

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$13,957,075	\$33,536,251	\$19,579,176	140%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$116,952,445	\$116,439,803	(\$512,642)	0%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	(\$4,120,386)	\$8,221,672	\$12,342,058	-300%
6	Due From Third Party Payers	\$6,972,476	\$0	(\$6,972,476)	-100%
7	Inventories of Supplies	\$10,595,678	\$10,906,251	\$310,573	3%
8	Prepaid Expenses	\$14,983,134	\$16,882,386	\$1,899,252	13%
9	Other Current Assets	\$16,067,104	\$23,036,236	\$6,969,132	43%
	Total Current Assets	\$175,407,526	\$209,022,599	\$33,615,073	19%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$91,129,918	\$95,521,928	\$4,392,010	5%
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	\$270,851,312	\$289,276,135	\$18,424,823	7%
	Total Noncurrent Assets Whose Use is Limited:	\$361,981,230	\$384,798,063	\$22,816,833	6%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$15,708,815	\$34,928,556	\$19,219,741	122%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$750,450,223	\$797,924,023	\$47,473,800	6%
2	Less: Accumulated Depreciation	\$512,321,937	\$552,907,136	\$40,585,199	8%
	Property, Plant and Equipment, Net	\$238,128,286	\$245,016,887	\$6,888,601	3%
3	Construction in Progress	\$28,598,070	\$36,889,362	\$8,291,292	29%
	Total Net Fixed Assets	\$266,726,356	\$281,906,249	\$15,179,893	6%
	Total Assets	\$819,823,927	\$910,655,467	\$90,831,540	11%

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<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2009 ACTUAL</u>	<u>FY 2010 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$44,618,325	\$41,856,450	(\$2,761,875)	-6%
2	Salaries, Wages and Payroll Taxes	\$37,105,008	\$21,592,183	(\$15,512,825)	-42%
3	Due To Third Party Payers	\$0	\$1,980,663	\$1,980,663	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$17,019,901	\$16,408,879	(\$611,022)	-4%
6	Current Portion of Notes Payable	\$10,001,011	\$30,300,808	\$20,299,797	203%
7	Other Current Liabilities	\$20,856,731	\$20,015,802	(\$840,929)	-4%
	Total Current Liabilities	\$129,600,976	\$132,154,785	\$2,553,809	2%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$45,940,000	\$62,156,676	\$16,216,676	35%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$45,940,000	\$62,156,676	\$16,216,676	35%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$240,294,553	\$288,624,232	\$48,329,679	20%
	Total Long Term Liabilities	\$286,234,553	\$350,780,908	\$64,546,355	23%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$164,603,489	\$178,313,676	\$13,710,187	8%
2	Temporarily Restricted Net Assets	\$85,669,294	\$89,881,759	\$4,212,465	5%
3	Permanently Restricted Net Assets	\$153,715,615	\$159,524,339	\$5,808,724	4%
	Total Net Assets	\$403,988,398	\$427,719,774	\$23,731,376	6%
	Total Liabilities and Net Assets	\$819,823,927	\$910,655,467	\$90,831,540	11%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,744,642,025	\$1,901,719,123	\$157,077,098	9%
2	Less: Allowances	\$997,187,843	\$1,077,109,384	\$79,921,541	8%
3	Less: Charity Care	\$30,242,441	\$29,803,690	(\$438,751)	-1%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$717,211,741	\$794,806,049	\$77,594,308	11%
5	Other Operating Revenue	\$102,144,479	\$129,170,425	\$27,025,946	26%
6	Net Assets Released from Restrictions	\$10,184,161	\$8,623,312	(\$1,560,849)	-15%
	Total Operating Revenue	\$829,540,381	\$932,599,786	\$103,059,405	12%
B. Operating Expenses:					
1	Salaries and Wages	\$365,409,670	\$398,505,926	\$33,096,256	9%
2	Fringe Benefits	\$77,410,993	\$100,636,264	\$23,225,271	30%
3	Physicians Fees	\$32,848,360	\$36,006,766	\$3,158,406	10%
4	Supplies and Drugs	\$114,234,925	\$126,188,219	\$11,953,294	10%
5	Depreciation and Amortization	\$40,686,788	\$42,312,460	\$1,625,672	4%
6	Bad Debts	\$23,850,530	\$37,824,767	\$13,974,237	59%
7	Interest	\$607,197	\$614,483	\$7,286	1%
8	Malpractice	\$13,503,692	\$14,000,101	\$496,409	4%
9	Other Operating Expenses	\$155,901,950	\$163,912,169	\$8,010,219	5%
	Total Operating Expenses	\$824,454,105	\$920,001,155	\$95,547,050	12%
	Income/(Loss) From Operations	\$5,086,276	\$12,598,631	\$7,512,355	148%
C. Non-Operating Revenue:					
1	Income from Investments	\$2,751,825	\$4,526,884	\$1,775,059	65%
2	Gifts, Contributions and Donations	\$629,981	\$995,454	\$365,473	58%
3	Other Non-Operating Gains/(Losses)	(\$16,940,434)	(\$309,659)	\$16,630,775	-98%
	Total Non-Operating Revenue	(\$13,558,628)	\$5,212,679	\$18,771,307	-138%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$8,472,352)	\$17,811,310	\$26,283,662	-310%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$2,583,404	\$15,769,108	\$13,185,704	510%
	All Other Adjustments	\$1,648,141	\$0	(\$1,648,141)	-100%
	Total Other Adjustments	\$4,231,545	\$15,769,108	\$11,537,563	273%
	Excess/(Deficiency) of Revenue Over Expenses	(\$4,240,807)	\$33,580,418	\$37,821,225	-892%
	Principal Payments	\$2,363,100	\$2,363,100	\$0	0%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	GROSS REVENUE BY PAYER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$501,557,333	\$555,399,320	\$53,841,987	11%
2	MEDICARE MANAGED CARE	\$82,023,000	\$99,625,478	\$17,602,478	21%
3	MEDICAID	\$114,044,139	\$152,660,482	\$38,616,343	34%
4	MEDICAID MANAGED CARE	\$37,601,071	\$44,897,566	\$7,296,495	19%
5	CHAMPUS/TRICARE	\$6,679,660	\$4,791,123	(\$1,888,537)	-28%
6	COMMERCIAL INSURANCE	\$12,730,071	\$13,465,554	\$735,483	6%
7	NON-GOVERNMENT MANAGED CARE	\$397,393,317	\$405,793,355	\$8,400,038	2%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$19,069,035	\$19,801,383	\$732,348	4%
10	SAGA	\$49,341,390	\$27,257,124	(\$22,084,266)	-45%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$1,220,439,016	\$1,323,691,385	\$103,252,369	8%
B.	OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$145,126,884	\$158,340,524	\$13,213,640	9%
2	MEDICARE MANAGED CARE	\$20,223,644	\$28,489,561	\$8,265,917	41%
3	MEDICAID	\$39,083,390	\$58,016,080	\$18,932,690	48%
4	MEDICAID MANAGED CARE	\$32,361,841	\$38,190,798	\$5,828,957	18%
5	CHAMPUS/TRICARE	\$1,586,174	\$2,317,387	\$731,213	46%
6	COMMERCIAL INSURANCE	\$6,093,498	\$7,584,781	\$1,491,283	24%
7	NON-GOVERNMENT MANAGED CARE	\$201,646,470	\$245,724,993	\$44,078,523	22%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$26,654,052	\$27,329,396	\$675,344	3%
10	SAGA	\$21,216,679	\$12,034,218	(\$9,182,461)	-43%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$493,992,632	\$578,027,738	\$84,035,106	17%
C.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$646,684,217	\$713,739,844	\$67,055,627	10%
2	MEDICARE MANAGED CARE	\$102,246,644	\$128,115,039	\$25,868,395	25%
3	MEDICAID	\$153,127,529	\$210,676,562	\$57,549,033	38%
4	MEDICAID MANAGED CARE	\$69,962,912	\$83,088,364	\$13,125,452	19%
5	CHAMPUS/TRICARE	\$8,265,834	\$7,108,510	(\$1,157,324)	-14%
6	COMMERCIAL INSURANCE	\$18,823,569	\$21,050,335	\$2,226,766	12%
7	NON-GOVERNMENT MANAGED CARE	\$599,039,787	\$651,518,348	\$52,478,561	9%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$45,723,087	\$47,130,779	\$1,407,692	3%
10	SAGA	\$70,558,069	\$39,291,342	(\$31,266,727)	-44%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,714,431,648	\$1,901,719,123	\$187,287,475	11%
II.	NET REVENUE BY PAYER				
A.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$198,225,476	\$223,202,415	\$24,976,939	13%
2	MEDICARE MANAGED CARE	\$30,464,729	\$37,739,964	\$7,275,235	24%
3	MEDICAID	\$36,029,227	\$48,119,130	\$12,089,903	34%
4	MEDICAID MANAGED CARE	\$14,812,276	\$18,369,872	\$3,557,596	24%
5	CHAMPUS/TRICARE	\$1,922,241	\$897,963	(\$1,024,278)	-53%
6	COMMERCIAL INSURANCE	\$12,568,320	\$11,018,539	(\$1,549,781)	-12%
7	NON-GOVERNMENT MANAGED CARE	\$194,993,402	\$206,393,940	\$11,400,538	6%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$1,264,171	\$1,057,043	(\$207,128)	-16%
10	SAGA	\$7,516,434	\$7,279,004	(\$237,430)	-3%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$497,796,276	\$554,077,870	\$56,281,594	11%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$48,089,348	\$52,319,090	\$4,229,742	9%
2	MEDICARE MANAGED CARE	\$6,256,075	\$8,741,023	\$2,484,948	40%
3	MEDICAID	\$11,469,865	\$12,214,103	\$744,238	6%
4	MEDICAID MANAGED CARE	\$9,496,635	\$11,224,417	\$1,727,782	18%
5	CHAMPUS/TRICARE	\$517,232	\$1,091,920	\$574,688	111%
6	COMMERCIAL INSURANCE	\$6,016,073	\$6,206,443	\$190,370	3%
7	NON-GOVERNMENT MANAGED CARE	\$102,774,265	\$124,926,731	\$22,152,466	22%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$1,767,017	\$1,458,906	(\$308,111)	-17%
10	SAGA	\$4,336,291	\$2,632,027	(\$1,704,264)	-39%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$190,722,801	\$220,814,660	\$30,091,859	16%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$246,314,824	\$275,521,505	\$29,206,681	12%
2	MEDICARE MANAGED CARE	\$36,720,804	\$46,480,987	\$9,760,183	27%
3	MEDICAID	\$47,499,092	\$60,333,233	\$12,834,141	27%
4	MEDICAID MANAGED CARE	\$24,308,911	\$29,594,289	\$5,285,378	22%
5	CHAMPUS/TRICARE	\$2,439,473	\$1,989,883	(\$449,590)	-18%
6	COMMERCIAL INSURANCE	\$18,584,393	\$17,224,982	(\$1,359,411)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$297,767,667	\$331,320,671	\$33,553,004	11%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$3,031,188	\$2,515,949	(\$515,239)	-17%
10	SAGA	\$11,852,725	\$9,911,031	(\$1,941,694)	-16%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$688,519,077	\$774,892,530	\$86,373,453	13%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	13,575	13,542	(33)	0%
2	MEDICARE MANAGED CARE	1,958	2,277	319	16%
3	MEDICAID	3,707	4,582	875	24%
4	MEDICAID MANAGED CARE	3,235	3,341	106	3%
5	CHAMPUS/TRICARE	186	166	(20)	-11%
6	COMMERCIAL INSURANCE	345	326	(19)	-6%
7	NON-GOVERNMENT MANAGED CARE	15,600	15,034	(566)	-4%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	694	690	(4)	-1%
10	SAGA	1,888	1,307	(581)	-31%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	41,188	41,265	77	0%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	84,415	87,072	2,657	3%
2	MEDICARE MANAGED CARE	12,351	14,222	1,871	15%
3	MEDICAID	26,628	31,474	4,846	18%
4	MEDICAID MANAGED CARE	9,943	10,572	629	6%
5	CHAMPUS/TRICARE	1,211	951	(260)	-21%

