS/TRICARE	109	178	69	63%
6	COMMERCIAL INSURANCE	43,912	44,700	788	2%
7	NON-GOVERNMENT MANAGED CARE	99,627	113,264	13,637	14%
8	WORKER'S COMPENSATION	2,204	2,041	(163)	-7%
9	SELF- PAY/UNINSURED	21,748	25,136	3,388	16%
10	SAGA	3,342	4,973	1,631	49%
11	OTHER	0	0	0	0%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>252,793</b>	<b>282,161</b>	<b>29,368</b>	<b>12%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$16,680,735	\$32,819,293	\$16,138,558	97%
2	MEDICARE MANAGED CARE	\$2,043,210	\$4,717,660	\$2,674,450	131%
3	MEDICAID	\$4,334,336	\$7,267,414	\$2,933,078	68%
4	MEDICAID MANAGED CARE	\$9,691,446	\$13,553,180	\$3,861,734	40%
5	CHAMPUS/TRICARE	\$78,401	\$139,162	\$60,761	78%
6	COMMERCIAL INSURANCE	\$12,563,502	\$19,646,513	\$7,083,011	56%
7	NON-GOVERNMENT MANAGED CARE	\$27,074,908	\$40,295,856	\$13,220,948	49%
8	WORKER'S COMPENSATION	\$1,724,117	\$2,104,493	\$380,376	22%
9	SELF- PAY/UNINSURED	\$16,880,762	\$21,973,122	\$5,092,360	30%
10	SAGA	\$2,799,758	\$5,841,780	\$3,042,022	109%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$93,871,175</b>	<b>\$148,358,473</b>	<b>\$54,487,298</b>	<b>58%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$2,014,871	\$4,265,870	\$2,250,999	112%
2	MEDICARE MANAGED CARE	\$364,427	\$723,988	\$359,561	99%
3	MEDICAID	\$787,347	\$1,187,722	\$400,375	51%
4	MEDICAID MANAGED CARE	\$1,546,136	\$2,085,644	\$539,508	35%
5	CHAMPUS/TRICARE	\$54,701	\$61,494	\$6,793	12%
6	COMMERCIAL INSURANCE	\$9,383,173	\$14,204,712	\$4,821,539	51%
7	NON-GOVERNMENT MANAGED CARE	\$13,553,270	\$19,453,320	\$5,900,050	44%
8	WORKER'S COMPENSATION	\$1,213,352	\$1,737,225	\$523,873	43%
9	SELF- PAY/UNINSURED	\$212,238	\$432,348	\$220,110	104%
10	SAGA	\$433,356	\$936,037	\$502,681	116%
11	OTHER	\$0	\$0	\$0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$29,562,871</b>	<b>\$45,088,360</b>	<b>\$15,525,489</b>	<b>53%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	5,114	5,717	603	12%
2	MEDICARE MANAGED CARE	515	709	194	38%
3	MEDICAID	1,895	2,226	331	17%
4	MEDICAID MANAGED CARE	5,886	6,696	810	14%
5	CHAMPUS/TRICARE	34	51	17	50%
6	COMMERCIAL INSURANCE	4,966	4,672	(294)	-6%
7	NON-GOVERNMENT MANAGED CARE	9,974	10,012	38	0%
8	WORKER'S COMPENSATION	894	823	(71)	-8%
9	SELF- PAY/UNINSURED	6,694	6,691	(3)	0%
10	SAGA	1,141	1,489	348	30%
11	OTHER	0	0	0	0%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>37,113</b>	<b>39,086</b>	<b>1,973</b>	<b>5%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$44,863,659	\$51,850,186	\$6,986,527	16%
2	Physician Salaries	\$15,310,689	\$17,126,431	\$1,815,742	12%
3	Non-Nursing, Non-Physician Salaries	\$80,082,283	\$85,526,196	\$5,443,913	7%
	<b>Total Salaries &amp; Wages</b>	<b>\$140,256,631</b>	<b>\$154,502,813</b>	<b>\$14,246,182</b>	<b>10%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$9,646,656	\$11,404,309	\$1,757,653	18%
2	Physician Fringe Benefits	\$3,292,129	\$3,766,913	\$474,784	14%
3	Non-Nursing, Non-Physician Fringe Benefits	\$17,219,422	\$18,811,257	\$1,591,835	9%
	<b>Total Fringe Benefits</b>	<b>\$30,158,207</b>	<b>\$33,982,479</b>	<b>\$3,824,272</b>	<b>13%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$6,897,572	\$2,317,222	(\$4,580,350)	-66%
2	Physician Fees	\$7,263,984	\$10,476,221	\$3,212,237	44%
3	Non-Nursing, Non-Physician Fees	\$26,354,212	\$31,209,286	\$4,855,074	18%
	<b>Total Contractual Labor Fees</b>	<b>\$40,515,768</b>	<b>\$44,002,729</b>	<b>\$3,486,961</b>	<b>9%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$28,504,460	\$32,689,058	\$4,184,598	15%
2	Pharmaceutical Costs	\$7,611,733	\$7,766,356	\$154,623	2%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$36,116,193</b>	<b>\$40,455,414</b>	<b>\$4,339,221</b>	<b>12%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$17,860,525	\$21,697,427	\$3,836,902	21%
2	Depreciation-Equipment	\$4,893,645	\$5,258,007	\$364,362	7%
3	Amortization	\$0	\$0	\$0	0%
	<b>Total Depreciation and Amortization</b>	<b>\$22,754,170</b>	<b>\$26,955,434</b>	<b>\$4,201,264</b>	<b>18%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$44,824,866	\$47,934,677	\$3,109,811	7%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$4,222,070	\$5,220,009	\$997,939	24%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$11,023,186	\$10,211,990	(\$811,196)	-7%
<b>I. Utilities:</b>					
1	Water	\$140,243	\$138,005	(\$2,238)	-2%
2	Natural Gas	\$1,992,565	\$2,249,485	\$256,920	13%
3	Oil	\$8,794	\$1,396	(\$7,398)	-84%
4	Electricity	\$2,883,127	\$2,990,896	\$107,769	4%
5	Telephone	\$592,576	\$730,536	\$137,960	23%
6	Other Utilities	\$160,043	\$264,523	\$104,480	65%
	<b>Total Utilities</b>	<b>\$5,777,348</b>	<b>\$6,374,841</b>	<b>\$597,493</b>	<b>10%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$484,315	\$392,830	(\$91,485)	-19%
2	Legal Fees	\$2,007,968	\$2,222,089	\$214,121	11%
3	Consulting Fees	\$10,178,341	\$5,295,027	(\$4,883,314)	-48%
4	Dues and Membership	\$1,052,663	\$1,301,023	\$248,360	24%
5	Equipment Leases	\$1,912,462	\$1,808,951	(\$103,511)	-5%
6	Building Leases	\$6,007,809	\$6,391,291	\$383,482	6%
7	Repairs and Maintenance	\$8,684,635	\$10,333,577	\$1,648,942	19%
8	Insurance	\$709,906	\$852,811	\$142,905	20%

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$863,624	\$646,371	(\$217,253)	-25%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$10,202,367	\$10,466,066	\$263,699	3%
13	Licenses and Subscriptions	\$148,924	\$74,036	(\$74,888)	-50%
14	Postage and Shipping	\$173,593	\$396,344	\$222,751	128%
15	Advertising	\$1,940,684	\$2,101,579	\$160,895	8%
16	Other Business Expenses	\$8,691,922	\$12,916,936	\$4,225,014	49%
	<b>Total Business Expenses</b>	<b>\$53,059,213</b>	<b>\$55,198,931</b>	<b>\$2,139,718</b>	<b>4%</b>
<b>K.</b>	<b><u>Other Operating Expense:</u></b>				
1	Miscellaneous Other Operating Expenses	\$426,186	\$680,562	\$254,376	60%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$389,133,838</b>	<b>\$425,519,879</b>	<b>\$36,386,041</b>	<b>9%</b>
	<b>*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				
<b>II.</b>	<b><u>OPERATING EXPENSE BY DEPARTMENT</u></b>				
<b>A.</b>	<b><u>General Services:</u></b>				
1	General Administration	\$94,396,076	\$106,374,739	\$11,978,663	13%
2	General Accounting	\$3,948,144	\$3,585,914	(\$362,230)	-9%
3	Patient Billing & Collection	\$9,266,016	\$9,054,279	(\$211,737)	-2%
4	Admitting / Registration Office	\$3,431,046	\$3,227,615	(\$203,431)	-6%
5	Data Processing	\$9,236,868	\$11,903,548	\$2,666,680	29%
6	Communications	\$1,289,386	\$242	(\$1,289,144)	-100%
7	Personnel	\$5,870,046	\$4,874,092	(\$995,954)	-17%
8	Public Relations	\$978,205	\$1,200,943	\$222,738	23%
9	Purchasing	\$6,809,517	\$6,433,526	(\$375,991)	-6%
10	Dietary and Cafeteria	\$5,313,661	\$5,621,162	\$307,501	6%
11	Housekeeping	\$4,589,430	\$4,651,470	\$62,040	1%
12	Laundry & Linen	\$1,805,391	\$2,112,227	\$306,836	17%
13	Operation of Plant	\$1,011,953	\$1,029,482	\$17,529	2%
14	Security	\$1,525,530	\$1,535,974	\$10,444	1%
15	Repairs and Maintenance	\$11,785,745	\$13,378,768	\$1,593,023	14%
16	Central Sterile Supply	\$1,865,453	\$1,938,081	\$72,628	4%
17	Pharmacy Department	\$10,620,216	\$11,269,195	\$648,979	6%
18	Other General Services	\$9,503,502	\$9,527,483	\$23,981	0%
	<b>Total General Services</b>	<b>\$183,246,185</b>	<b>\$197,718,740</b>	<b>\$14,472,555</b>	<b>8%</b>
<b>B.</b>	<b><u>Professional Services:</u></b>				
1	Medical Care Administration	\$2,161,923	\$2,850,549	\$688,626	32%
2	Residency Program	\$4,737,685	\$4,984,663	\$246,978	5%
3	Nursing Services Administration	\$6,926,161	\$5,018,165	(\$1,907,996)	-28%
4	Medical Records	\$2,529,948	\$2,878,991	\$349,043	14%
5	Social Service	\$683,734	\$761,839	\$78,105	11%
6	Other Professional Services	\$3,486,963	\$3,550,451	\$63,488	2%
	<b>Total Professional Services</b>	<b>\$20,526,414</b>	<b>\$20,044,658</b>	<b>(\$481,756)</b>	<b>-2%</b>
<b>C.</b>	<b><u>Special Services:</u></b>				
1	Operating Room	\$40,638,960	\$41,923,041	\$1,284,081	3%
2	Recovery Room	\$4,517,183	\$4,746,152	\$228,969	5%
3	Anesthesiology	\$492,317	\$477,301	(\$15,016)	-3%
4	Delivery Room	\$5,665,439	\$6,145,370	\$479,931	8%
5	Diagnostic Radiology	\$9,098,042	\$9,247,540	\$149,498	2%
6	Diagnostic Ultrasound	\$1,839,123	\$1,913,546	\$74,423	4%
7	Radiation Therapy	\$2,209,253	\$3,687,445	\$1,478,192	67%