**HARTFORD HOSPITAL
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FISCAL YEAR 2010
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
6	COMMERCIAL INSURANCE	1,623	1,554	(69)	-4%
7	NON-GOVERNMENT MANAGED CARE	66,209	63,877	(2,332)	-4%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	3,053	2,939	(114)	-4%
10	SAGA	10,525	7,453	(3,072)	-29%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	215,958	220,114	4,156	2%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	47,268	72,329	25,061	53%
2	MEDICARE MANAGED CARE	3,691	8,959	5,268	143%
3	MEDICAID	47,909	56,665	8,756	18%
4	MEDICAID MANAGED CARE	49,675	62,651	12,976	26%
5	CHAMPUS/TRICARE	390	475	85	22%
6	COMMERCIAL INSURANCE	2,659	11,069	8,410	316%
7	NON-GOVERNMENT MANAGED CARE	34,637	79,774	45,137	130%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	28,104	35,449	7,345	26%
10	SAGA	14,900	11,763	(3,137)	-21%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	229,233	339,134	109,901	48%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$20,967,786	\$25,253,004	\$4,285,218	20%
2	MEDICARE MANAGED CARE	\$4,119,951	\$5,658,118	\$1,538,167	37%
3	MEDICAID	\$12,750,993	\$20,041,271	\$7,290,278	57%
4	MEDICAID MANAGED CARE	\$16,348,457	\$18,183,797	\$1,835,340	11%
5	CHAMPUS/TRICARE	\$560,817	\$568,660	\$7,843	1%
6	COMMERCIAL INSURANCE	\$3,538,765	\$39,932,948	\$36,394,183	1028%
7	NON-GOVERNMENT MANAGED CARE	\$36,624,069	\$37,583,382	\$959,313	3%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$16,995,384	\$22,410,799	\$5,415,415	32%
10	SAGA	\$12,762,621	\$10,200,153	(\$2,562,468)	-20%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$124,668,843	\$179,832,132	\$55,163,289	44%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$5,195,674	\$6,010,215	\$814,541	16%
2	MEDICARE MANAGED CARE	\$1,020,043	\$1,324,000	\$303,957	30%
3	MEDICAID	\$2,816,514	\$4,078,399	\$1,261,885	45%
4	MEDICAID MANAGED CARE	\$3,839,769	\$4,000,435	\$160,666	4%
5	CHAMPUS/TRICARE	\$189,550	\$164,911	(\$24,639)	-13%
6	COMMERCIAL INSURANCE	\$3,538,765	\$3,897,551	\$358,786	10%
7	NON-GOVERNMENT MANAGED CARE	\$15,747,393	\$16,857,577	\$1,110,184	7%
8	WORKER'S COMPENSATION	\$0	\$0	\$0	0%
9	SELF- PAY/UNINSURED	\$15,682,984	\$20,640,346	\$4,957,362	32%
10	SAGA	\$2,415,617	\$1,938,029	(\$477,588)	-20%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$50,446,309	\$58,911,463	\$8,465,154	17%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	9,999	10,283	284	3%
2	MEDICARE MANAGED CARE	1,813	2,301	488	27%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
3	MEDICAID	8,186	12,524	4,338	53%
4	MEDICAID MANAGED CARE	12,421	13,592	1,171	9%
5	CHAMPUS/TRICARE	274	228	(46)	-17%
6	COMMERCIAL INSURANCE	1,779	2,157	378	21%
7	NON-GOVERNMENT MANAGED CARE	18,060	16,266	(1,794)	-10%
8	WORKER'S COMPENSATION	0	0	0	0%
9	SELF- PAY/UNINSURED	11,519	14,151	2,632	23%
10	SAGA	9,664	7,168	(2,496)	-26%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	73,715	78,670	4,955	7%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2009 ACTUAL</u>	<u>FY 2010 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$121,405,571	\$133,233,307	\$11,827,736	10%
2	Physician Salaries	\$36,421,774	\$38,244,961	\$1,823,187	5%
3	Non-Nursing, Non-Physician Salaries	\$207,582,325	\$227,027,658	\$19,445,333	9%
	Total Salaries & Wages	\$365,409,670	\$398,505,926	\$33,096,256	9%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$26,537,268	\$33,209,967	\$6,672,699	25%
2	Physician Fringe Benefits	\$7,961,203	\$10,063,626	\$2,102,423	26%
3	Non-Nursing, Non-Physician Fringe Benefits	\$42,912,522	\$57,362,671	\$14,450,149	34%
	Total Fringe Benefits	\$77,410,993	\$100,636,264	\$23,225,271	30%
C. Contractual Labor Fees:					
1	Nursing Fees	\$387,389	\$2,429,188	\$2,041,799	527%
2	Physician Fees	\$32,848,360	\$36,006,766	\$3,158,406	10%
3	Non-Nursing, Non-Physician Fees	\$23,335,390	\$21,104,575	(\$2,230,815)	-10%
	Total Contractual Labor Fees	\$56,571,139	\$59,540,529	\$2,969,390	5%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$88,271,164	\$97,557,669	\$9,286,505	11%
2	Pharmaceutical Costs	\$25,963,761	\$28,630,550	\$2,666,789	10%
	Total Medical Supplies and Pharmaceutical Cost	\$114,234,925	\$126,188,219	\$11,953,294	10%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$18,063,736	\$18,740,725	\$676,989	4%
2	Depreciation-Equipment	\$22,364,637	\$23,571,735	\$1,207,098	5%
3	Amortization	\$258,415	\$0	(\$258,415)	-100%
	Total Depreciation and Amortization	\$40,686,788	\$42,312,460	\$1,625,672	4%
F. Bad Debts:					
1	Bad Debts	\$23,850,530	\$37,824,767	\$13,974,237	59%
G. Interest Expense:					
1	Interest Expense	\$607,197	\$614,483	\$7,286	1%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$13,503,692	\$14,000,101	\$496,409	4%
I. Utilities:					
1	Water	\$544,535	\$469,003	(\$75,532)	-14%
2	Natural Gas	\$5,724,195	\$4,338,309	(\$1,385,886)	-24%
3	Oil	\$86,451	\$129,396	\$42,945	50%
4	Electricity	\$10,594,020	\$10,426,891	(\$167,129)	-2%
5	Telephone	\$2,411,589	\$2,848,597	\$437,008	18%
6	Other Utilities	\$1,069,761	\$1,267,609	\$197,848	18%
	Total Utilities	\$20,430,551	\$19,479,805	(\$950,746)	-5%
J. Business Expenses:					
1	Accounting Fees	\$443,549	\$334,524	(\$109,025)	-25%
2	Legal Fees	\$1,129,534	\$1,255,344	\$125,810	11%
3	Consulting Fees	\$7,465,609	\$8,738,301	\$1,272,692	17%
4	Dues and Membership	\$10,841,346	\$11,269,309	\$427,963	4%
5	Equipment Leases	\$14,973,281	\$15,703,464	\$730,183	5%
6	Building Leases	\$5,854,711	\$7,196,711	\$1,342,000	23%
7	Repairs and Maintenance	\$14,520,485	\$15,474,074	\$953,589	7%
8	Insurance	\$2,095,901	\$1,617,798	(\$478,103)	-23%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2009 ACTUAL</u>	<u>FY 2010 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$1,231,655	\$1,591,295	\$359,640	29%
10	Conferences	\$352,291	\$346,324	(\$5,967)	-2%
11	Property Tax	\$151,871	\$243,968	\$92,097	61%
12	General Supplies	\$5,751,997	\$6,049,238	\$297,241	5%
13	Licenses and Subscriptions	\$592,608	\$628,302	\$35,694	6%
14	Postage and Shipping	\$834,451	\$826,302	(\$8,149)	-1%
15	Advertising	\$2,075,173	\$2,882,371	\$807,198	39%
16	Other Business Expenses	\$16,048,485	\$17,146,996	\$1,098,511	7%
	Total Business Expenses	\$84,362,947	\$91,304,321	\$6,941,374	8%
K.	<u>Other Operating Expense:</u>				
1	Miscellaneous Other Operating Expenses	\$27,385,673	\$29,594,280	\$2,208,607	8%
	Total Operating Expenses - All Expense Categories*	\$824,454,105	\$920,001,155	\$95,547,050	12%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	<u>OPERATING EXPENSE BY DEPARTMENT</u>				
A.	<u>General Services:</u>				
1	General Administration	\$162,701,762	\$139,054,997	(\$23,646,765)	-15%
2	General Accounting	\$9,193,973	\$49,619,297	\$40,425,324	440%
3	Patient Billing & Collection	\$14,342,249	\$14,796,433	\$454,184	3%
4	Admitting / Registration Office	\$800,423	\$2,859,278	\$2,058,855	257%
5	Data Processing	\$21,764,505	\$29,748,206	\$7,983,701	37%
6	Communications	\$5,020,945	\$5,741,733	\$720,788	14%
7	Personnel	\$7,413,535	\$9,868,081	\$2,454,546	33%
8	Public Relations	\$4,167,656	\$6,302,590	\$2,134,934	51%
9	Purchasing	\$2,760,875	\$3,215,790	\$454,915	16%
10	Dietary and Cafeteria	\$11,189,837	\$12,410,739	\$1,220,902	11%
11	Housekeeping	\$9,850,355	\$11,098,298	\$1,247,943	13%
12	Laundry & Linen	\$3,836,271	\$4,086,437	\$250,166	7%
13	Operation of Plant	\$19,816,221	\$21,384,032	\$1,567,811	8%
14	Security	\$5,043,056	\$5,597,728	\$554,672	11%
15	Repairs and Maintenance	\$12,217,627	\$13,192,943	\$975,316	8%
16	Central Sterile Supply	\$3,421,267	\$4,230,953	\$809,686	24%
17	Pharmacy Department	\$31,017,068	\$34,084,350	\$3,067,282	10%
18	Other General Services	\$33,509,911	\$10,608,624	(\$22,901,287)	-68%
	Total General Services	\$358,067,536	\$377,900,509	\$19,832,973	6%
B.	<u>Professional Services:</u>				
1	Medical Care Administration	\$4,937,421	\$5,133,754	\$196,333	4%
2	Residency Program	\$21,207,694	\$23,846,129	\$2,638,435	12%
3	Nursing Services Administration	\$13,078,970	\$15,732,757	\$2,653,787	20%
4	Medical Records	\$6,889,649	\$6,982,434	\$92,785	1%
5	Social Service	\$1,331,675	\$1,403,081	\$71,406	5%
6	Other Professional Services	\$3,069,629	\$2,560,544	(\$509,085)	-17%
	Total Professional Services	\$50,515,038	\$55,658,699	\$5,143,661	10%
C.	<u>Special Services:</u>				
1	Operating Room	\$57,785,656	\$68,649,259	\$10,863,603	19%
2	Recovery Room	\$2,967,093	\$3,216,806	\$249,713	8%
3	Anesthesiology	\$3,203,985	\$4,366,100	\$1,162,115	36%
4	Delivery Room	\$9,369,335	\$10,371,580	\$1,002,245	11%
5	Diagnostic Radiology	\$16,261,735	\$18,967,946	\$2,706,211	17%
6	Diagnostic Ultrasound	\$766,756	\$883,636	\$116,880	15%
7	Radiation Therapy	\$8,753,534	\$10,889,854	\$2,136,320	24%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2009 ACTUAL</u>	<u>FY 2010 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
8	Radioisotopes	\$3,264,774	\$3,308,506	\$43,732	1%
9	CT Scan	\$2,776,856	\$3,290,823	\$513,967	19%
10	Laboratory	\$27,232,999	\$28,816,247	\$1,583,248	6%
11	Blood Storing/Processing	\$9,778,112	\$10,490,220	\$712,108	7%
12	Cardiology	\$1,080,109	\$2,491,495	\$1,411,386	131%
13	Electrocardiology	\$1,345,068	\$1,432,785	\$87,717	7%
14	Electroencephalography	\$207,375	\$303,103	\$95,728	46%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$568,885	\$413,000	(\$155,885)	-27%
17	Audiology	\$60,761	\$78,356	\$17,595	29%
18	Respiratory Therapy	\$6,816,176	\$7,554,165	\$737,989	11%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$1,282,804	\$1,488,067	\$205,263	16%
21	Shock Therapy	\$490,812	\$682,490	\$191,678	39%
22	Psychiatry / Psychology Services	\$14,769,543	\$14,946,702	\$177,159	1%
23	Renal Dialysis	\$7,059,615	\$7,472,651	\$413,036	6%
24	Emergency Room	\$22,851,894	\$23,953,158	\$1,101,264	5%
25	MRI	\$2,021,391	\$2,404,554	\$383,163	19%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$472,607	\$485,083	\$12,476	3%
28	Endoscopy	\$4,251,665	\$4,435,017	\$183,352	4%
29	Sleep Center	\$1,787,728	\$2,125,253	\$337,525	19%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$18,418,232	\$22,428,677	\$4,010,445	22%
32	Occupational Therapy / Physical Therapy	\$5,694,722	\$21,330,909	\$15,636,187	275%
33	Dental Clinic	\$902,444	\$1,074,995	\$172,551	19%
34	Other Special Services	\$14,488,026	\$16,065,867	\$1,577,841	11%
	Total Special Services	\$246,730,692	\$294,417,304	\$47,686,612	19%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$81,145,159	\$93,628,120	\$12,482,961	15%
2	Intensive Care Unit	\$19,309,469	\$22,933,260	\$3,623,791	19%
3	Coronary Care Unit	\$4,208,110	\$4,404,193	\$196,083	5%
4	Psychiatric Unit	\$17,273,626	\$18,878,486	\$1,604,860	9%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$6,040,188	\$5,434,876	(\$605,312)	-10%
7	Newborn Nursery Unit	\$2,959,887	\$2,791,405	(\$168,482)	-6%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$5,239,661	\$6,441,052	\$1,201,391	23%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$9,979,087	\$12,459,006	\$2,479,919	25%
13	Other Routine Services	\$48,986	\$0	(\$48,986)	-100%
	Total Routine Services	\$146,204,173	\$166,970,398	\$20,766,225	14%
E.	<u>Other Departments:</u>				
1	Miscellaneous Other Departments	\$22,936,666	\$25,054,245	\$2,117,579	9%
	Total Operating Expenses - All Departments*	\$824,454,105	\$920,001,155	\$95,547,050	12%
	*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$639,563,211	\$ 717,211,741	\$794,806,049
2	Other Operating Revenue	133,795,519	112,328,640	137,793,737
3	Total Operating Revenue	\$773,358,730	\$829,540,381	\$932,599,786
4	Total Operating Expenses	779,129,428	824,454,105	920,001,155
5	Income/(Loss) From Operations	(\$5,770,698)	\$5,086,276	\$12,598,631
6	Total Non-Operating Revenue	(34,329,921)	(9,327,083)	20,981,787
7	Excess/(Deficiency) of Revenue Over Expenses	(\$40,100,619)	(\$4,240,807)	\$33,580,418
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	-0.78%	0.62%	1.32%
2	Hospital Non Operating Margin	-4.65%	-1.14%	2.20%
3	Hospital Total Margin	-5.43%	-0.52%	3.52%
4	Income/(Loss) From Operations	(\$5,770,698)	\$5,086,276	\$12,598,631
5	Total Operating Revenue	\$773,358,730	\$829,540,381	\$932,599,786
6	Total Non-Operating Revenue	(\$34,329,921)	(\$9,327,083)	\$20,981,787
7	Total Revenue	\$739,028,809	\$820,213,298	\$953,581,573
8	Excess/(Deficiency) of Revenue Over Expenses	(\$40,100,619)	(\$4,240,807)	\$33,580,418
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$393,127,114	\$164,603,489	\$178,313,676
2	Hospital Total Net Assets	\$648,135,482	\$403,988,398	\$427,719,774
3	Hospital Change in Total Net Assets	(\$236,434,710)	(\$244,147,084)	\$23,731,376
4	Hospital Change in Total Net Assets %	73.3%	-37.7%	5.9%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.48	0.45	0.45
2	Total Operating Expenses	\$803,829,428	\$824,454,105	\$920,001,155
3	Total Gross Revenue	\$1,555,871,786	\$1,714,431,648	\$1,901,719,123
4	Total Other Operating Revenue	\$123,220,701	\$122,550,875	\$129,170,425
5	Private Payment to Cost Ratio	1.02	1.14	1.14
6	Total Non-Government Payments	\$272,019,197	\$319,383,248	\$351,061,602

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
7	Total Uninsured Payments	\$3,596,046	\$3,031,188	\$2,515,949
8	Total Non-Government Charges	\$597,191,009	\$663,586,443	\$719,699,462
9	Total Uninsured Charges	\$45,137,778	\$45,723,087	\$47,130,779
10	<u>Medicare Payment to Cost Ratio</u>	0.82	0.84	0.84
11	Total Medicare Payments	\$275,088,775	\$283,035,628	\$322,002,492
12	Total Medicare Charges	\$704,222,818	\$748,930,861	\$841,854,883
13	<u>Medicaid Payment to Cost Ratio</u>	0.76	0.72	0.68
14	Total Medicaid Payments	\$66,455,454	\$71,808,003	\$89,927,522
15	Total Medicaid Charges	\$182,899,480	\$223,090,441	\$293,764,926
16	<u>Uncompensated Care Cost</u>	\$25,355,190	\$21,468,858	\$29,595,623
17	Charity Care	\$22,281,604	\$23,984,656	\$27,507,152
18	Bad Debts	\$30,682,007	\$23,850,531	\$37,824,767
19	Total Uncompensated Care	\$52,963,611	\$47,835,187	\$65,331,919
20	<u>Uncompensated Care % of Total Expenses</u>	3.2%	2.6%	3.2%
21	Total Operating Expenses	\$803,829,428	\$824,454,105	\$920,001,155
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.39	1.35	1.58
2	Total Current Assets	\$162,702,986	\$175,407,526	\$209,022,599
3	Total Current Liabilities	\$116,953,564	\$129,600,976	\$132,154,785
4	<u>Days Cash on Hand</u>	5	6	14
5	Cash and Cash Equivalents	\$10,244,779	\$13,957,075	\$33,536,251
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$10,244,779	\$13,957,075	\$33,536,251
8	Total Operating Expenses	\$779,129,428	\$824,454,105	\$920,001,155
9	Depreciation Expense	\$39,305,209	\$40,686,788	\$42,312,460
10	Operating Expenses less Depreciation Expense	\$739,824,219	\$783,767,317	\$877,688,695
11	<u>Days Revenue in Patient Accounts Receivable</u>	66.41	63.07	52.56