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

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
8	Radioisotopes	\$1,547,462	\$1,485,363	(\$62,099)	-4%
9	CT Scan	\$1,509,455	\$1,668,588	\$159,133	11%
10	Laboratory	\$12,903,151	\$15,438,972	\$2,535,821	20%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$5,126,390	\$7,993,591	\$2,867,201	56%
13	Electrocardiology	\$3,029,940	\$3,929,385	\$899,445	30%
14	Electroencephalography	\$299,508	\$351,319	\$51,811	17%
15	Occupational Therapy	\$180,321	\$206,727	\$26,406	15%
16	Speech Pathology	\$37,138	\$34,970	(\$2,168)	-6%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$3,283,449	\$3,363,984	\$80,535	2%
19	Pulmonary Function	\$860,463	\$982,155	\$121,692	14%
20	Intravenous Therapy	\$654,502	\$753,337	\$98,835	15%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$469,410	\$494,722	\$25,312	5%
24	Emergency Room	\$6,965,545	\$7,767,195	\$801,650	12%
25	MRI	\$1,905,659	\$1,959,146	\$53,487	3%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$3,307,527	\$3,666,007	\$358,480	11%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$0	\$0	0%
	<b>Total Special Services</b>	<b>\$106,540,237</b>	<b>\$118,235,856</b>	<b>\$11,695,619</b>	<b>11%</b>
<b>D.</b>	<b><u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$30,929,060	\$34,923,222	\$3,994,162	13%
2	Intensive Care Unit	\$6,249,886	\$7,407,067	\$1,157,181	19%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$3,484,144	\$3,731,737	\$247,593	7%
5	Pediatric Unit	\$4,493,823	\$4,649,542	\$155,719	3%
6	Maternity Unit	\$4,795,302	\$5,629,735	\$834,433	17%
7	Newborn Nursery Unit	\$1,581,576	\$1,963,580	\$382,004	24%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$1,757,902	\$2,451,418	\$693,516	39%
10	Ambulatory Surgery	\$2,682,722	\$2,977,292	\$294,570	11%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$5,594,257	\$7,272,195	\$1,677,938	30%
13	Other Routine Services	\$0	\$0	\$0	0%
	<b>Total Routine Services</b>	<b>\$61,568,672</b>	<b>\$71,005,788</b>	<b>\$9,437,116</b>	<b>15%</b>
<b>E.</b>	<b><u>Other Departments:</u></b>				
1	Miscellaneous Other Departments	\$17,252,330	\$18,514,837	\$1,262,507	7%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$389,133,838</b>	<b>\$425,519,879</b>	<b>\$36,386,041</b>	<b>9%</b>
	<b>*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$333,269,000	\$ 381,968,990	\$416,937,724
2	Other Operating Revenue	18,398,213	23,149,832	27,261,542
3	Total Operating Revenue	\$351,667,213	\$405,118,822	\$444,199,266
4	Total Operating Expenses	341,537,208	389,133,838	425,519,879
5	Income/(Loss) From Operations	\$10,130,005	\$15,984,984	\$18,679,387
6	Total Non-Operating Revenue	3,300,297	(4,206,071)	(988,395)
7	Excess/(Deficiency) of Revenue Over Expenses	\$13,430,302	\$11,778,913	\$17,690,992
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	2.85%	3.99%	4.21%
2	Hospital Non Operating Margin	0.93%	-1.05%	-0.22%
3	Hospital Total Margin	3.78%	2.94%	3.99%
4	Income/(Loss) From Operations	\$10,130,005	\$15,984,984	\$18,679,387
5	Total Operating Revenue	\$351,667,213	\$405,118,822	\$444,199,266
6	Total Non-Operating Revenue	\$3,300,297	(\$4,206,071)	(\$988,395)
7	Total Revenue	\$354,967,510	\$400,912,751	\$443,210,871
8	Excess/(Deficiency) of Revenue Over Expenses	\$13,430,302	\$11,778,913	\$17,690,992
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$110,051,759	\$111,130,289	\$42,615,000
2	Hospital Total Net Assets	\$142,777,414	\$141,187,158	\$70,813,000
3	Hospital Change in Total Net Assets	\$142,777,414	(\$1,590,256)	(\$70,374,158)
4	Hospital Change in Total Net Assets %	0.0%	-1.1%	-49.8%
<b>D. <u>Cost Data Summary</u></b>				
1	<b><u>Ratio of Cost to Charges</u></b>	<b>0.40</b>	<b>0.38</b>	<b>0.36</b>
2	Total Operating Expenses	\$339,535,205	\$389,133,838	\$425,519,879
3	Total Gross Revenue	\$826,773,019	\$989,969,511	\$1,157,017,313
4	Total Other Operating Revenue	\$23,887,439	\$23,149,832	\$23,523,556
5	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.25</b>	<b>1.28</b>	<b>1.32</b>
6	Total Non-Government Payments	\$199,763,626	\$231,886,476	\$259,720,619

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
7	Total Uninsured Payments	\$2,763,296	\$2,697,781	\$2,237,759
8	Total Non-Government Charges	\$442,065,022	\$519,385,427	\$600,282,993
9	Total Uninsured Charges	\$47,454,609	\$52,385,302	\$59,634,503
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.69</b>	<b>0.64</b>	<b>0.63</b>
11	Total Medicare Payments	\$83,782,798	\$92,011,949	\$96,033,569
12	Total Medicare Charges	\$303,948,231	\$374,077,846	\$423,917,091
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.49</b>	<b>0.59</b>	<b>0.61</b>
14	Total Medicaid Payments	\$12,859,146	\$16,419,447	\$21,860,705
15	Total Medicaid Charges	\$65,262,385	\$72,928,059	\$98,955,936
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$19,424,296</b>	<b>\$23,253,123</b>	<b>\$21,570,630</b>
17	Charity Care	\$14,266,408	\$15,715,201	\$11,909,791
18	Bad Debts	\$34,398,592	\$44,824,866	\$47,934,677
19	Total Uncompensated Care	\$48,665,000	\$60,540,067	\$59,844,468
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>5.7%</b>	<b>6.0%</b>	<b>5.1%</b>
21	Total Operating Expenses	\$339,535,205	\$389,133,838	\$425,519,879
<b>E. <u>Liquidity Measures Summary</u></b>				
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.39</b>	<b>1.15</b>	<b>1.19</b>
2	Total Current Assets	\$68,485,440	\$66,693,691	\$72,755,000
3	Total Current Liabilities	\$49,269,323	\$57,819,431	\$61,101,000
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>20</b>	<b>7</b>	<b>9</b>
5	Cash and Cash Equivalents	\$17,242,346	\$6,765,949	\$9,668,000
6	Short Term Investments	164,746	165,786	166,000
7	Total Cash and Short Term Investments	\$17,407,092	\$6,931,735	\$9,834,000
8	Total Operating Expenses	\$341,537,208	\$389,133,838	\$425,519,879
9	Depreciation Expense	\$21,666,538	\$22,754,170	\$26,955,434
10	Operating Expenses less Depreciation Expense	\$319,870,670	\$366,379,668	\$398,564,445
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>42.34</b>	<b>43.46</b>	<b>43.13</b>

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2007</b>	<b>FY 2008</b>	<b>FY 2009</b>
12	Net Patient Accounts Receivable	\$ 40,899,300	\$ 48,238,736	\$ 50,590,000
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$2,244,000	\$2,758,231	\$1,320,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 38,655,300	\$ 45,480,505	\$ 49,270,000
16	Total Net Patient Revenue	\$333,269,000	\$ 381,968,990	\$ 416,937,724
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>56.22</b>	<b>57.60</b>	<b>55.96</b>
18	Total Current Liabilities	\$49,269,323	\$57,819,431	\$61,101,000
19	Total Operating Expenses	\$341,537,208	\$389,133,838	\$425,519,879
20	Depreciation Expense	\$21,666,538	\$22,754,170	\$26,955,434
21	Total Operating Expenses less Depreciation Expense	\$319,870,670	\$366,379,668	\$398,564,445
<b>F.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>42.4</b>	<b>38.4</b>	<b>20.4</b>
2	Total Net Assets	\$142,777,414	\$141,187,158	\$70,813,000
3	Total Assets	\$336,838,953	\$368,045,288	\$346,309,000
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>24.4</b>	<b>20.5</b>	<b>26.0</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$13,430,302	\$11,778,913	\$17,690,992
6	Depreciation Expense	\$21,666,538	\$22,754,170	\$26,955,434
7	Excess of Revenues Over Expenses and Depreciation Expense	\$35,096,840	\$34,533,083	\$44,646,426
8	Total Current Liabilities	\$49,269,323	\$57,819,431	\$61,101,000
9	Total Long Term Debt	\$94,573,686	\$111,003,223	\$110,395,000
10	Total Current Liabilities and Total Long Term Debt	\$143,843,009	\$168,822,654	\$171,496,000
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>39.8</b>	<b>44.0</b>	<b>60.9</b>
12	Total Long Term Debt	\$94,573,686	\$111,003,223	\$110,395,000
13	Total Net Assets	\$142,777,414	\$141,187,158	\$70,813,000
14	Total Long Term Debt and Total Net Assets	\$237,351,100	\$252,190,381	\$181,208,000
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>8.6</b>	<b>9.2</b>	<b>1.3</b>
16	Excess Revenues over Expenses	\$13,430,302	\$11,778,913	\$17,690,992
17	Interest Expense	\$4,626,930	\$4,222,070	\$5,220,009
18	Depreciation and Amortization Expense	\$21,666,538	\$22,754,170	\$26,955,434

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
19	Principal Payments	\$0	\$0	\$33,476,000
<b>G. <u>Other Financial Ratios</u></b>				
20	<b><u>Average Age of Plant</u></b>	<b>9.9</b>	<b>10.4</b>	<b>9.8</b>
21	Accumulated Depreciation	\$213,832,149	\$236,037,724	\$262,993,000
22	Depreciation and Amortization Expense	\$21,666,538	\$22,754,170	\$26,955,434
<b>H. <u>Utilization Measures Summary</u></b>				
1	Patient Days	73,908	76,971	75,272
2	Discharges	16,672	15,856	14,888
3	ALOS	4.4	4.9	5.1
4	Staffed Beds	319	319	321
5	Available Beds	-	-	330
6	Licensed Beds	330	330	330
6	Occupancy of Staffed Beds	63.5%	66.1%	64.2%
7	Occupancy of Available Beds	61.4%	63.9%	62.5%
8	Full Time Equivalent Employees	1,774.5	1,879.3	1,898.4
<b>I. <u>Hospital Gross Revenue Payer Mix Percentage</u></b>				
1	Non-Government Gross Revenue Payer Mix Percentage	47.7%	47.2%	46.7%
2	Medicare Gross Revenue Payer Mix Percentage	36.8%	37.8%	36.6%
3	Medicaid Gross Revenue Payer Mix Percentage	7.9%	7.4%	8.6%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	1.8%	2.3%	2.9%
5	Uninsured Gross Revenue Payer Mix Percentage	5.7%	5.3%	5.2%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.0%	0.1%	0.0%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$394,610,413	\$467,000,125	\$540,648,490
9	Medicare Gross Revenue (Charges)	\$303,948,231	\$374,077,846	\$423,917,091
10	Medicaid Gross Revenue (Charges)	\$65,262,385	\$72,928,059	\$98,955,936
11	Other Medical Assistance Gross Revenue (Charges)	\$15,223,978	\$23,064,891	\$33,284,406
12	Uninsured Gross Revenue (Charges)	\$47,454,609	\$52,385,302	\$59,634,503
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$273,403	\$513,288	\$576,887
14	Total Gross Revenue (Charges)	\$826,773,019	\$989,969,511	\$1,157,017,313
<b>J. <u>Hospital Net Revenue Payer Mix Percentage</u></b>				
1	Non-Government Net Revenue Payer Mix Percentage	65.9%	66.5%	67.5%

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
2	Medicare Net Revenue Payer Mix Percentage	28.0%	26.7%	25.2%
3	Medicaid Net Revenue Payer Mix Percentage	4.3%	4.8%	5.7%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.9%	1.2%	1.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.9%	0.8%	0.6%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$197,000,330	\$229,188,695	\$257,482,860
9	Medicare Net Revenue (Payments)	\$83,782,798	\$92,011,949	\$96,033,569
10	Medicaid Net Revenue (Payments)	\$12,859,146	\$16,419,447	\$21,860,705
11	Other Medical Assistance Net Revenue (Payments)	\$2,561,989	\$4,201,788	\$3,660,924
12	Uninsured Net Revenue (Payments)	\$2,763,296	\$2,697,781	\$2,237,759
13	CHAMPUS / TRICARE Net Revenue Payments)	\$130,032	\$161,950	\$180,460
14	Total Net Revenue (Payments)	\$299,097,591	\$344,681,610	\$381,456,277
<b>K.</b>	<b><u>Discharges</u></b>			
1	Non-Government (Including Self Pay / Uninsured)	8,219	7,456	7,028
2	Medicare	5,792	5,763	5,093
3	Medical Assistance	2,653	2,630	2,756
4	Medicaid	2,218	2,209	2,285
5	Other Medical Assistance	435	421	471
6	CHAMPUS / TRICARE	8	7	11
7	Uninsured (Included In Non-Government)	686	590	590
8	Total	16,672	15,856	14,888
<b>L.</b>	<b><u>Case Mix Index</u></b>			
1	Non-Government (Including Self Pay / Uninsured)	0.944770	1.041200	1.048370
2	Medicare	1.328320	1.543080	1.576690
3	Medical Assistance	0.767896	0.914132	0.966819
4	Medicaid	0.719000	0.856990	0.882590
5	Other Medical Assistance	1.017210	1.213960	1.375450
6	CHAMPUS / TRICARE	0.740240	1.309370	1.028720
7	Uninsured (Included In Non-Government)	1.004660	1.137220	1.230760
8	Total Case Mix Index	1.049774	1.202654	1.213990
<b>M.</b>	<b><u>Emergency Department Visits</u></b>			
1	Emergency Room - Treated and Admitted	8,795	8,327	7,214
2	Emergency Room - Treated and Discharged	35,818	37,113	39,086
3	Total Emergency Room Visits	44,613	45,440	46,300