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
12	Net Patient Accounts Receivable	\$ 105,442,656	\$ 116,952,445	\$ 116,439,803
13	Due From Third Party Payers	\$10,926,483	\$6,972,476	\$0
14	Due To Third Party Payers	\$0	\$0	\$1,980,663
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 116,369,139	\$ 123,924,921	\$ 114,459,140
16	Total Net Patient Revenue	\$639,563,211	\$ 717,211,741	\$ 794,806,049
17	<u>Average Payment Period</u>	57.70	60.36	54.96
18	Total Current Liabilities	\$116,953,564	\$129,600,976	\$132,154,785
19	Total Operating Expenses	\$779,129,428	\$824,454,105	\$920,001,155
20	Depreciation Expense	\$39,305,209	\$40,686,788	\$42,312,460
21	Total Operating Expenses less Depreciation Expense	\$739,824,219	\$783,767,317	\$877,688,695
F. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	73.1	49.3	47.0
2	Total Net Assets	\$648,135,482	\$403,988,398	\$427,719,774
3	Total Assets	\$886,163,683	\$819,823,927	\$910,655,467
4	<u>Cash Flow to Total Debt Ratio</u>	(0.5)	20.8	39.1
5	Excess/(Deficiency) of Revenues Over Expenses	(\$40,100,619)	(\$4,240,807)	\$33,580,418
6	Depreciation Expense	\$39,305,209	\$40,686,788	\$42,312,460
7	Excess of Revenues Over Expenses and Depreciation Expense	(\$795,410)	\$36,445,981	\$75,892,878
8	Total Current Liabilities	\$116,953,564	\$129,600,976	\$132,154,785
9	Total Long Term Debt	\$45,940,000	\$45,940,000	\$62,156,676
10	Total Current Liabilities and Total Long Term Debt	\$162,893,564	\$175,540,976	\$194,311,461
11	<u>Long Term Debt to Capitalization Ratio</u>	6.6	10.2	12.7
12	Total Long Term Debt	\$45,940,000	\$45,940,000	\$62,156,676
13	Total Net Assets	\$648,135,482	\$403,988,398	\$427,719,774
14	Total Long Term Debt and Total Net Assets	\$694,075,482	\$449,928,398	\$489,876,450
15	<u>Debt Service Coverage Ratio</u>	0.5	12.5	25.7
16	Excess Revenues over Expenses	(\$40,100,619)	(\$4,240,807)	\$33,580,418
17	Interest Expense	\$1,552,169	\$607,197	\$614,483
18	Depreciation and Amortization Expense	\$39,305,209	\$40,686,788	\$42,312,460

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
19	Principal Payments	\$0	\$2,363,100	\$2,363,100
G. Other Financial Ratios				
20	Average Age of Plant	12.0	12.6	13.1
21	Accumulated Depreciation	\$472,739,018	\$512,321,937	\$552,907,136
22	Depreciation and Amortization Expense	\$39,305,209	\$40,686,788	\$42,312,460
H. Utilization Measures Summary				
1	Patient Days	212,013	215,958	220,114
2	Discharges	39,840	41,188	41,265
3	ALOS	5.3	5.2	5.3
4	Staffed Beds	583	595	630
5	Available Beds	-	752	760
6	Licensed Beds	867	867	867
6	Occupancy of Staffed Beds	99.6%	99.4%	95.7%
7	Occupancy of Available Beds	77.6%	78.7%	79.3%
8	Full Time Equivalent Employees	5,331.3	5,396.3	5,648.0
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	35.5%	36.0%	35.4%
2	Medicare Gross Revenue Payer Mix Percentage	45.3%	43.7%	44.3%
3	Medicaid Gross Revenue Payer Mix Percentage	11.8%	13.0%	15.4%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	4.2%	4.1%	2.1%
5	Uninsured Gross Revenue Payer Mix Percentage	2.9%	2.7%	2.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.4%	0.5%	0.4%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$552,053,231	\$617,863,356	\$672,568,683
9	Medicare Gross Revenue (Charges)	\$704,222,818	\$748,930,861	\$841,854,883
10	Medicaid Gross Revenue (Charges)	\$182,899,480	\$223,090,441	\$293,764,926
11	Other Medical Assistance Gross Revenue (Charges)	\$65,806,664	\$70,558,069	\$39,291,342
12	Uninsured Gross Revenue (Charges)	\$45,137,778	\$45,723,087	\$47,130,779
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$5,751,815	\$8,265,834	\$7,108,510
14	Total Gross Revenue (Charges)	\$1,555,871,786	\$1,714,431,648	\$1,901,719,123
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	42.7%	45.9%	45.0%

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
2	Medicare Net Revenue Payer Mix Percentage	43.7%	41.1%	41.6%
3	Medicaid Net Revenue Payer Mix Percentage	10.6%	10.4%	11.6%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	2.0%	1.7%	1.3%
5	Uninsured Net Revenue Payer Mix Percentage	0.6%	0.4%	0.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.5%	0.4%	0.3%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$268,423,151	\$316,352,060	\$348,545,653
9	Medicare Net Revenue (Payments)	\$275,088,775	\$283,035,628	\$322,002,492
10	Medicaid Net Revenue (Payments)	\$66,455,454	\$71,808,003	\$89,927,522
11	Other Medical Assistance Net Revenue (Payments)	\$12,598,621	\$11,852,725	\$9,911,031
12	Uninsured Net Revenue (Payments)	\$3,596,046	\$3,031,188	\$2,515,949
13	CHAMPUS / TRICARE Net Revenue Payments)	\$2,934,035	\$2,439,473	\$1,989,883
14	Total Net Revenue (Payments)	\$629,096,082	\$688,519,077	\$774,892,530
K. Discharges				
1	Non-Government (Including Self Pay / Uninsured)	16,218	16,639	16,050
2	Medicare	15,288	15,533	15,819
3	Medical Assistance	8,174	8,830	9,230
4	Medicaid	6,256	6,942	7,923
5	Other Medical Assistance	1,918	1,888	1,307
6	CHAMPUS / TRICARE	160	186	166
7	Uninsured (Included In Non-Government)	664	694	690
8	Total	39,840	41,188	41,265
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.301100	1.337800	1.372200
2	Medicare	1.681600	1.659100	1.817300
3	Medical Assistance	1.054799	1.107894	1.125900
4	Medicaid	1.020400	1.079200	1.106600
5	Other Medical Assistance	1.167000	1.213400	1.242900
6	CHAMPUS / TRICARE	1.301100	1.240000	1.067800
7	Uninsured (Included In Non-Government)	1.367600	1.310900	1.352200
8	Total Case Mix Index	1.396577	1.409240	1.486513
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	15,872	16,393	16,735
2	Emergency Room - Treated and Discharged	66,455	73,715	78,670
3	Total Emergency Room Visits	82,327	90,108	95,405

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$4,306,199	\$3,451,523	(\$854,676)	-20%
2	Inpatient Payments	\$1,369,631	\$1,102,810	(\$266,821)	-19%
3	Outpatient Charges	\$961,453	\$1,361,485	\$400,032	42%
4	Outpatient Payments	\$317,229	\$618,504	\$301,275	95%
5	Discharges	91	81	(10)	-11%
6	Patient Days	631	478	(153)	-24%
7	Outpatient Visits (Excludes ED Visits)	54	376	322	596%
8	Emergency Department Outpatient Visits	41	54	13	32%
9	Emergency Department Inpatient Admissions	39	32	(7)	-18%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,267,652	\$4,813,008	(\$454,644)	-9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,686,860	\$1,721,314	\$34,454	2%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$13,031,309	\$18,180,742	\$5,149,433	40%
2	Inpatient Payments	\$5,429,118	\$7,138,190	\$1,709,072	31%
3	Outpatient Charges	\$3,363,135	\$5,260,844	\$1,897,709	56%
4	Outpatient Payments	\$1,694,641	\$1,306,846	(\$387,795)	-23%
5	Discharges	321	404	83	26%
6	Patient Days	1,774	2,297	523	29%
7	Outpatient Visits (Excludes ED Visits)	261	993	732	280%
8	Emergency Department Outpatient Visits	149	209	60	40%
9	Emergency Department Inpatient Admissions	153	202	49	32%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$16,394,444	\$23,441,586	\$7,047,142	43%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,123,759	\$8,445,036	\$1,321,277	19%

HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$28,523,373	\$34,172,100	\$5,648,727	20%
2	Inpatient Payments	\$11,248,079	\$12,412,747	\$1,164,668	10%
3	Outpatient Charges	\$6,761,528	\$8,824,461	\$2,062,933	31%
4	Outpatient Payments	\$1,931,938	\$2,984,167	\$1,052,229	54%
5	Discharges	626	712	86	14%
6	Patient Days	4,216	4,691	475	11%
7	Outpatient Visits (Excludes ED Visits)	148	1,289	1,141	771%
8	Emergency Department Outpatient Visits	284	330	46	16%
9	Emergency Department Inpatient Admissions	309	339	30	10%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$35,284,901	\$42,996,561	\$7,711,660	22%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$13,180,017	\$15,396,914	\$2,216,897	17%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$10,670,460	\$9,832,593	(\$837,867)	-8%
2	Inpatient Payments	\$3,370,964	\$4,129,156	\$758,192	22%
3	Outpatient Charges	\$1,807,120	\$2,282,009	\$474,889	26%
4	Outpatient Payments	\$256,360	\$661,359	\$404,999	158%
5	Discharges	200	200	0	0%
6	Patient Days	1,744	1,549	(195)	-11%
7	Outpatient Visits (Excludes ED Visits)	120	385	265	221%
8	Emergency Department Outpatient Visits	424	607	183	43%
9	Emergency Department Inpatient Admissions	148	297	149	101%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,477,580	\$12,114,602	(\$362,978)	-3%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,627,324	\$4,790,515	\$1,163,191	32%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$0	\$18,850,085	\$18,850,085	0%
2	Inpatient Payments	\$0	\$6,796,969	\$6,796,969	0%
3	Outpatient Charges	\$0	\$5,856,722	\$5,856,722	0%
4	Outpatient Payments	\$0	\$1,371,517	\$1,371,517	0%
5	Discharges	0	505	505	0%
6	Patient Days	0	2,920	2,920	0%
7	Outpatient Visits (Excludes ED Visits)	0	2,707	2,707	0%
8	Emergency Department Outpatient Visits	0	837	837	0%
9	Emergency Department Inpatient Admissions	0	299	299	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$24,706,807	\$24,706,807	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$8,168,486	\$8,168,486	0%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I.	AETNA				
1	Inpatient Charges	\$11,563,008	\$15,138,435	\$3,575,427	31%
2	Inpatient Payments	\$3,853,748	\$6,160,092	\$2,306,344	60%
3	Outpatient Charges	\$3,373,932	\$4,904,040	\$1,530,108	45%
4	Outpatient Payments	\$1,058,347	\$1,798,630	\$740,283	70%
5	Discharges	327	375	48	15%
6	Patient Days	1,828	2,287	459	25%
7	Outpatient Visits (Excludes ED Visits)	210	908	698	332%
8	Emergency Department Outpatient Visits	202	264	62	31%
9	Emergency Department Inpatient Admissions	211	225	14	7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$14,936,940	\$20,042,475	\$5,105,535	34%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,912,095	\$7,958,722	\$3,046,627	62%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J.	HUMANA				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L.	UNICARE LIFE & HEALTH INSURANCE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$13,928,651	\$0	(\$13,928,651)	-100%
2	Inpatient Payments	\$5,193,189	\$0	(\$5,193,189)	-100%
3	Outpatient Charges	\$3,956,476	\$0	(\$3,956,476)	-100%
4	Outpatient Payments	\$997,560	\$0	(\$997,560)	-100%
5	Discharges	393	0	(393)	-100%
6	Patient Days	2,158	0	(2,158)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,085	0	(1,085)	-100%
8	Emergency Department Outpatient Visits	713	0	(713)	-100%
9	Emergency Department Inpatient Admissions	250	0	(250)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$17,885,127	\$0	(\$17,885,127)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,190,749	\$0	(\$6,190,749)	-100%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$82,023,000	\$99,625,478	\$17,602,478	21%
	TOTAL INPATIENT PAYMENTS	\$30,464,729	\$37,739,964	\$7,275,235	24%
	TOTAL OUTPATIENT CHARGES	\$20,223,644	\$28,489,561	\$8,265,917	41%
	TOTAL OUTPATIENT PAYMENTS	\$6,256,075	\$8,741,023	\$2,484,948	40%
	TOTAL DISCHARGES	1,958	2,277	319	16%
	TOTAL PATIENT DAYS	12,351	14,222	1,871	15%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	1,878	6,658	4,780	255%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	1,813	2,301	488	27%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	1,110	1,394	284	26%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$102,246,644	\$128,115,039	\$25,868,395	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$36,720,804	\$46,480,987	\$9,760,183	27%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2009 ACTUAL	(4) FY 2010 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$6,416,648	\$0	(\$6,416,648)	-100%
2	Inpatient Payments	\$1,930,649	\$0	(\$1,930,649)	-100%
3	Outpatient Charges	\$5,451,481	\$0	(\$5,451,481)	-100%
4	Outpatient Payments	\$1,057,016	\$0	(\$1,057,016)	-100%
5	Discharges	503	0	(503)	-100%
6	Patient Days	1,593	0	(1,593)	-100%
7	Outpatient Visits (Excludes ED Visits)	5,572	0	(5,572)	-100%
8	Emergency Department Outpatient Visits	2,045	0	(2,045)	-100%
9	Emergency Department Inpatient Admissions	81	0	(81)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,868,129	\$0	(\$11,868,129)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,987,665	\$0	(\$2,987,665)	-100%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$16,549,469	\$24,454,088	\$7,904,619	48%
2	Inpatient Payments	\$6,224,540	\$9,698,271	\$3,473,731	56%
3	Outpatient Charges	\$15,608,615	\$21,017,953	\$5,409,338	35%
4	Outpatient Payments	\$4,975,169	\$6,380,219	\$1,405,050	28%
5	Discharges	1,342	1,712	370	28%
6	Patient Days	4,200	5,387	1,187	28%
7	Outpatient Visits (Excludes ED Visits)	19,666	27,117	7,451	38%
8	Emergency Department Outpatient Visits	5,362	7,106	1,744	33%
9	Emergency Department Inpatient Admissions	233	302	69	30%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$32,158,084	\$45,472,041	\$13,313,957	41%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$11,199,709	\$16,078,490	\$4,878,781	44%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2009 ACTUAL	(4) FY 2010 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$2,016,191	\$171,070	(\$1,845,121)	-92%
2	Inpatient Payments	\$944,602	\$165,927	(\$778,675)	-82%
3	Outpatient Charges	\$1,106,280	\$38,337	(\$1,067,943)	-97%
4	Outpatient Payments	\$22,967	\$31,110	\$8,143	35%
5	Discharges	195	0	(195)	-100%
6	Patient Days	521	190	(331)	-64%
7	Outpatient Visits (Excludes ED Visits)	1,370	10	(1,360)	-99%
8	Emergency Department Outpatient Visits	536	17	(519)	-97%
9	Emergency Department Inpatient Admissions	21	0	(21)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,122,471	\$209,407	(\$2,913,064)	-93%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$967,569	\$197,037	(\$770,532)	-80%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2009 ACTUAL	(4) FY 2010 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	G. UNITED HEALTHCARE				
1	Inpatient Charges	\$3,937,392	\$6,212,249	\$2,274,857	58%
2	Inpatient Payments	\$1,887,408	\$2,735,907	\$848,499	45%
3	Outpatient Charges	\$3,241,529	\$5,567,336	\$2,325,807	72%
4	Outpatient Payments	\$1,002,350	\$1,551,703	\$549,353	55%
5	Discharges	393	554	161	41%
6	Patient Days	1,186	1,651	465	39%
7	Outpatient Visits (Excludes ED Visits)	3,517	7,807	4,290	122%
8	Emergency Department Outpatient Visits	1,387	2,240	853	61%
9	Emergency Department Inpatient Admissions	61	78	17	28%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,178,921	\$11,779,585	\$4,600,664	64%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,889,758	\$4,287,610	\$1,397,852	48%
	H. AETNA				
1	Inpatient Charges	\$8,681,371	\$14,060,159	\$5,378,788	62%
2	Inpatient Payments	\$3,825,077	\$5,769,767	\$1,944,690	51%
3	Outpatient Charges	\$6,953,936	\$11,567,172	\$4,613,236	66%
4	Outpatient Payments	\$2,439,133	\$3,261,385	\$822,252	34%
5	Discharges	802	1,075	273	34%
6	Patient Days	2,443	3,344	901	37%
7	Outpatient Visits (Excludes ED Visits)	7,129	14,125	6,996	98%
8	Emergency Department Outpatient Visits	3,091	4,229	1,138	37%
9	Emergency Department Inpatient Admissions	117	207	90	77%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,635,307	\$25,627,331	\$9,992,024	64%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,264,210	\$9,031,152	\$2,766,942	44%
	II. TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$37,601,071	\$44,897,566	\$7,296,495	19%
	TOTAL INPATIENT PAYMENTS	\$14,812,276	\$18,369,872	\$3,557,596	24%
	TOTAL OUTPATIENT CHARGES	\$32,361,841	\$38,190,798	\$5,828,957	18%
	TOTAL OUTPATIENT PAYMENTS	\$9,496,635	\$11,224,417	\$1,727,782	18%
	TOTAL DISCHARGES	3,235	3,341	106	3%
	TOTAL PATIENT DAYS	9,943	10,572	629	6%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	37,254	49,059	11,805	32%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	12,421	13,592	1,171	9%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	513	587	74	14%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$69,962,912	\$83,088,364	\$13,125,452	19%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$24,308,911	\$29,594,289	\$5,285,378	22%

**HARTFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2010
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

HARTFORD HEALTH CARE CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2009 ACTUAL	FY 2010 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$82,561,000	\$90,044,000	\$7,483,000	9%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$173,216,000	\$177,076,000	\$3,860,000	2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$6,060,000	\$0	(\$6,060,000)	-100%
7	Inventories of Supplies	\$14,119,000	\$15,055,000	\$936,000	7%
8	Prepaid Expenses	\$21,884,000	\$27,564,000	\$5,680,000	26%
9	Other Current Assets	\$26,861,000	\$29,897,000	\$3,036,000	11%
	Total Current Assets	\$324,701,000	\$339,636,000	\$14,935,000	5%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$124,401,000	\$139,270,000	\$14,869,000	12%
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	\$385,567,000	\$416,021,000	\$30,454,000	8%
	Total Noncurrent Assets Whose Use is Limited:	\$509,968,000	\$555,291,000	\$45,323,000	9%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$48,280,000	\$68,558,000	\$20,278,000	42%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$1,202,351,000	\$1,311,929,000	\$109,578,000	9%
2	Less: Accumulated Depreciation	\$765,929,000	\$825,327,000	\$59,398,000	\$0
	Property, Plant and Equipment, Net	\$436,422,000	\$486,602,000	\$50,180,000	11%
3	Construction in Progress	\$64,533,000	\$45,615,000	(\$18,918,000)	-29%
	Total Net Fixed Assets	\$500,955,000	\$532,217,000	\$31,262,000	6%
	Total Assets	\$1,383,904,000	\$1,495,702,000	\$111,798,000	8%