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$429,833	\$480,207	\$50,374	12%
2	Inpatient Payments	\$129,862	\$108,104	(\$21,758)	-17%
3	Outpatient Charges	\$254,603	\$592,044	\$337,441	133%
4	Outpatient Payments	\$65,886	\$115,120	\$49,234	75%
5	Discharges	10	15	5	50%
6	Patient Days	36	63	27	75%
7	Outpatient Visits (Excludes ED Visits)	99	197	98	99%
8	Emergency Department Outpatient Visits	2	17	15	750%
9	Emergency Department Inpatient Admissions	6	9	3	50%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$684,436</b>	<b>\$1,072,251</b>	<b>\$387,815</b>	<b>57%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$195,748</b>	<b>\$223,224</b>	<b>\$27,476</b>	<b>14%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$1,328	\$1,328	0%
4	Outpatient Payments	\$0	\$181	\$181	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	1	1	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$1,328</b>	<b>\$1,328</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$181</b>	<b>\$181</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$112,326	\$1,267,074	\$1,154,748	1028%
2	Inpatient Payments	\$47,398	\$285,649	\$238,251	503%
3	Outpatient Charges	\$185,347	\$1,001,667	\$816,320	440%
4	Outpatient Payments	\$88,003	\$132,170	\$44,167	50%
5	Discharges	4	25	21	525%
6	Patient Days	10	147	137	1370%
7	Outpatient Visits (Excludes ED Visits)	42	302	260	619%
8	Emergency Department Outpatient Visits	4	23	19	475%
9	Emergency Department Inpatient Admissions	2	21	19	950%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$297,673</b>	<b>\$2,268,741</b>	<b>\$1,971,068</b>	<b>662%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$135,401</b>	<b>\$417,819</b>	<b>\$282,418</b>	<b>209%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$22,044,078	\$24,779,401	\$2,735,323	12%
2	Inpatient Payments	\$6,732,234	\$6,480,725	(\$251,509)	-4%
3	Outpatient Charges	\$13,833,092	\$19,139,601	\$5,306,509	38%
4	Outpatient Payments	\$2,204,756	\$2,612,189	\$407,433	18%
5	Discharges	558	496	(62)	-11%
6	Patient Days	3,045	3,114	69	2%
7	Outpatient Visits (Excludes ED Visits)	5,258	6,102	844	16%
8	Emergency Department Outpatient Visits	435	536	101	23%
9	Emergency Department Inpatient Admissions	425	370	(55)	-13%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$35,877,170</b>	<b>\$43,919,002</b>	<b>\$8,041,832</b>	<b>22%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$8,936,990</b>	<b>\$9,092,914</b>	<b>\$155,924</b>	<b>2%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$969,000	\$421,305	(\$547,695)	-57%
2	Inpatient Payments	\$191,784	\$113,964	(\$77,820)	-41%
3	Outpatient Charges	\$344,524	\$637,510	\$292,986	85%
4	Outpatient Payments	\$63,742	\$110,376	\$46,634	73%
5	Discharges	22	11	(11)	-50%
6	Patient Days	189	45	(144)	-76%
7	Outpatient Visits (Excludes ED Visits)	33	81	48	145%
8	Emergency Department Outpatient Visits	12	22	10	83%
9	Emergency Department Inpatient Admissions	16	10	(6)	-38%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,313,524</b>	<b>\$1,058,815</b>	<b>(\$254,709)</b>	<b>-19%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$255,526</b>	<b>\$224,340</b>	<b>(\$31,186)</b>	<b>-12%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$24,148	\$0	(\$24,148)	-100%
2	Inpatient Payments	\$21,099	\$0	(\$21,099)	-100%
3	Outpatient Charges	\$54,439	\$44,126	(\$10,313)	-19%
4	Outpatient Payments	\$8,990	\$8,302	(\$688)	-8%
5	Discharges	1	0	(1)	-100%
6	Patient Days	12	0	(12)	-100%
7	Outpatient Visits (Excludes ED Visits)	9	9	0	0%
8	Emergency Department Outpatient Visits	3	1	(2)	-67%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$78,587</b>	<b>\$44,126</b>	<b>(\$34,461)</b>	<b>-44%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$30,089</b>	<b>\$8,302</b>	<b>(\$21,787)</b>	<b>-72%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$118,583	\$161,535	\$42,952	36%
2	Inpatient Payments	\$19,589	\$31,439	\$11,850	60%
3	Outpatient Charges	\$203,176	\$584,974	\$381,798	188%
4	Outpatient Payments	\$26,472	\$164,441	\$137,969	521%
5	Discharges	3	5	2	67%
6	Patient Days	19	21	2	11%
7	Outpatient Visits (Excludes ED Visits)	38	140	102	268%
8	Emergency Department Outpatient Visits	7	16	9	129%
9	Emergency Department Inpatient Admissions	3	5	2	67%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$321,759</b>	<b>\$746,509</b>	<b>\$424,750</b>	<b>132%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$46,061</b>	<b>\$195,880</b>	<b>\$149,819</b>	<b>325%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$631,351	\$679,791	\$48,440	8%
2	Inpatient Payments	\$196,093	\$63,579	(\$132,514)	-68%
3	Outpatient Charges	\$213,751	\$303,623	\$89,872	42%
4	Outpatient Payments	\$68,844	\$8,167	(\$60,677)	-88%
5	Discharges	10	10	0	0%
6	Patient Days	124	103	(21)	-17%
7	Outpatient Visits (Excludes ED Visits)	90	110	20	22%
8	Emergency Department Outpatient Visits	29	26	(3)	-10%
9	Emergency Department Inpatient Admissions	9	8	(1)	-11%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$845,102</b>	<b>\$983,414</b>	<b>\$138,312</b>	<b>16%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$264,937</b>	<b>\$71,746</b>	<b>(\$193,191)</b>	<b>-73%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$880,590	\$915,465	\$34,875	4%
2	Inpatient Payments	\$319,692	\$143,394	(\$176,298)	-55%
3	Outpatient Charges	\$515,607	\$1,438,028	\$922,421	179%
4	Outpatient Payments	\$133,897	\$274,491	\$140,594	105%
5	Discharges	20	27	7	35%
6	Patient Days	88	124	36	41%
7	Outpatient Visits (Excludes ED Visits)	219	453	234	107%
8	Emergency Department Outpatient Visits	14	34	20	143%
9	Emergency Department Inpatient Admissions	12	20	8	67%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,396,197</b>	<b>\$2,353,493</b>	<b>\$957,296</b>	<b>69%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$453,589</b>	<b>\$417,885</b>	<b>(\$35,704)</b>	<b>-8%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J. HUMANA</b>					
1	Inpatient Charges	\$130,423	\$214,995	\$84,572	65%
2	Inpatient Payments	\$31,243	\$61,096	\$29,853	96%
3	Outpatient Charges	\$120,135	\$178,205	\$58,070	48%
4	Outpatient Payments	\$22,230	\$32,236	\$10,006	45%
5	Discharges	4	5	1	25%
6	Patient Days	11	22	11	100%
7	Outpatient Visits (Excludes ED Visits)	46	59	13	28%
8	Emergency Department Outpatient Visits	8	14	6	75%
9	Emergency Department Inpatient Admissions	3	5	2	67%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$250,558</b>	<b>\$393,200</b>	<b>\$142,642</b>	<b>57%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$53,473</b>	<b>\$93,332</b>	<b>\$39,859</b>	<b>75%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$0	\$720,942	\$720,942	0%
2	Inpatient Payments	\$0	\$293,044	\$293,044	0%
3	Outpatient Charges	\$11,413	\$334,219	\$322,806	2828%
4	Outpatient Payments	\$4,492	\$58,874	\$54,382	1211%
5	Discharges	0	12	12	0%
6	Patient Days	0	83	83	0%
7	Outpatient Visits (Excludes ED Visits)	3	132	129	4300%
8	Emergency Department Outpatient Visits	1	20	19	1900%
9	Emergency Department Inpatient Admissions	0	10	10	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$11,413</b>	<b>\$1,055,161</b>	<b>\$1,043,748</b>	<b>9145%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$4,492</b>	<b>\$351,918</b>	<b>\$347,426</b>	<b>7734%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$25,340,332</b>	<b>\$29,640,715</b>	<b>\$4,300,383</b>	<b>17%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$7,688,994</b>	<b>\$7,580,994</b>	<b>(\$108,000)</b>	<b>-1%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$15,736,087</b>	<b>\$24,255,325</b>	<b>\$8,519,238</b>	<b>54%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$2,687,312</b>	<b>\$3,516,547</b>	<b>\$829,235</b>	<b>31%</b>
	<b>TOTAL DISCHARGES</b>	<b>632</b>	<b>606</b>	<b>(26)</b>	<b>-4%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>3,534</b>	<b>3,722</b>	<b>188</b>	<b>5%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>5,837</b>	<b>7,586</b>	<b>1,749</b>	<b>30%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>515</b>	<b>709</b>	<b>194</b>	<b>38%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>476</b>	<b>458</b>	<b>(18)</b>	<b>-4%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$41,076,419</b>	<b>\$53,896,040</b>	<b>\$12,819,621</b>	<b>31%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$10,376,306</b>	<b>\$11,097,541</b>	<b>\$721,235</b>	<b>7%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$2,277,105	\$1,049,054	(\$1,228,051)	-54%
2	Inpatient Payments	\$484,952	\$235,137	(\$249,815)	-52%
3	Outpatient Charges	\$4,827,283	\$1,631,671	(\$3,195,612)	-66%
4	Outpatient Payments	\$1,047,083	\$125,581	(\$921,502)	-88%
5	Discharges	137	61	(76)	-55%
6	Patient Days	418	240	(178)	-43%
7	Outpatient Visits (Excludes ED Visits)	2,349	782	(1,567)	-67%
8	Emergency Department Outpatient Visits	1,302	361	(941)	-72%
9	Emergency Department Inpatient Admissions	51	16	(35)	-69%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,104,388</b>	<b>\$2,680,725</b>	<b>(\$4,423,663)</b>	<b>-62%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,532,035</b>	<b>\$360,718</b>	<b>(\$1,171,317)</b>	<b>-76%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$6,158,645	\$10,561,431	\$4,402,786	71%
2	Inpatient Payments	\$1,635,177	\$2,955,898	\$1,320,721	81%
3	Outpatient Charges	\$10,514,681	\$19,888,070	\$9,373,389	89%
4	Outpatient Payments	\$2,034,290	\$3,429,119	\$1,394,829	69%
5	Discharges	405	617	212	52%
6	Patient Days	1,238	2,073	835	67%
7	Outpatient Visits (Excludes ED Visits)	6,019	10,304	4,285	71%
8	Emergency Department Outpatient Visits	3,110	4,912	1,802	58%
9	Emergency Department Inpatient Admissions	145	167	22	15%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$16,673,326</b>	<b>\$30,449,501</b>	<b>\$13,776,175</b>	<b>83%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$3,669,467</b>	<b>\$6,385,017</b>	<b>\$2,715,550</b>	<b>74%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$2,384,879	\$0	(\$2,384,879)	-100%
2	Inpatient Payments	\$222,835	\$0	(\$222,835)	-100%
3	Outpatient Charges	\$4,646,179	\$0	(\$4,646,179)	-100%
4	Outpatient Payments	\$720,085	\$0	(\$720,085)	-100%
5	Discharges	182	0	(182)	-100%
6	Patient Days	479	0	(479)	-100%
7	Outpatient Visits (Excludes ED Visits)	2,253	0	(2,253)	-100%
8	Emergency Department Outpatient Visits	1,275	0	(1,275)	-100%
9	Emergency Department Inpatient Admissions	52	0	(52)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,031,058</b>	<b>\$0</b>	<b>(\$7,031,058)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$942,920</b>	<b>\$0</b>	<b>(\$942,920)</b>	<b>-100%</b>

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$8,368	\$1,436	(\$6,932)	-83%
4	Outpatient Payments	\$1,085	\$463	(\$622)	-57%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	2	6	4	200%
8	Emergency Department Outpatient Visits	0	1	1	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$8,368</b>	<b>\$1,436</b>	<b>(\$6,932)</b>	<b>-83%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,085</b>	<b>\$463</b>	<b>(\$622)</b>	<b>-57%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$257,636	\$0	(\$257,636)	-100%
2	Inpatient Payments	\$34,572	\$0	(\$34,572)	-100%
3	Outpatient Charges	\$438,155	\$0	(\$438,155)	-100%
4	Outpatient Payments	\$59,984	\$0	(\$59,984)	-100%
5	Discharges	19	0	(19)	-100%
6	Patient Days	50	0	(50)	-100%
7	Outpatient Visits (Excludes ED Visits)	204	0	(204)	-100%
8	Emergency Department Outpatient Visits	160	0	(160)	-100%
9	Emergency Department Inpatient Admissions	11	0	(11)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$695,791</b>	<b>\$0</b>	<b>(\$695,791)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$94,556</b>	<b>\$0</b>	<b>(\$94,556)</b>	<b>-100%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$62,503	\$0	(\$62,503)	-100%
2	Inpatient Payments	\$47,456	\$0	(\$47,456)	-100%
3	Outpatient Charges	\$105,125	\$1,635	(\$103,490)	-98%
4	Outpatient Payments	\$11,056	\$257	(\$10,799)	-98%
5	Discharges	3	0	(3)	-100%
6	Patient Days	7	0	(7)	-100%
7	Outpatient Visits (Excludes ED Visits)	54	2	(52)	-96%
8	Emergency Department Outpatient Visits	39	0	(39)	-100%