HARTFORD HEALTH CARE CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2009 ACTUAL</u>	<u>FY 2010 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$61,651,000	\$60,856,000	(\$795,000)	-1%
2	Salaries, Wages and Payroll Taxes	\$58,521,000	\$41,733,000	(\$16,788,000)	-29%
3	Due To Third Party Payers	\$0	\$2,610,000	\$2,610,000	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$25,115,000	\$31,854,000	\$6,739,000	27%
6	Current Portion of Notes Payable	\$15,157,000	\$44,621,000	\$29,464,000	194%
7	Other Current Liabilities	\$33,420,000	\$29,447,000	(\$3,973,000)	-12%
	Total Current Liabilities	\$193,864,000	\$211,121,000	\$17,257,000	9%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$165,631,000	\$168,532,000	\$2,901,000	2%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$165,631,000	\$168,532,000	\$2,901,000	2%
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$363,364,000	\$406,900,000	\$43,536,000	12%
	Total Long Term Liabilities	\$528,995,000	\$575,432,000	\$46,437,000	9%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$350,486,000	\$376,306,000	\$25,820,000	7%
2	Temporarily Restricted Net Assets	\$107,425,000	\$113,708,000	\$6,283,000	6%
3	Permanently Restricted Net Assets	\$203,134,000	\$219,135,000	\$16,001,000	8%
	Total Net Assets	\$661,045,000	\$709,149,000	\$48,104,000	7%
	Total Liabilities and Net Assets	\$1,383,904,000	\$1,495,702,000	\$111,798,000	8%

HARTFORD HEALTH CARE CORPORATION					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2009	FY 2010	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$2,533,111,000	\$2,779,860,000	\$246,749,000	10%
2	Less: Allowances	\$1,376,028,000	\$1,498,919,000	\$122,891,000	9%
3	Less: Charity Care	\$38,297,000	\$38,556,000	\$259,000	1%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$1,118,786,000	\$1,242,385,000	\$123,599,000	11%
5	Other Operating Revenue	\$162,215,000	\$174,247,000	\$12,032,000	7%
6	Net Assets Released from Restrictions	\$10,942,000	\$9,859,000	(\$1,083,000)	-10%
	Total Operating Revenue	\$1,291,943,000	\$1,426,491,000	\$134,548,000	10%
B. Operating Expenses:					
1	Salaries and Wages	\$593,414,000	\$630,357,000	\$36,943,000	6%
2	Fringe Benefits	\$135,313,000	\$166,567,000	\$31,254,000	23%
3	Physicians Fees	\$39,806,000	\$43,233,000	\$3,427,000	9%
4	Supplies and Drugs	\$154,679,000	\$167,158,000	\$12,479,000	8%
5	Depreciation and Amortization	\$60,718,000	\$64,992,000	\$4,274,000	7%
6	Bad Debts	\$46,405,000	\$64,021,000	\$17,616,000	38%
7	Interest	\$4,609,000	\$4,462,000	(\$147,000)	-3%
8	Malpractice	\$21,253,000	\$21,810,242	\$557,242	3%
9	Other Operating Expenses	\$225,290,000	\$245,748,758	\$20,458,758	9%
	Total Operating Expenses	\$1,281,487,000	\$1,408,349,000	\$126,862,000	10%
	Income/(Loss) From Operations	\$10,456,000	\$18,142,000	\$7,686,000	74%
C. Non-Operating Revenue:					
1	Income from Investments	(\$8,861,000)	\$5,713,000	\$14,574,000	-164%
2	Gifts, Contributions and Donations	\$1,004,000	\$1,274,000	\$270,000	27%
3	Other Non-Operating Gains/(Losses)	(\$11,525,000)	(\$427,000)	\$11,098,000	-96%
	Total Non-Operating Revenue	(\$19,382,000)	\$6,560,000	\$25,942,000	-134%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$8,926,000)	\$24,702,000	\$33,628,000	-377%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$2,052,000	\$25,285,000	\$23,233,000	1132%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$2,052,000	\$25,285,000	\$23,233,000	1132%
	Excess/(Deficiency) of Revenue Over Expenses	(\$6,874,000)	\$49,987,000	\$56,861,000	-827%

HARTFORD HEALTH CARE CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$1,026,069,000	\$1,118,786,000	\$1,242,385,000
2	Other Operating Revenue	185,202,000	173,157,000	184,106,000
3	Total Operating Revenue	\$1,211,271,000	\$1,291,943,000	\$1,426,491,000
4	Total Operating Expenses	1,212,021,000	1,281,487,000	1,408,349,000
5	Income/(Loss) From Operations	(\$750,000)	\$10,456,000	\$18,142,000
6	Total Non-Operating Revenue	(48,648,000)	(17,330,000)	31,845,000
7	Excess/(Deficiency) of Revenue Over Expenses	(\$49,398,000)	(\$6,874,000)	\$49,987,000
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	-0.06%	0.82%	1.24%
2	Parent Corporation Non-Operating Margin	-4.18%	-1.36%	2.18%
3	Parent Corporation Total Margin	-4.25%	-0.54%	3.43%
4	Income/(Loss) From Operations	(\$750,000)	\$10,456,000	\$18,142,000
5	Total Operating Revenue	\$1,211,271,000	\$1,291,943,000	\$1,426,491,000
6	Total Non-Operating Revenue	(\$48,648,000)	(\$17,330,000)	\$31,845,000
7	Total Revenue	\$1,162,623,000	\$1,274,613,000	\$1,458,336,000
8	Excess/(Deficiency) of Revenue Over Expenses	(\$49,398,000)	(\$6,874,000)	\$49,987,000
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$640,110,000	\$350,486,000	\$376,306,000
2	Parent Corporation Total Net Assets	\$972,328,000	\$661,045,000	\$709,149,000
3	Parent Corporation Change in Total Net Assets	(\$250,618,000)	(\$311,283,000)	\$48,104,000
4	Parent Corporation Change in Total Net Assets %	79.5%	-32.0%	7.3%

HARTFORD HEALTH CARE CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
D. Liquidity Measures Summary				
1	Current Ratio	1.78	1.67	1.61
2	Total Current Assets	\$315,898,000	\$324,701,000	\$339,636,000
3	Total Current Liabilities	\$177,911,000	\$193,864,000	\$211,121,000
4	Days Cash on Hand	25	25	24
5	Cash and Cash Equivalents	\$80,257,000	\$82,561,000	\$90,044,000
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$80,257,000	\$82,561,000	\$90,044,000
8	Total Operating Expenses	\$1,212,021,000	\$1,281,487,000	\$1,408,349,000
9	Depreciation Expense	\$59,909,000	\$60,718,000	\$64,992,000
10	Operating Expenses less Depreciation Expense	\$1,152,112,000	\$1,220,769,000	\$1,343,357,000
11	Days Revenue in Patient Accounts Receivable	62	58	51
12	Net Patient Accounts Receivable	\$ 163,557,000	\$ 173,216,000	\$ 177,076,000
13	Due From Third Party Payers	\$11,484,000	\$6,060,000	\$0
14	Due To Third Party Payers	\$0	\$0	\$2,610,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 175,041,000	\$ 179,276,000	\$ 174,466,000
16	Total Net Patient Revenue	\$1,026,069,000	\$1,118,786,000	\$1,242,385,000
17	Average Payment Period	56	58	57
18	Total Current Liabilities	\$177,911,000	\$193,864,000	\$211,121,000
19	Total Operating Expenses	\$1,212,021,000	\$1,281,487,000	\$1,408,349,000
20	Depreciation Expense	\$59,909,000	\$60,718,000	\$64,992,000
21	Total Operating Expenses less Depreciation Expense	\$1,152,112,000	\$1,220,769,000	\$1,343,357,000