**STAMFORD HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2009  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	5	0	(5)	-100%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$167,628</b>	<b>\$1,635</b>	<b>(\$165,993)</b>	<b>-99%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$58,512</b>	<b>\$257</b>	<b>(\$58,255)</b>	<b>-100%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$2,051,582	\$2,051,582	0%
2	Inpatient Payments	\$0	\$465,596	\$465,596	0%
3	Outpatient Charges	\$0	\$3,085,892	\$3,085,892	0%
4	Outpatient Payments	\$0	\$642,694	\$642,694	0%
5	Discharges	0	108	108	0%
6	Patient Days	0	355	355	0%
7	Outpatient Visits (Excludes ED Visits)	0	1,258	1,258	0%
8	Emergency Department Outpatient Visits	0	660	660	0%
9	Emergency Department Inpatient Admissions	0	35	35	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$5,137,474</b>	<b>\$5,137,474</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$1,108,290</b>	<b>\$1,108,290</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$0	\$3,056,852	\$3,056,852	0%
2	Inpatient Payments	\$0	\$965,237	\$965,237	0%
3	Outpatient Charges	\$3,796	\$3,688,983	\$3,685,187	97081%
4	Outpatient Payments	\$644	\$804,891	\$804,247	124883%
5	Discharges	0	136	136	0%
6	Patient Days	0	497	497	0%
7	Outpatient Visits (Excludes ED Visits)	2	1,866	1,864	93200%
8	Emergency Department Outpatient Visits	0	762	762	0%
9	Emergency Department Inpatient Admissions	0	33	33	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$3,796</b>	<b>\$6,745,835</b>	<b>\$6,742,039</b>	<b>177609%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$644</b>	<b>\$1,770,128</b>	<b>\$1,769,484</b>	<b>274765%</b>
<b>II.</b>	<b>TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$11,140,768</b>	<b>\$16,718,919</b>	<b>\$5,578,151</b>	<b>50%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$2,424,992</b>	<b>\$4,621,868</b>	<b>\$2,196,876</b>	<b>91%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$20,543,587</b>	<b>\$28,297,687</b>	<b>\$7,754,100</b>	<b>38%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$3,874,227</b>	<b>\$5,003,005</b>	<b>\$1,128,778</b>	<b>29%</b>
	<b>TOTAL DISCHARGES</b>	<b>746</b>	<b>922</b>	<b>176</b>	<b>24%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>2,192</b>	<b>3,165</b>	<b>973</b>	<b>44%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>10,883</b>	<b>14,218</b>	<b>3,335</b>	<b>31%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>5,886</b>	<b>6,696</b>	<b>810</b>	<b>14%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>264</b>	<b>251</b>	<b>(13)</b>	<b>-5%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$31,684,355</b>	<b>\$45,016,606</b>	<b>\$13,332,251</b>	<b>42%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$6,299,219</b>	<b>\$9,624,873</b>	<b>\$3,325,654</b>	<b>53%</b>

**STAMFORD HOSPITAL  
 TWELVE MONTHS ACTUAL FILING  
 FISCAL YEAR 2009  
 REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2008 ACTUAL	(4) FY 2009 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE

STAMFORD HEALTH SYSTEM					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2008	FY 2009	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	<b><u>ASSETS</u></b>				
A.	<b><u>Current Assets:</u></b>				
1	Cash and Cash Equivalents	\$15,009,000	\$33,269,000	\$18,260,000	122%
2	Short Term Investments	\$10,121,000	\$166,000	(\$9,955,000)	-98%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$50,841,000	\$51,211,000	\$370,000	1%
4	Current Assets Whose Use is Limited for Current Liabilities	\$2,283,000	\$2,100,000	(\$183,000)	-8%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$5,310,000	\$5,178,000	(\$132,000)	-2%
8	Prepaid Expenses	\$2,942,000	\$4,649,000	\$1,707,000	58%
9	Other Current Assets	\$5,536,000	\$5,356,000	(\$180,000)	-3%
	<b>Total Current Assets</b>	<b>\$92,042,000</b>	<b>\$101,929,000</b>	<b>\$9,887,000</b>	<b>11%</b>
B.	<b><u>Noncurrent Assets Whose Use is Limited:</u></b>				
1	Held by Trustee	\$1,699,000	\$1,699,000	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$46,703,000	\$38,486,000	(\$8,217,000)	-18%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$48,402,000</b>	<b>\$40,185,000</b>	<b>(\$8,217,000)</b>	<b>-17%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$85,821,000	\$93,853,000	\$8,032,000	9%
7	Other Noncurrent Assets	\$10,208,000	\$8,696,000	(\$1,512,000)	-15%
C.	<b><u>Net Fixed Assets:</u></b>				
1	Property, Plant and Equipment	\$559,178,000	\$612,852,000	\$53,674,000	10%
2	Less: Accumulated Depreciation	\$271,807,000	\$304,615,000	\$32,808,000	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$287,371,000</b>	<b>\$308,237,000</b>	<b>\$20,866,000</b>	<b>7%</b>
3	Construction in Progress	\$29,577,000	\$14,801,000	(\$14,776,000)	-50%
	<b>Total Net Fixed Assets</b>	<b>\$316,948,000</b>	<b>\$323,038,000</b>	<b>\$6,090,000</b>	<b>2%</b>
	<b>Total Assets</b>	<b>\$553,421,000</b>	<b>\$567,701,000</b>	<b>\$14,280,000</b>	<b>3%</b>

<b>STAMFORD HEALTH SYSTEM</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008 ACTUAL</u>	<u>FY 2009 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$34,606,000	\$43,333,000	\$8,727,000	25%
2	Salaries, Wages and Payroll Taxes	\$8,193,000	\$9,545,000	\$1,352,000	17%
3	Due To Third Party Payers	\$2,758,000	\$7,995,000	\$5,237,000	190%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$9,256,000	\$6,808,000	(\$2,448,000)	-26%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$17,025,000	\$8,734,000	(\$8,291,000)	-49%
	<b>Total Current Liabilities</b>	<b>\$71,838,000</b>	<b>\$76,415,000</b>	<b>\$4,577,000</b>	<b>6%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$132,631,000	\$131,527,000	(\$1,104,000)	-1%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	<b>Total Long Term Debt</b>	<b>\$132,631,000</b>	<b>\$131,527,000</b>	<b>(\$1,104,000)</b>	<b>-1%</b>
3	Accrued Pension Liability	\$33,165,000	\$73,775,000	\$40,610,000	122%
4	Other Long Term Liabilities	\$122,059,000	\$117,598,000	(\$4,461,000)	-4%
	<b>Total Long Term Liabilities</b>	<b>\$287,855,000</b>	<b>\$322,900,000</b>	<b>\$35,045,000</b>	<b>12%</b>
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$161,263,000	\$137,780,000	(\$23,483,000)	-15%
2	Temporarily Restricted Net Assets	\$25,520,000	\$22,576,000	(\$2,944,000)	-12%
3	Permanently Restricted Net Assets	\$6,945,000	\$8,030,000	\$1,085,000	16%
	<b>Total Net Assets</b>	<b>\$193,728,000</b>	<b>\$168,386,000</b>	<b>(\$25,342,000)</b>	<b>-13%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$553,421,000</b>	<b>\$567,701,000</b>	<b>\$14,280,000</b>	<b>3%</b>

STAMFORD HEALTH SYSTEM					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2008 ACTUAL	FY 2009 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$989,969,524	\$1,157,017,320	\$167,047,796	17%
2	Less: Allowances	\$592,285,333	\$729,517,692	\$137,232,359	23%
3	Less: Charity Care	\$15,715,201	\$11,909,791	(\$3,805,410)	-24%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$381,968,990</b>	<b>\$415,589,837</b>	<b>\$33,620,847</b>	<b>9%</b>
5	Other Operating Revenue	\$50,030,661	\$63,974,821	\$13,944,160	28%
6	Net Assets Released from Restrictions	\$2,119,349	\$2,936,450	\$817,101	39%
	<b>Total Operating Revenue</b>	<b>\$434,119,000</b>	<b>\$482,501,108</b>	<b>\$48,382,108</b>	<b>11%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$143,065,124	\$162,559,991	\$19,494,867	14%
2	Fringe Benefits	\$31,319,925	\$35,830,866	\$4,510,941	14%
3	Physicians Fees	\$7,354,387	\$12,588,971	\$5,234,584	71%
4	Supplies and Drugs	\$36,080,725	\$40,693,784	\$4,613,059	13%
5	Depreciation and Amortization	\$25,519,000	\$33,531,205	\$8,012,205	31%
6	Bad Debts	\$44,760,000	\$48,303,957	\$3,543,957	8%
7	Interest	\$4,900,000	\$5,804,981	\$904,981	18%
8	Malpractice	\$3,378,701	\$2,869,713	(\$508,988)	-15%
9	Other Operating Expenses	\$118,686,187	\$115,348,848	(\$3,337,339)	-3%
	<b>Total Operating Expenses</b>	<b>\$415,064,049</b>	<b>\$457,532,316</b>	<b>\$42,468,267</b>	<b>10%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$19,054,951</b>	<b>\$24,968,792</b>	<b>\$5,913,841</b>	<b>31%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$1,131,194	\$842,436	(\$288,758)	-26%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$16,669,145)	(\$6,268,483)	\$10,400,662	-62%
	<b>Total Non-Operating Revenue</b>	<b>(\$15,537,951)</b>	<b>(\$5,426,047)</b>	<b>\$10,111,904</b>	<b>-65%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$3,517,000</b>	<b>\$19,542,745</b>	<b>\$16,025,745</b>	<b>456%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$2,126,742	\$2,126,742	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$2,126,742</b>	<b>\$2,126,742</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$3,517,000</b>	<b>\$21,669,487</b>	<b>\$18,152,487</b>	<b>516%</b>

<b>STAMFORD HEALTH SYSTEM</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b><u>FY 2007</u></b>	<b><u>FY 2008</u></b>	<b><u>FY 2009</u></b>
<b>A. <u>Parent Corporation Statement of Operations Summary</u></b>				
1	Net Patient Revenue	\$324,740,645	\$381,968,990	\$415,589,837
2	Other Operating Revenue	52,514,611	52,150,010	66,911,271
3	Total Operating Revenue	\$377,255,256	\$434,119,000	\$482,501,108
4	Total Operating Expenses	365,159,000	415,064,049	457,532,316
5	Income/(Loss) From Operations	\$12,096,256	\$19,054,951	\$24,968,792
6	Total Non-Operating Revenue	12,492,744	(15,537,951)	(3,299,305)
7	Excess/(Deficiency) of Revenue Over Expenses	\$24,589,000	\$3,517,000	\$21,669,487
<b>B. <u>Parent Corporation Profitability Summary</u></b>				
1	Parent Corporation Operating Margin	3.10%	4.55%	5.21%
2	Parent Corporation Non-Operating Margin	3.21%	-3.71%	-0.69%
3	Parent Corporation Total Margin	6.31%	0.84%	4.52%
4	Income/(Loss) From Operations	\$12,096,256	\$19,054,951	\$24,968,792
5	Total Operating Revenue	\$377,255,256	\$434,119,000	\$482,501,108
6	Total Non-Operating Revenue	\$12,492,744	(\$15,537,951)	(\$3,299,305)
7	Total Revenue	\$389,748,000	\$418,581,049	\$479,201,803
8	Excess/(Deficiency) of Revenue Over Expenses	\$24,589,000	\$3,517,000	\$21,669,487
<b>C. <u>Parent Corporation Net Assets Summary</u></b>				
1	Parent Corporation Unrestricted Net Assets	\$165,949,000	\$161,263,000	\$137,780,000
2	Parent Corporation Total Net Assets	\$201,084,000	\$193,728,000	\$168,386,000
3	Parent Corporation Change in Total Net Assets	\$201,084,000	(\$7,356,000)	(\$25,342,000)
4	Parent Corporation Change in Total Net Assets %	0.0%	-3.7%	-13.1%

<b>STAMFORD HEALTH SYSTEM</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b><u>FY 2007</u></b>	<b><u>FY 2008</u></b>	<b><u>FY 2009</u></b>
<b>D. <u>Liquidity Measures Summary</u></b>				
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1.61</b>	<b>1.28</b>	<b>1.33</b>
2	Total Current Assets	\$95,179,000	\$92,042,000	\$101,929,000
3	Total Current Liabilities	\$59,090,000	\$71,838,000	\$76,415,000
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>38</b>	<b>24</b>	<b>29</b>
5	Cash and Cash Equivalents	\$34,818,000	\$15,009,000	\$33,269,000
6	Short Term Investments	165,000	10,121,000	166,000
7	Total Cash and Short Term Investments	\$34,983,000	\$25,130,000	\$33,435,000
8	Total Operating Expenses	\$365,159,000	\$415,064,049	\$457,532,316
9	Depreciation Expense	\$25,424,513	\$25,519,000	\$33,531,205
10	Operating Expenses less Depreciation Expense	\$339,734,487	\$389,545,049	\$424,001,111
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>46</b>	<b>46</b>	<b>38</b>
12	Net Patient Accounts Receivable	\$ 43,117,000	\$ 50,841,000	\$ 51,211,000
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$2,261,000	\$2,758,000	\$7,995,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 40,856,000	\$ 48,083,000	\$ 43,216,000
16	Total Net Patient Revenue	\$324,740,645	\$381,968,990	\$415,589,837
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>63</b>	<b>67</b>	<b>66</b>
18	Total Current Liabilities	\$59,090,000	\$71,838,000	\$76,415,000
19	Total Operating Expenses	\$365,159,000	\$415,064,049	\$457,532,316
20	Depreciation Expense	\$25,424,513	\$25,519,000	\$33,531,205
21	Total Operating Expenses less Depreciation Expense	\$339,734,487	\$389,545,049	\$424,001,111

<b>STAMFORD HEALTH SYSTEM</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b><u>FY 2007</u></b>	<b><u>FY 2008</u></b>	<b><u>FY 2009</u></b>
<b>E. <u>Solvency Measures Summary</u></b>				
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>37.9</b>	<b>35.0</b>	<b>29.7</b>
2	Total Net Assets	\$201,084,000	\$193,728,000	\$168,386,000
3	Total Assets	\$530,348,000	\$553,421,000	\$567,701,000
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>28.4</b>	<b>14.2</b>	<b>26.5</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$24,589,000	\$3,517,000	\$21,669,487
6	Depreciation Expense	\$25,424,513	\$25,519,000	\$33,531,205
7	Excess of Revenues Over Expenses and Depreciation Expense	\$50,013,513	\$29,036,000	\$55,200,692
8	Total Current Liabilities	\$59,090,000	\$71,838,000	\$76,415,000
9	Total Long Term Debt	\$116,882,000	\$132,631,000	\$131,527,000
10	Total Current Liabilities and Total Long Term Debt	\$175,972,000	\$204,469,000	\$207,942,000
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>36.8</b>	<b>40.6</b>	<b>43.9</b>
12	Total Long Term Debt	\$116,882,000	\$132,631,000	\$131,527,000
13	Total Net Assets	\$201,084,000	\$193,728,000	\$168,386,000
14	Total Long Term Debt and Total Net Assets	\$317,966,000	\$326,359,000	\$299,913,000

STAMFORD HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2009						
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
		PATIENT	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
					BEDS (A)	BEDS
1	Adult Medical/Surgical	43,076	183	186	64.5%	63.4%
2	ICU/CCU (Excludes Neonatal ICU)	1,938	16	16	33.2%	33.2%
3	Psychiatric: Ages 0 to 17	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,892	20	25	80.7%	64.6%
	<b>TOTAL PSYCHIATRIC</b>	<b>5,892</b>	<b>20</b>	<b>25</b>	<b>80.7%</b>	<b>64.6%</b>
5	Rehabilitation	5,105	16	17	87.4%	82.3%
6	Maternity	9,346	32	32	80.0%	80.0%
7	Newborn	7,743	25	25	84.9%	84.9%
8	Neonatal ICU	1,117	16	16	19.1%	19.1%
9	Pediatric	1,055	13	13	22.2%	22.2%
10	Other	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>67,529</b>	<b>296</b>	<b>305</b>	<b>62.5%</b>	<b>60.7%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>75,272</b>	<b>321</b>	<b>330</b>	<b>64.2%</b>	<b>62.5%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>75,272</b>	<b>321</b>	<b>330</b>	<b>64.2%</b>	<b>62.5%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>76,971</b>	<b>319</b>	<b>330</b>	<b>66.1%</b>	<b>63.9%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-1,699</b>	<b>2</b>	<b>0</b>	<b>-1.9%</b>	<b>-1.4%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-2%</b>	<b>1%</b>	<b>0%</b>	<b>-3%</b>	<b>-2%</b>
	Total Licensed Beds and Bassinets	330				
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>						

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	10,963	10,730	-233	-2%
2	Outpatient Scans (Excluding Emergency Department Scans)	24,243	26,552	2,309	10%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>35,206</b>	<b>37,282</b>	<b>2,076</b>	<b>6%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	3,614	3,038	-576	-16%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,494	10,511	1,017	11%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>13,108</b>	<b>13,549</b>	<b>441</b>	<b>3%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Linear Accelerator Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	308	306	-2	-1%
2	Outpatient Procedures	252	357	105	42%
	<b>Total Cardiac Catheterization Procedures</b>	<b>560</b>	<b>663</b>	<b>103</b>	<b>18%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	46	42	-4	-9%
2	Elective Procedures	1	212	211	21100%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>47</b>	<b>254</b>	<b>207</b>	<b>440%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	3,143	3,079	-64	-2%
2	Outpatient Surgical Procedures	9,110	8,893	-217	-2%
	<b>Total Surgical Procedures</b>	<b>12,253</b>	<b>11,972</b>	<b>-281</b>	<b>-2%</b>

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>J.</b>	<b><u>Endoscopy Procedures</u></b>				
1	Inpatient Endoscopy Procedures	627	520	-107	-17%
2	Outpatient Endoscopy Procedures	6,531	6,748	217	3%
	<b>Total Endoscopy Procedures</b>	<b>7,158</b>	<b>7,268</b>	<b>110</b>	<b>2%</b>
<b>K.</b>	<b><u>Hospital Emergency Room Visits</u></b>				
1	Emergency Room Visits: Treated and Admitted	8,327	7,214	-1,113	-13%
2	Emergency Room Visits: Treated and Discharged	37,113	39,086	1,973	5%
	<b>Total Emergency Room Visits</b>	<b>45,440</b>	<b>46,300</b>	<b>860</b>	<b>2%</b>
<b>L.</b>	<b><u>Hospital Clinic Visits</u></b>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	15,281	17,291	2,010	13%
	<b>Total Hospital Clinic Visits</b>	<b>15,281</b>	<b>17,291</b>	<b>2,010</b>	<b>13%</b>
<b>M.</b>	<b><u>Other Hospital Outpatient Visits</u></b>				
1	Rehabilitation (PT/OT/ST)	31,073	32,528	1,455	5%
2	Cardiology	6,233	7,337	1,104	18%
3	Chemotherapy	0	0	0	0%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	203,647	239,549	35,902	18%
	<b>Total Other Hospital Outpatient Visits</b>	<b>240,953</b>	<b>279,414</b>	<b>38,461</b>	<b>16%</b>
<b>N.</b>	<b><u>Hospital Full Time Equivalent Employees</u></b>				
1	Total Nursing FTEs	515.9	564.6	48.7	9%
2	Total Physician FTEs	101.2	104.9	3.7	4%
3	Total Non-Nursing and Non-Physician FTEs	1,262.2	1,228.9	-33.3	-3%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>1,879.3</b>	<b>1,898.4</b>	<b>19.1</b>	<b>1%</b>

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>A. Outpatient Surgical Procedures</b>					
1	Stamford Hospital	6,379	2,441	-3,938	-62%
2	Tully Health Center	2,731	6,452	3,721	136%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>9,110</b>	<b>8,893</b>	<b>-217</b>	<b>-2%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Stamford Hospital	6,386	152	-6,234	-98%
2	Tully Health Center	145	6,596	6,451	4449%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>6,531</b>	<b>6,748</b>	<b>217</b>	<b>3%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	Stamford Hospital	37,113	39,086	1,973	5%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>37,113</b>	<b>39,086</b>	<b>1,973</b>	<b>5%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2009					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$233,292,994	\$245,697,432	\$12,404,438	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$69,063,687	\$69,840,646	\$776,959	1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.60%	28.43%	-1.18%	-4%
4	DISCHARGES	5,763	5,093	(670)	-12%
5	CASE MIX INDEX (CMI)	1.54308	1.57669	0.03361	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	8,892.77004	8,030.08217	(862.68787)	-10%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,766.27	\$8,697.38	\$931.10	12%
8	PATIENT DAYS	35,679	34,020	(1,659)	-5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,935.70	\$2,052.93	\$117.23	6%
10	AVERAGE LENGTH OF STAY	6.2	6.7	0.5	8%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$140,784,852	\$178,219,659	\$37,434,807	27%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$22,948,262	\$26,192,923	\$3,244,661	14%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.30%	14.70%	-1.60%	-10%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	60.35%	72.54%	12.19%	20%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,477.78597	3,694.27029	216.48432	6%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,598.53	\$7,090.15	\$491.62	7%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$374,077,846	\$423,917,091	\$49,839,245	13%
18	TOTAL ACCRUED PAYMENTS	\$92,011,949	\$96,033,569	\$4,021,620	4%
19	TOTAL ALLOWANCES	\$282,065,897	\$327,883,522	\$45,817,625	16%

<b>STAMFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2009</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		ACTUAL	ACTUAL	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2008</u>	<u>FY 2009</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$186,448,095	\$198,915,175	\$12,467,080	7%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$74,028,194	\$75,799,007	\$1,770,813	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.70%	38.11%	-1.60%	-4%
4	DISCHARGES	7,456	7,028	(428)	-6%
5	CASE MIX INDEX (CMI)	1.04120	1.04837	0.00717	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,763.18720	7,367.94436	(395.24284)	-5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,535.80	\$10,287.67	\$751.87	8%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,769.53)	(\$1,590.30)	\$179.23	-10%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$13,737,157)	(\$11,717,223)	\$2,019,934	-15%
10	PATIENT DAYS	29,274	27,630	(1,644)	-6%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,528.80	\$2,743.36	\$214.56	8%
12	AVERAGE LENGTH OF STAY	3.9	3.9	0.0	0%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$332,937,332	\$401,367,818	\$68,430,486	21%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$157,858,282	\$183,921,612	\$26,063,330	17%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	47.41%	45.82%	-1.59%	-3%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	178.57%	201.78%	23.21%	13%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	13,314.05798	14,180.98456	866.92658	7%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$11,856.51	\$12,969.59	\$1,113.08	9%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$5,257.99)	(\$5,879.45)	(\$621.46)	12%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$70,005,121)	(\$83,376,333)	(\$13,371,212)	19%
<b>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</b>					
21	TOTAL ACCRUED CHARGES	\$519,385,427	\$600,282,993	\$80,897,566	16%
22	TOTAL ACCRUED PAYMENTS	\$231,886,476	\$259,720,619	\$27,834,143	12%
23	TOTAL ALLOWANCES	\$287,498,951	\$340,562,374	\$53,063,423	18%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$83,742,278)	(\$95,093,556)	(\$11,351,278)	14%
<b>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$448,979,147	\$520,905,477	\$71,926,330	16%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$236,677,914	\$285,258,976	\$48,581,062	21%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$212,301,233	\$235,646,501	\$23,345,268	11%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	47.29%	45.24%	-2.05%	

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>C.</b>	<b>UNINSURED</b>				
	<b>UNINSURED INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$17,076,371	\$21,486,553	\$4,410,182	26%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$768,068	\$473,462	(\$294,606)	-38%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	4.50%	2.20%	-2.29%	-51%
4	DISCHARGES	590	590	0	0%
5	CASE MIX INDEX (CMI)	1.13722	1.23076	0.09354	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	670.95980	726.14840	55.18860	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,144.73	\$652.02	(\$492.71)	-43%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,391.07	\$9,635.66	\$1,244.59	15%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,621.54	\$8,045.36	\$1,423.81	22%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,442,790	\$5,842,124	\$1,399,334	31%
11	PATIENT DAYS	2,335	2,636	301	13%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$328.94	\$179.61	(\$149.32)	-45%
13	AVERAGE LENGTH OF STAY	4.0	4.5	0.5	13%
	<b>UNINSURED OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$35,308,931	\$38,147,950	\$2,839,019	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,929,713	\$1,764,297	(\$165,416)	-9%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	5.47%	4.62%	-0.84%	-15%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	206.77%	177.54%	-29.23%	-14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,219.94710	1,047.50587	(172.44123)	-14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,581.80	\$1,684.28	\$102.48	6%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$10,274.71	\$11,285.31	\$1,010.60	10%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,016.73	\$5,405.86	\$389.14	8%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,120,140	\$5,662,675	(\$457,465)	-7%
	<b>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$52,385,302	\$59,634,503	\$7,249,201	14%
24	TOTAL ACCRUED PAYMENTS	\$2,697,781	\$2,237,759	(\$460,022)	-17%
25	TOTAL ALLOWANCES	\$49,687,521	\$57,396,744	\$7,709,223	16%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,562,929	\$11,504,799	\$941,869	9%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$38,833,998	\$53,088,283	\$14,254,285	37%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$10,259,337	\$13,873,473	\$3,614,136	35%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	26.42%	26.13%	-0.29%	-1%
4	DISCHARGES	2,209	2,285	76	3%
5	CASE MIX INDEX (CMI)	0.85699	0.88259	0.02560	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,893.09091	2,016.71815	123.62724	7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,419.36	\$6,879.23	\$1,459.87	27%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$4,116.44	\$3,408.44	(\$708.00)	-17%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,346.92	\$1,818.14	(\$528.77)	-23%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,442,925	\$3,666,684	(\$776,242)	-17%
11	PATIENT DAYS	8,888	10,144	1,256	14%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,154.29	\$1,367.65	\$213.36	18%
13	AVERAGE LENGTH OF STAY	4.0	4.4	0.4	10%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$34,094,061	\$45,867,653	\$11,773,592	35%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,160,110	\$7,987,232	\$1,827,122	30%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.07%	17.41%	-0.65%	-4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	87.79%	86.40%	-1.40%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,939.37747	1,974.21316	34.83569	2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,176.33	\$4,045.78	\$869.45	27%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$8,680.18	\$8,923.81	\$243.64	3%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,422.19	\$3,044.37	(\$377.82)	-11%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,636,923	\$6,010,231	(\$626,692)	-9%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$72,928,059	\$98,955,936	\$26,027,877	36%
24	TOTAL ACCRUED PAYMENTS	\$16,419,447	\$21,860,705	\$5,441,258	33%
25	TOTAL ALLOWANCES	\$56,508,612	\$77,095,231	\$20,586,619	36%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,079,848	\$9,676,915	(\$1,402,933)	-13%

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2008</b>	<b>FY 2009</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>E.</b>	<b><u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u></b>				
	<b><u>OTHER MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$15,450,365	\$21,092,910	\$5,642,545	37%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$3,287,676	\$2,167,500	(\$1,120,176)	-34%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	21.28%	10.28%	-11.00%	-52%
4	DISCHARGES	421	471	50	12%
5	CASE MIX INDEX (CMI)	1.21396	1.37545	0.16149	13%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	511.07716	647.83695	136.75979	27%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,432.84	\$3,345.75	(\$3,087.09)	-48%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$3,102.96	\$6,941.92	\$3,838.96	124%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$1,333.44	\$5,351.63	\$4,018.19	301%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$681,489	\$3,466,982	\$2,785,493	409%
11	PATIENT DAYS	3,076	3,444	368	12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,068.82	\$629.36	(\$439.46)	-41%
13	AVERAGE LENGTH OF STAY	7.3	7.3	0.0	0%
	<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,614,526	\$12,191,496	\$4,576,970	60%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$914,112	\$1,493,424	\$579,312	63%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	12.00%	12.25%	0.24%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	49.28%	57.80%	8.52%	17%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	207.48477	272.23340	64.74863	31%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,405.68	\$5,485.82	\$1,080.14	25%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$7,450.83	\$7,483.77	\$32.94	0%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$2,192.84	\$1,604.33	(\$588.52)	-27%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$454,982	\$436,751	(\$18,231)	-4%
	<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$23,064,891	\$33,284,406	\$10,219,515	44%
24	TOTAL ACCRUED PAYMENTS	\$4,201,788	\$3,660,924	(\$540,864)	-13%
25	TOTAL ALLOWANCES	\$18,863,103	\$29,623,482	\$10,760,379	57%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$1,136,471	\$3,903,733	\$2,767,262	243%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>F.</b>	<b>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>				
	<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>				
1	INPATIENT ACCRUED CHARGES	\$54,284,363	\$74,181,193	\$19,896,830	37%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,547,013	\$16,040,973	\$2,493,960	18%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.96%	21.62%	-3.33%	-13%
4	DISCHARGES	2,630	2,756	126	5%
5	CASE MIX INDEX (CMI)	0.91413	0.96682	0.05269	6%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,404.16807	2,664.55510	260.38703	11%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,634.80	\$6,020.13	\$385.33	7%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,901.00	\$4,267.54	\$366.55	9%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,131.47	\$2,677.24	\$545.77	26%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,124,415	\$7,133,665	\$2,009,251	39%
11	PATIENT DAYS	11,964	13,588	1,624	14%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,132.31	\$1,180.52	\$48.21	4%
13	AVERAGE LENGTH OF STAY	4.5	4.9	0.4	8%
	<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$41,708,587	\$58,059,149	\$16,350,562	39%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,074,222	\$9,480,656	\$2,406,434	34%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.96%	16.33%	-0.63%	-4%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	76.83%	78.27%	1.43%	2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,146.86224	2,246.44656	99.58432	5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,295.14	\$4,220.29	\$925.15	28%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$8,561.37	\$8,749.30	\$187.94	2%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,303.38	\$2,869.86	(\$433.52)	-13%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,091,905	\$6,446,983	(\$644,922)	-9%
	<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>				
23	TOTAL ACCRUED CHARGES	\$95,992,950	\$132,240,342	\$36,247,392	38%
24	TOTAL ACCRUED PAYMENTS	\$20,621,235	\$25,521,629	\$4,900,394	24%
25	TOTAL ALLOWANCES	\$75,371,715	\$106,718,713	\$31,346,998	42%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$372,628	\$235,250	(\$137,378)	-37%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$83,356	\$53,861	(\$29,495)	-35%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.37%	22.90%	0.53%	2%
4	DISCHARGES	7	11	4	57%
5	CASE MIX INDEX (CMI)	1.30937	1.02872	(0.28065)	-21%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	9.16559	11.31592	2.15033	23%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,094.45	\$4,759.75	(\$4,334.70)	-48%
8	PATIENT DAYS	54	34	(20)	-37%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,543.63	\$1,584.15	\$40.52	3%
10	AVERAGE LENGTH OF STAY	7.7	3.1	(4.6)	-60%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$140,660	\$341,637	\$200,977	143%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$78,594	\$126,599	\$48,005	61%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$513,288	\$576,887	\$63,599	12%
14	TOTAL ACCRUED PAYMENTS	\$161,950	\$180,460	\$18,510	11%
15	TOTAL ALLOWANCES	\$351,338	\$396,427	\$45,089	13%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$23,149,832	\$23,523,556	\$373,724	2%
2	TOTAL OPERATING EXPENSES	\$389,133,838	\$425,519,879	\$36,386,041	9%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$3,030,349	\$2,936,412	(\$93,937)	-3%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$15,715,201	\$11,909,791	(\$3,805,410)	-24%
5	BAD DEBTS (CHARGES)	\$44,824,866	\$47,934,677	\$3,109,811	7%
6	UNCOMPENSATED CARE (CHARGES)	\$60,540,067	\$59,844,468	(\$695,599)	-1%
7	COST OF UNCOMPENSATED CARE	\$21,527,935	\$21,584,251	\$56,316	0%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$95,992,950	\$132,240,342	\$36,247,392	38%
9	TOTAL ACCRUED PAYMENTS	\$20,621,235	\$25,521,629	\$4,900,394	24%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$34,134,914	\$47,695,448	\$13,560,534	40%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$13,513,679	\$22,173,819	\$8,660,140	64%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$474,398,080	\$519,029,050	\$44,630,970	9%
2	TOTAL INPATIENT PAYMENTS	\$156,722,250	\$161,734,487	\$5,012,237	3%
3	TOTAL INPATIENT PAYMENTS / CHARGES	33.04%	31.16%	-1.88%	-6%
4	TOTAL DISCHARGES	15,856	14,888	(968)	-6%
5	TOTAL CASE MIX INDEX	1.20265	1.21399	0.01134	1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	19,069,29090	18,073,89755	(995,39335)	-5%
7	TOTAL OUTPATIENT CHARGES	\$515,571,431	\$637,988,263	\$122,416,832	24%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	108.68%	122.92%	14.24%	13%
9	TOTAL OUTPATIENT PAYMENTS	\$187,959,360	\$219,721,790	\$31,762,430	17%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	36.46%	34.44%	-2.02%	-6%
11	TOTAL CHARGES	\$989,969,511	\$1,157,017,313	\$167,047,802	17%
12	TOTAL PAYMENTS	\$344,681,610	\$381,456,277	\$36,774,667	11%
13	TOTAL PAYMENTS / TOTAL CHARGES	34.82%	32.97%	-1.85%	-5%
14	PATIENT DAYS	76,971	75,272	(1,699)	-2%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$287,949,985	\$320,113,875	\$32,163,890	11%
2	INPATIENT PAYMENTS	\$82,694,056	\$85,935,480	\$3,241,424	4%
3	GOVT. INPATIENT PAYMENTS / CHARGES	28.72%	26.85%	-1.87%	-7%
4	DISCHARGES	8,400	7,860	(540)	-6%
5	CASE MIX INDEX	1.34596	1.36208	0.01612	1%
6	CASE MIX ADJUSTED DISCHARGES	11,306.10370	10,705.95319	(600.15051)	-5%
7	OUTPATIENT CHARGES	\$182,634,099	\$236,620,445	\$53,986,346	30%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	63.43%	73.92%	10.49%	17%
9	OUTPATIENT PAYMENTS	\$30,101,078	\$35,800,178	\$5,699,100	19%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.48%	15.13%	-1.35%	-8%
11	TOTAL CHARGES	\$470,584,084	\$556,734,320	\$86,150,236	18%
12	TOTAL PAYMENTS	\$112,795,134	\$121,735,658	\$8,940,524	8%
13	TOTAL PAYMENTS / CHARGES	23.97%	21.87%	-2.10%	-9%
14	PATIENT DAYS	47,697	47,642	(55)	0%
15	TOTAL GOVERNMENT DEDUCTIONS	\$357,788,950	\$434,998,662	\$77,209,712	22%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	6.2	6.7	0.5	8%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.9	3.9	0.0	0%
3	UNINSURED	4.0	4.5	0.5	13%
4	MEDICAID	4.0	4.4	0.4	10%
5	OTHER MEDICAL ASSISTANCE	7.3	7.3	0.0	0%
6	CHAMPUS / TRICARE	7.7	3.1	(4.6)	-60%
7	TOTAL AVERAGE LENGTH OF STAY	4.9	5.1	0.2	4%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2008	FY 2009	DIFFERENCE	DIFFERENCE
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$989,969,511	\$1,157,017,313	\$167,047,802	17%
2	TOTAL GOVERNMENT DEDUCTIONS	\$357,788,950	\$434,998,662	\$77,209,712	22%
3	UNCOMPENSATED CARE	\$60,540,067	\$59,844,468	(\$695,599)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$212,301,233	\$235,646,501	\$23,345,268	11%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,338,294	\$12,159,825	\$1,821,531	18%
6	TOTAL ADJUSTMENTS	\$640,968,544	\$742,649,456	\$101,680,912	16%
7	TOTAL ACCRUED PAYMENTS	\$349,000,967	\$414,367,857	\$65,366,890	19%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj. - OHCA Input)	\$3,030,349	\$2,936,412	(\$93,937)	-3%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$352,031,316	\$417,304,269	\$65,272,953	19%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3555981392	0.3606724500	0.0050743108	1%
11	COST OF UNCOMPENSATED CARE	\$21,527,935	\$21,584,251	\$56,316	0%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$13,513,679	\$22,173,819	\$8,660,140	64%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	(\$3,352,894)	\$0	\$3,352,894	-100%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$31,688,721	\$43,758,070	\$12,069,349	38%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$6,636,923	\$6,010,231	(\$626,692)	-9%
2	OTHER MEDICAL ASSISTANCE	\$1,136,471	\$3,903,733	\$2,767,262	243%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,562,929	\$11,504,799	\$941,869	9%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$18,336,323	\$21,418,763	\$3,082,439	17%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$17,205,916	\$19,743,013	\$2,537,097	14.75%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$36,618,093	\$32,545,056	(\$4,073,037)	-11.12%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$384,330,000	\$416,938,000	\$32,608,000	8.48%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$5,391,425	\$0	(\$5,391,425)	-100.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$995,361,000	\$1,157,017,000	\$161,656,000	16.24%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$60,540,067	\$59,844,900	(\$695,167)	-1.15%

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$186,448,095	\$198,915,175	\$12,467,080
2	MEDICARE	\$233,292,994	245,697,432	\$12,404,438
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$54,284,363	74,181,193	\$19,896,830
4	MEDICAID	\$38,833,998	53,088,283	\$14,254,285
5	OTHER MEDICAL ASSISTANCE	\$15,450,365	21,092,910	\$5,642,545
6	CHAMPUS / TRICARE	\$372,628	235,250	(\$137,378)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$17,076,371	21,486,553	\$4,410,182
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$287,949,985</b>	<b>\$320,113,875</b>	<b>\$32,163,890</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$474,398,080</b>	<b>\$519,029,050</b>	<b>\$44,630,970</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$332,937,332	\$401,367,818	\$68,430,486
2	MEDICARE	\$140,784,852	178,219,659	\$37,434,807
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$41,708,587	58,059,149	\$16,350,562
4	MEDICAID	\$34,094,061	45,867,653	\$11,773,592
5	OTHER MEDICAL ASSISTANCE	\$7,614,526	12,191,496	\$4,576,970
6	CHAMPUS / TRICARE	\$140,660	341,637	\$200,977
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$35,308,931	38,147,950	\$2,839,019
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$182,634,099</b>	<b>\$236,620,445</b>	<b>\$53,986,346</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$515,571,431</b>	<b>\$637,988,263</b>	<b>\$122,416,832</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$519,385,427	\$600,282,993	\$80,897,566
2	TOTAL MEDICARE	\$374,077,846	\$423,917,091	\$49,839,245
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$95,992,950	\$132,240,342	\$36,247,392
4	TOTAL MEDICAID	\$72,928,059	\$98,955,936	\$26,027,877
5	TOTAL OTHER MEDICAL ASSISTANCE	\$23,064,891	\$33,284,406	\$10,219,515
6	TOTAL CHAMPUS / TRICARE	\$513,288	\$576,887	\$63,599
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$52,385,302	\$59,634,503	\$7,249,201
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$470,584,084</b>	<b>\$556,734,320</b>	<b>\$86,150,236</b>
	<b>TOTAL CHARGES</b>	<b>\$989,969,511</b>	<b>\$1,157,017,313</b>	<b>\$167,047,802</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$74,028,194	\$75,799,007	\$1,770,813
2	MEDICARE	\$69,063,687	69,840,646	\$776,959
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$13,547,013	16,040,973	\$2,493,960
4	MEDICAID	\$10,259,337	13,873,473	\$3,614,136
5	OTHER MEDICAL ASSISTANCE	\$3,287,676	2,167,500	(\$1,120,176)
6	CHAMPUS / TRICARE	\$83,356	53,861	(\$29,495)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$768,068	473,462	(\$294,606)
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$82,694,056</b>	<b>\$85,935,480</b>	<b>\$3,241,424</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$156,722,250</b>	<b>\$161,734,487</b>	<b>\$5,012,237</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$157,858,282	\$183,921,612	\$26,063,330
2	MEDICARE	\$22,948,262	26,192,923	\$3,244,661
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$7,074,222	9,480,656	\$2,406,434
4	MEDICAID	\$6,160,110	7,987,232	\$1,827,122
5	OTHER MEDICAL ASSISTANCE	\$914,112	1,493,424	\$579,312
6	CHAMPUS / TRICARE	\$78,594	126,599	\$48,005
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,929,713	1,764,297	(\$165,416)
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$30,101,078</b>	<b>\$35,800,178</b>	<b>\$5,699,100</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$187,959,360</b>	<b>\$219,721,790</b>	<b>\$31,762,430</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$231,886,476	\$259,720,619	\$27,834,143
2	TOTAL MEDICARE	\$92,011,949	\$96,033,569	\$4,021,620
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,621,235	\$25,521,629	\$4,900,394
4	TOTAL MEDICAID	\$16,419,447	\$21,860,705	\$5,441,258
5	TOTAL OTHER MEDICAL ASSISTANCE	\$4,201,788	\$3,660,924	(\$540,864)
6	TOTAL CHAMPUS / TRICARE	\$161,950	\$180,460	\$18,510
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,697,781	\$2,237,759	(\$460,022)
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$112,795,134</b>	<b>\$121,735,658</b>	<b>\$8,940,524</b>
	<b>TOTAL PAYMENTS</b>	<b>\$344,681,610</b>	<b>\$381,456,277</b>	<b>\$36,774,667</b>

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.83%	17.19%	-1.64%
2	MEDICARE	23.57%	21.24%	-2.33%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.48%	6.41%	0.93%
4	MEDICAID	3.92%	4.59%	0.67%
5	OTHER MEDICAL ASSISTANCE	1.56%	1.82%	0.26%
6	CHAMPUS / TRICARE	0.04%	0.02%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.72%	1.86%	0.13%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>29.09%</b>	<b>27.67%</b>	<b>-1.42%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>47.92%</b>	<b>44.86%</b>	<b>-3.06%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	33.63%	34.69%	1.06%
2	MEDICARE	14.22%	15.40%	1.18%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.21%	5.02%	0.80%
4	MEDICAID	3.44%	3.96%	0.52%
5	OTHER MEDICAL ASSISTANCE	0.77%	1.05%	0.28%
6	CHAMPUS / TRICARE	0.01%	0.03%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.57%	3.30%	-0.27%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>18.45%</b>	<b>20.45%</b>	<b>2.00%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>52.08%</b>	<b>55.14%</b>	<b>3.06%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	21.48%	19.87%	-1.61%
2	MEDICARE	20.04%	18.31%	-1.73%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.93%	4.21%	0.27%
4	MEDICAID	2.98%	3.64%	0.66%
5	OTHER MEDICAL ASSISTANCE	0.95%	0.57%	-0.39%
6	CHAMPUS / TRICARE	0.02%	0.01%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.22%	0.12%	-0.10%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>23.99%</b>	<b>22.53%</b>	<b>-1.46%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>45.47%</b>	<b>42.40%</b>	<b>-3.07%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	45.80%	48.22%	2.42%
2	MEDICARE	6.66%	6.87%	0.21%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.05%	2.49%	0.43%
4	MEDICAID	1.79%	2.09%	0.31%
5	OTHER MEDICAL ASSISTANCE	0.27%	0.39%	0.13%
6	CHAMPUS / TRICARE	0.02%	0.03%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.56%	0.46%	-0.10%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>8.73%</b>	<b>9.39%</b>	<b>0.65%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>54.53%</b>	<b>57.60%</b>	<b>3.07%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

<b>STAMFORD HOSPITAL</b>				
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<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,456	7,028	(428)
2	MEDICARE	5,763	5,093	(670)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,630	2,756	126
4	MEDICAID	2,209	2,285	76
5	OTHER MEDICAL ASSISTANCE	421	471	50
6	CHAMPUS / TRICARE	7	11	4
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	590	590	-
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>8,400</b>	<b>7,860</b>	<b>(540)</b>
	<b>TOTAL DISCHARGES</b>	<b>15,856</b>	<b>14,888</b>	<b>(968)</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	29,274	27,630	(1,644)
2	MEDICARE	35,679	34,020	(1,659)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,964	13,588	1,624
4	MEDICAID	8,888	10,144	1,256
5	OTHER MEDICAL ASSISTANCE	3,076	3,444	368
6	CHAMPUS / TRICARE	54	34	(20)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,335	2,636	301
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>47,697</b>	<b>47,642</b>	<b>(55)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>76,971</b>	<b>75,272</b>	<b>(1,699)</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.9	3.9	0.0
2	MEDICARE	6.2	6.7	0.5
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.5	4.9	0.4
4	MEDICAID	4.0	4.4	0.4
5	OTHER MEDICAL ASSISTANCE	7.3	7.3	0.0
6	CHAMPUS / TRICARE	7.7	3.1	(4.6)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.0	4.5	0.5
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>5.7</b>	<b>6.1</b>	<b>0.4</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.9</b>	<b>5.1</b>	<b>0.2</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.04120	1.04837	0.00717
2	MEDICARE	1.54308	1.57669	0.03361
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.91413	0.96682	0.05269
4	MEDICAID	0.85699	0.88259	0.02560
5	OTHER MEDICAL ASSISTANCE	1.21396	1.37545	0.16149
6	CHAMPUS / TRICARE	1.30937	1.02872	(0.28065)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.13722	1.23076	0.09354
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.34596</b>	<b>1.36208</b>	<b>0.01612</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.20265</b>	<b>1.21399</b>	<b>0.01134</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$448,979,147	\$520,905,477	\$71,926,330
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$236,677,914	\$285,258,976	\$48,581,062
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$212,301,233	\$235,646,501	\$23,345,268
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	47.29%	45.24%	-2.05%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$17,205,916	\$19,743,013	\$2,537,097
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,338,294	\$12,159,825	\$1,821,531
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT OHCA INPUT)	\$3,030,349	\$2,936,412	(\$93,937)
8	CHARITY CARE	\$15,715,201	\$11,909,791	(\$3,805,410)
9	BAD DEBTS	\$44,824,866	\$47,934,677	\$3,109,811
10	TOTAL UNCOMPENSATED CARE	\$60,540,067	\$59,844,468	(\$695,599)
11	TOTAL OTHER OPERATING REVENUE	\$448,979,147	\$520,905,477	\$71,926,330
12	TOTAL OPERATING EXPENSES	\$389,133,838	\$425,519,879	\$36,386,041

STAMFORD HOSPITAL				
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BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u> <u>FY 2008</u>	<u>ACTUAL</u> <u>FY 2009</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>

<b>STAMFORD HOSPITAL</b>				
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<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,763.18720	7,367.94436	(395.24284)
2	MEDICARE	8,892.77004	8,030.08217	(862.68787)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,404.16807	2,664.55510	260.38703
4	MEDICAID	1,893.09091	2,016.71815	123.62724
5	OTHER MEDICAL ASSISTANCE	511.07716	647.83695	136.75979
6	CHAMPUS / TRICARE	9.16559	11.31592	2.15033
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	670.95980	726.14840	55.18860
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>11,306.10370</b>	<b>10,705.95319</b>	<b>(600.15051)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>19,069.29090</b>	<b>18,073.89755</b>	<b>(995.39335)</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13,314.05798	14,180.98456	866.92658
2	MEDICARE	3,477.78597	3,694.27029	216.48432
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,146.86224	2,246.44656	99.58432
4	MEDICAID	1,939.37747	1,974.21316	34.83569
5	OTHER MEDICAL ASSISTANCE	207.48477	272.23340	64.74863
6	CHAMPUS / TRICARE	2.64237	15.97452	13.33216
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,219.94710	1,047.50587	-172.44123
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>5,627.29058</b>	<b>5,956.69138</b>	<b>329.40080</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>18,941.34856</b>	<b>20,137.67594</b>	<b>1,196.32737</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,535.80	\$10,287.67	\$751.87
2	MEDICARE	\$7,766.27	\$8,697.38	\$931.10
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,634.80	\$6,020.13	\$385.33
4	MEDICAID	\$5,419.36	\$6,879.23	\$1,459.87
5	OTHER MEDICAL ASSISTANCE	\$6,432.84	\$3,345.75	(\$3,087.09)
6	CHAMPUS / TRICARE	\$9,094.45	\$4,759.75	(\$4,334.70)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,144.73	\$652.02	(\$492.71)
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,314.11</b>	<b>\$8,026.89</b>	<b>\$712.78</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,218.57</b>	<b>\$8,948.51</b>	<b>\$729.94</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,856.51	\$12,969.59	\$1,113.08
2	MEDICARE	\$6,598.53	\$7,090.15	\$491.62
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,295.14	\$4,220.29	\$925.15
4	MEDICAID	\$3,176.33	\$4,045.78	\$869.45
5	OTHER MEDICAL ASSISTANCE	\$4,405.68	\$5,485.82	\$1,080.14
6	CHAMPUS / TRICARE	\$29,743.78	\$7,925.06	(\$21,818.73)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,581.80	\$1,684.28	\$102.48
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$5,349.12</b>	<b>\$6,010.08</b>	<b>\$660.95</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$9,923.23</b>	<b>\$10,910.98</b>	<b>\$987.75</b>

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$6,636,923	\$6,010,231	(\$626,692)
2	OTHER MEDICAL ASSISTANCE	\$1,136,471	\$3,903,733	\$2,767,262
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$10,562,929	\$11,504,799	\$941,869
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$18,336,323</b>	<b>\$21,418,763</b>	<b>\$3,082,439</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$989,969,511	\$1,157,017,313	\$167,047,802
2	TOTAL GOVERNMENT DEDUCTIONS	\$357,788,950	\$434,998,662	\$77,209,712
3	UNCOMPENSATED CARE	\$60,540,067	\$59,844,468	(\$695,599)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$212,301,233	\$235,646,501	\$23,345,268
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,338,294	\$12,159,825	\$1,821,531
6	TOTAL ADJUSTMENTS	\$640,968,544	\$742,649,456	\$101,680,912
7	TOTAL ACCRUED PAYMENTS	\$349,000,967	\$414,367,857	\$65,366,890
8	UCP DSH PAYMENTS (OHCA INPUT)	\$3,030,349	\$2,936,412	(\$93,937)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$352,031,316	\$417,304,269	\$65,272,953
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3555981392	0.3606724500	0.0050743108
11	COST OF UNCOMPENSATED CARE	\$21,527,935	\$21,584,251	\$56,316
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$13,513,679	\$22,173,819	\$8,660,140
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	(\$3,352,894)	\$0	\$3,352,894
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$31,688,721	\$43,758,070	\$12,069,349
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	39.70%	38.11%	-1.60%
2	MEDICARE	29.60%	28.43%	-1.18%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.96%	21.62%	-3.33%
4	MEDICAID	26.42%	26.13%	-0.29%
5	OTHER MEDICAL ASSISTANCE	21.28%	10.28%	-11.00%
6	CHAMPUS / TRICARE	22.37%	22.90%	0.53%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.50%	2.20%	-2.29%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>28.72%</b>	<b>26.85%</b>	<b>-1.87%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>33.04%</b>	<b>31.16%</b>	<b>-1.88%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	47.41%	45.82%	-1.59%
2	MEDICARE	16.30%	14.70%	-1.60%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.96%	16.33%	-0.63%
4	MEDICAID	18.07%	17.41%	-0.65%
5	OTHER MEDICAL ASSISTANCE	12.00%	12.25%	0.24%
6	CHAMPUS / TRICARE	55.88%	37.06%	-18.82%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5.47%	4.62%	-0.84%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>16.48%</b>	<b>15.13%</b>	<b>-1.35%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>36.46%</b>	<b>34.44%</b>	<b>-2.02%</b>

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>	<b>AMOUNT DIFFERENCE</b>
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$344,681,610	\$381,456,277	\$36,774,667
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$3,030,349	\$2,936,412	(\$93,937)
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$347,711,959</b>	<b>\$384,392,689</b>	<b>\$36,680,730</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$36,618,093	\$32,545,056	(\$4,073,037)
4	<b>CALCULATED NET REVENUE</b>	<b>\$436,022,540</b>	<b>\$416,937,745</b>	<b>(\$19,084,795)</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$384,330,000	\$416,938,000	\$32,608,000
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$51,692,540</b>	<b>(\$255)</b>	<b>(\$51,692,795)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$989,969,511	\$1,157,017,313	\$167,047,802
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$5,391,425	\$0	(\$5,391,425)
	<b>CALCULATED GROSS REVENUE</b>	<b>\$995,360,936</b>	<b>\$1,157,017,313</b>	<b>\$161,656,377</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$995,361,000	\$1,157,017,000	\$161,656,000
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$64)</b>	<b>\$313</b>	<b>\$377</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$60,540,067	\$59,844,468	(\$695,599)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$60,540,067</b>	<b>\$59,844,468</b>	<b>(\$695,599)</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$60,540,067	\$59,844,900	(\$695,167)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>(\$432)</b>	<b>(\$432)</b>

<b>STAMFORD HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2009</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$198,915,175
2	MEDICARE	245,697,432
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	74,181,193
4	MEDICAID	53,088,283
5	OTHER MEDICAL ASSISTANCE	21,092,910
6	CHAMPUS / TRICARE	235,250
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	21,486,553
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$320,113,875</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$519,029,050</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$401,367,818
2	MEDICARE	178,219,659
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	58,059,149
4	MEDICAID	45,867,653
5	OTHER MEDICAL ASSISTANCE	12,191,496
6	CHAMPUS / TRICARE	341,637
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	38,147,950
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$236,620,445</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$637,988,263</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$600,282,993
2	TOTAL GOVERNMENT ACCRUED CHARGES	556,734,320
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$1,157,017,313</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$75,799,007
2	MEDICARE	69,840,646
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16,040,973
4	MEDICAID	13,873,473
5	OTHER MEDICAL ASSISTANCE	2,167,500
6	CHAMPUS / TRICARE	53,861
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	473,462
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$85,935,480</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$161,734,487</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$183,921,612
2	MEDICARE	26,192,923
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,480,656
4	MEDICAID	7,987,232
5	OTHER MEDICAL ASSISTANCE	1,493,424
6	CHAMPUS / TRICARE	126,599
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,764,297
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$35,800,178</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$219,721,790</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$259,720,619
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	121,735,658
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$381,456,277</b>

<b>STAMFORD HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2009</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,028
2	MEDICARE	5,093
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,756
4	MEDICAID	2,285
5	OTHER MEDICAL ASSISTANCE	471
6	CHAMPUS / TRICARE	11
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	590
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>7,860</b>
	<b>TOTAL DISCHARGES</b>	<b>14,888</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.04837
2	MEDICARE	1.57669
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.96682
4	MEDICAID	0.88259
5	OTHER MEDICAL ASSISTANCE	1.37545
6	CHAMPUS / TRICARE	1.02872
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.23076
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.36208</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.21399</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$520,905,477
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$285,258,976
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$235,646,501
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	45.24%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$19,743,013
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$12,159,825
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$2,936,412
8	CHARITY CARE	\$11,909,791
9	BAD DEBTS	\$47,934,677
10	TOTAL UNCOMPENSATED CARE	\$59,844,468
11	TOTAL OTHER OPERATING REVENUE	\$23,523,556
12	TOTAL OPERATING EXPENSES	\$425,519,879

<b>STAMFORD HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2009</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2009</u>
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$381,456,277
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,936,412
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$384,392,689</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$32,545,056
	<b>CALCULATED NET REVENUE</b>	<b>\$416,937,745</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$416,938,000
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$255)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$1,157,017,313
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$1,157,017,313</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,157,017,000
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$313</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$59,844,468
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$59,844,468</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$59,844,900
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$432)</b>

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2009 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Hospital Charity Care (from HRS Report 500)</b>					
1	Number of Applicants	2,056	1,692	(364)	-18%
2	Number of Approved Applicants	1,958	1,057	(901)	-46%
3	<b>Total Charges (A)</b>	\$15,715,201	\$11,909,791	(\$3,805,410)	-24%
4	<b>Average Charges</b>	<b>\$8,026</b>	<b>\$11,268</b>	<b>\$3,241</b>	<b>40%</b>
5	Ratio of Cost to Charges (RCC)	0.399143	0.384095	(0.015048)	-4%
6	<b>Total Cost</b>	<b>\$6,272,612</b>	<b>\$4,574,491</b>	<b>(\$1,698,121)</b>	<b>-27%</b>
7	<b>Average Cost</b>	<b>\$3,204</b>	<b>\$4,328</b>	<b>\$1,124</b>	<b>35%</b>
8	Charity Care - Inpatient Charges	\$4,353,667	\$3,864,448	(\$489,219)	-11%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	9,255,033	2,452,557	(6,802,476)	-74%
10	Charity Care - Emergency Department Charges	2,106,501	5,592,786	3,486,285	166%
11	<b>Total Charges (A)</b>	<b>\$15,715,201</b>	<b>\$11,909,791</b>	<b>(\$3,805,410)</b>	<b>-24%</b>
12	Charity Care - Number of Patient Days	533	419	(114)	-21%
13	Charity Care - Number of Discharges	173	115	(58)	-34%
14	Charity Care - Number of Outpatient ED Visits	359	787	428	119%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	6,738	3,383	(3,355)	-50%
<b>B. Hospital Bad Debts (from HRS Report 500)</b>					
1	Bad Debts - Inpatient Services	\$19,192,064	\$19,658,293	\$466,229	2%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	12,042,846	14,160,716	2,117,870	18%
3	Bad Debts - Emergency Department	13,589,956	14,115,668	525,712	4%
4	<b>Total Bad Debts (A)</b>	<b>\$44,824,866</b>	<b>\$47,934,677</b>	<b>\$3,109,811</b>	<b>7%</b>
<b>C. Hospital Uncompensated Care (from HRS Report 500)</b>					
1	Charity Care (A)	\$15,715,201	\$11,909,791	(\$3,805,410)	-24%
2	Bad Debts (A)	44,824,866	47,934,677	3,109,811	7%
3	<b>Total Uncompensated Care (A)</b>	<b>\$60,540,067</b>	<b>\$59,844,468</b>	<b>(\$695,599)</b>	<b>-1%</b>
4	Uncompensated Care - Inpatient Services	\$23,545,731	\$23,522,741	(\$22,990)	0%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	21,297,879	16,613,273	(4,684,606)	-22%
6	Uncompensated Care - Emergency Department	15,696,457	19,708,454	4,011,997	26%
7	<b>Total Uncompensated Care (A)</b>	<b>\$60,540,067</b>	<b>\$59,844,468</b>	<b>(\$695,599)</b>	<b>-1%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					



STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2009				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2007	ACTUAL FY 2008	ACTUAL FY 2009
<b>A. <u>Gross and Net Revenue</u></b>				
1	Inpatient Gross Revenue	\$396,062,515	\$474,398,080	\$519,029,050
2	Outpatient Gross Revenue	\$430,710,504	\$515,571,431	\$637,988,263
3	Total Gross Patient Revenue	\$826,773,019	\$989,969,511	\$1,157,017,313
4	Net Patient Revenue	\$333,269,000	\$381,968,990	\$416,937,724
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$341,537,208	\$389,133,838	\$425,519,879
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	73,908	76,971	75,272
2	Discharges	16,672	15,856	14,888
3	Average Length of Stay	4.4	4.9	5.1
4	Equivalent (Adjusted) Patient Days (EPD)	154,282	160,622	167,796
0	Equivalent (Adjusted) Discharges (ED)	34,802	33,088	33,188
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.04977	1.20265	1.21399
2	Case Mix Adjusted Patient Days (CMAPD)	77,587	92,570	91,380
3	Case Mix Adjusted Discharges (CMAD)	17,502	19,069	18,074
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	161,961	193,173	203,703
5	Case Mix Adjusted Equivalent Discharges (CMAED)	36,535	39,794	40,290
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$11,187	\$12,862	\$15,371
2	Total Gross Revenue per Discharge	\$49,591	\$62,435	\$77,715
3	Total Gross Revenue per EPD	\$5,359	\$6,163	\$6,895
4	Total Gross Revenue per ED	\$23,756	\$29,919	\$34,862
5	Total Gross Revenue per CMAEPD	\$5,105	\$5,125	\$5,680
6	Total Gross Revenue per CMAED	\$22,630	\$24,878	\$28,717
7	Inpatient Gross Revenue per EPD	\$2,567	\$2,953	\$3,093
8	Inpatient Gross Revenue per ED	\$11,380	\$14,337	\$15,639

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
<b>F.</b>	<b><u>Net Revenue Per Statistic</u></b>			
1	Net Patient Revenue per Patient Day	\$4,509	\$4,963	\$5,539
2	Net Patient Revenue per Discharge	\$19,990	\$24,090	\$28,005
3	Net Patient Revenue per EPD	\$2,160	\$2,378	\$2,485
4	Net Patient Revenue per ED	\$9,576	\$11,544	\$12,563
5	Net Patient Revenue per CMAEPD	\$2,058	\$1,977	\$2,047
6	Net Patient Revenue per CMAED	\$9,122	\$9,599	\$10,348
<b>G.</b>	<b><u>Operating Expense Per Statistic</u></b>			
1	Total Operating Expense per Patient Day	\$4,621	\$5,056	\$5,653
2	Total Operating Expense per Discharge	\$20,486	\$24,542	\$28,581
3	Total Operating Expense per EPD	\$2,214	\$2,423	\$2,536
4	Total Operating Expense per ED	\$9,814	\$11,761	\$12,821
5	Total Operating Expense per CMAEPD	\$2,109	\$2,014	\$2,089
6	Total Operating Expense per CMAED	\$9,348	\$9,779	\$10,561
<b>H.</b>	<b><u>Nursing Salary and Fringe Benefits Expense</u></b>			
1	Nursing Salary Expense	\$42,231,535	\$44,863,659	\$51,850,186
2	Nursing Fringe Benefits Expense	\$9,744,984	\$9,646,656	\$11,404,309
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$51,976,519</b>	<b>\$54,510,315</b>	<b>\$63,254,495</b>
<b>I.</b>	<b><u>Physician Salary and Fringe Expense</u></b>			
1	Physician Salary Expense	\$14,535,786	\$15,310,689	\$17,126,431
2	Physician Fringe Benefits Expense	\$3,354,152	\$3,292,129	\$3,766,913
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$17,889,938</b>	<b>\$18,602,818</b>	<b>\$20,893,344</b>
<b>J.</b>	<b><u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u></b>			
1	Non-Nursing, Non-Physician Salary Expense	\$66,438,748	\$80,082,283	\$85,526,196
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$15,330,832	\$17,219,422	\$18,811,257
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$81,769,580</b>	<b>\$97,301,705</b>	<b>\$104,337,453</b>
<b>K.</b>	<b><u>Total Salary and Fringe Benefits Expense</u></b>			
1	Total Salary Expense	\$123,206,069	\$140,256,631	\$154,502,813
2	Total Fringe Benefits Expense	\$28,429,968	\$30,158,207	\$33,982,479
<b>3</b>	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$151,636,037</b>	<b>\$170,414,838</b>	<b>\$188,485,292</b>

<b>STAMFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2009</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2007</b>	<b>ACTUAL FY 2008</b>	<b>ACTUAL FY 2009</b>
<b>L. Total Full Time Equivalent Employees (FTEs)</b>				
1	Total Nursing FTEs	567.2	515.9	564.6
2	Total Physician FTEs	98.5	101.2	104.9
3	Total Non-Nursing, Non-Physician FTEs	1108.8	1262.2	1228.9
4	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>1,774.5</b>	<b>1,879.3</b>	<b>1,898.4</b>
<b>M. Nursing Salaries and Fringe Benefits Expense per FTE</b>				
1	Nursing Salary Expense per FTE	\$74,456	\$86,962	\$91,835
2	Nursing Fringe Benefits Expense per FTE	\$17,181	\$18,699	\$20,199
3	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$91,637</b>	<b>\$105,661</b>	<b>\$112,034</b>
<b>N. Physician Salary and Fringe Expense per FTE</b>				
1	Physician Salary Expense per FTE	\$147,571	\$151,291	\$163,264
2	Physician Fringe Benefits Expense per FTE	\$34,052	\$32,531	\$35,910
3	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$181,624</b>	<b>\$183,822</b>	<b>\$199,174</b>
<b>O. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>				
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$59,920	\$63,447	\$69,596
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$13,827	\$13,642	\$15,307
3	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$73,746</b>	<b>\$77,089</b>	<b>\$84,903</b>
<b>P. Total Salary and Fringe Benefits Expense per FTE</b>				
1	Total Salary Expense per FTE	\$69,431	\$74,632	\$81,386
2	Total Fringe Benefits Expense per FTE	\$16,021	\$16,048	\$17,901
3	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$85,453</b>	<b>\$90,680</b>	<b>\$99,286</b>
<b>Q. Total Salary and Fringe Ben. Expense per Statistic</b>				
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,052	\$2,214	\$2,504
2	Total Salary and Fringe Benefits Expense per Discharge	\$9,095	\$10,748	\$12,660
3	Total Salary and Fringe Benefits Expense per EPD	\$983	\$1,061	\$1,123
4	Total Salary and Fringe Benefits Expense per ED	\$4,357	\$5,150	\$5,679
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$936	\$882	\$925
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,150	\$4,282	\$4,678