HARTFORD HEALTH CARE CORPORATION				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2008	FY 2009	FY 2010
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	66.7	47.8	47.4
2	Total Net Assets	\$972,328,000	\$661,045,000	\$709,149,000
3	Total Assets	\$1,456,832,000	\$1,383,904,000	\$1,495,702,000
4	<u>Cash Flow to Total Debt Ratio</u>	3.0	15.0	30.3
5	Excess/(Deficiency) of Revenues Over Expenses	(\$49,398,000)	(\$6,874,000)	\$49,987,000
6	Depreciation Expense	\$59,909,000	\$60,718,000	\$64,992,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$10,511,000	\$53,844,000	\$114,979,000
8	Total Current Liabilities	\$177,911,000	\$193,864,000	\$211,121,000
9	Total Long Term Debt	\$169,436,000	\$165,631,000	\$168,532,000
10	Total Current Liabilities and Total Long Term Debt	\$347,347,000	\$359,495,000	\$379,653,000
11	<u>Long Term Debt to Capitalization Ratio</u>	14.8	20.0	19.2
12	Total Long Term Debt	\$169,436,000	\$165,631,000	\$168,532,000
13	Total Net Assets	\$972,328,000	\$661,045,000	\$709,149,000
14	Total Long Term Debt and Total Net Assets	\$1,141,764,000	\$826,676,000	\$877,681,000

HARTFORD HOSPITAL						
TWELVE MONTHS ACTUAL FILING						
FISCAL YEAR 2010						
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	138,984	405	476	94.0%	80.0%
2	ICU/CCU (Excludes Neonatal ICU)	23,530	65	70	99.2%	92.1%
3	Psychiatric: Ages 0 to 17	8,218	23	29	97.9%	77.6%
4	Psychiatric: Ages 18+	28,091	78	94	98.7%	81.9%
	TOTAL PSYCHIATRIC	36,309	101	123	98.5%	80.9%
5	Rehabilitation	0	0	0	0.0%	0.0%
6	Maternity	11,512	32	43	98.6%	73.3%
7	Newborn	9,779	27	48	99.2%	55.8%
8	Neonatal ICU	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0.0%	0.0%
10	Other	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	210,335	603	712	95.6%	80.9%
	TOTAL INPATIENT BED UTILIZATION	220,114	630	760	95.7%	79.3%
	TOTAL INPATIENT REPORTED YEAR	220,114	630	760	95.7%	79.3%
	TOTAL INPATIENT PRIOR YEAR	215,958	595	752	99.4%	78.7%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	4,156	35	8	-3.7%	0.7%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	2%	6%	1%	-4%	1%
	Total Licensed Beds and Bassinets	867				
(A) This number may not exceed the number of available beds for each department or in total.						

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	27,915	27,233	-682	-2%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,617	3,748	131	4%
3	Emergency Department Scans	17,787	18,431	644	4%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	49,319	49,412	93	0%
B. MRI Scans (A)					
1	Inpatient Scans	3,601	3,380	-221	-6%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,695	4,501	-194	-4%
3	Emergency Department Scans	460	441	-19	-4%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	8,756	8,322	-434	-5%
C. PET Scans (A)					
1	Inpatient Scans	202	317	115	57%
2	Outpatient Scans (Excluding Emergency Department Scans)	167	427	260	156%
3	Emergency Department Scans	19	48	29	153%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	388	792	404	104%
D. PET/CT Scans (A)					
1	Inpatient Scans	296	253	-43	-15%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,207	969	-238	-20%
3	Emergency Department Scans	134	108	-26	-19%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	1,637	1,330	-307	-19%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	845	775	-70	-8%
2	Outpatient Procedures	23,923	25,567	1,644	7%
	Total Linear Accelerator Procedures	24,768	26,342	1,574	6%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	1,837	2,040	203	11%
2	Outpatient Procedures	1,131	1,252	121	11%
	Total Cardiac Catheterization Procedures	2,968	3,292	324	11%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	1,027	1,230	203	20%
2	Elective Procedures	5	8	3	60%
	Total Cardiac Angioplasty Procedures	1,032	1,238	206	20%
H. Electrophysiology Studies					
1	Inpatient Studies	295	226	-69	-23%
2	Outpatient Studies	309	394	85	28%
	Total Electrophysiology Studies	604	620	16	3%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	12,538	12,539	1	0%
2	Outpatient Surgical Procedures	13,566	13,903	337	2%
	Total Surgical Procedures	26,104	26,442	338	1%
J. Endoscopy Procedures					

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	3,059	2,897	-162	-5%
2	Outpatient Endoscopy Procedures	10,855	11,252	397	4%
	Total Endoscopy Procedures	13,914	14,149	235	2%
	K. Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	16,393	16,735	342	2%
2	Emergency Room Visits: Treated and Discharged	73,715	78,670	4,955	7%
	Total Emergency Room Visits	90,108	95,405	5,297	6%
	L. Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	15,712	14,699	-1,013	-6%
3	Psychiatric Clinic Visits	13,783	11,730	-2,053	-15%
4	Medical Clinic Visits	13,329	12,777	-552	-4%
5	Specialty Clinic Visits	44,612	45,539	927	2%
	Total Hospital Clinic Visits	87,436	84,745	-2,691	-3%
	M. Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	6,396	113,900	107,504	1681%
2	Cardiology	12,086	12,294	208	2%
3	Chemotherapy	2,707	1,299	-1,408	-52%
4	Gastroenterology	11,633	10,229	-1,404	-12%
5	Other Outpatient Visits	35,259	37,997	2,738	8%
	Total Other Hospital Outpatient Visits	68,081	175,719	107,638	158%
	N. Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	1,406.4	1,499.0	92.6	7%
2	Total Physician FTEs	209.4	210.0	0.6	0%
3	Total Non-Nursing and Non-Physician FTEs	3,780.5	3,939.0	158.5	4%
	Total Hospital Full Time Equivalent Employees	5,396.3	5,648.0	251.7	5%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Hartford Hospital	11,238	11,380	142	1%
2	West Hartford Surgery Center	2,328	2,523	195	8%
	Total Outpatient Surgical Procedures(A)	13,566	13,903	337	2%
B. Outpatient Endoscopy Procedures					
1	Hartford Hospital	9,770	9,958	188	2%
2	West Hartford Surgery Center	1,085	1,294	209	19%
	Total Outpatient Endoscopy Procedures(B)	10,855	11,252	397	4%
C. Outpatient Hospital Emergency Room Visits					
1	Hartford Hospital	73,715	78,670	4,955	7%
	Total Outpatient Hospital Emergency Room Visits(C)	73,715	78,670	4,955	7%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$583,580,333	\$655,024,798	\$71,444,465	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$228,690,205	\$260,942,379	\$32,252,174	14%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.19%	39.84%	0.65%	2%
4	DISCHARGES	15,533	15,819	286	2%
5	CASE MIX INDEX (CMI)	1.65910	1.81730	0.15820	10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	25,770.80030	28,747.86870	2,977.06840	12%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,874.00	\$9,076.93	\$202.92	2%
8	PATIENT DAYS	96,766	101,294	4,528	5%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,363.33	\$2,576.09	\$212.76	9%
10	AVERAGE LENGTH OF STAY	6.2	6.4	0.2	3%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$165,350,528	\$186,830,085	\$21,479,557	13%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$54,345,423	\$61,060,113	\$6,714,690	12%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.87%	32.68%	-0.18%	-1%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	28.33%	28.52%	0.19%	1%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,401.09031	4,511.98966	110.89934	3%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,348.17	\$13,532.86	\$1,184.68	10%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$748,930,861	\$841,854,883	\$92,924,022	12%
18	TOTAL ACCRUED PAYMENTS	\$283,035,628	\$322,002,492	\$38,966,864	14%
19	TOTAL ALLOWANCES	\$465,895,233	\$519,852,391	\$53,957,158	12%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$429,192,423	\$439,060,292	\$9,867,869	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$208,825,893	\$218,469,522	\$9,643,629	5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	48.66%	49.76%	1.10%	2%
4	DISCHARGES	16,639	16,050	(589)	-4%
5	CASE MIX INDEX (CMI)	1.33780	1.37220	0.03440	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	22,259,65420	22,023,81000	(235,84420)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,381.36	\$9,919.70	\$538.33	6%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$507.36)	(\$842.77)	(\$335.41)	66%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$11,293,615)	(\$18,560,950)	(\$7,267,335)	64%
10	PATIENT DAYS	70,885	68,370	(2,515)	-4%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,945.98	\$3,195.40	\$249.42	8%
12	AVERAGE LENGTH OF STAY	4.3	4.3	(0.0)	0%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$234,394,020	\$280,639,170	\$46,245,150	20%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$110,557,355	\$132,592,080	\$22,034,725	20%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	47.17%	47.25%	0.08%	0%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	54.61%	63.92%	9.31%	17%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	9,087,02458	10,258,86139	1,171,83681	13%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,166.51	\$12,924.64	\$758.13	6%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	\$181.66	\$608.22	\$426.55	235%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,650,793	\$6,239,629	\$4,588,836	278%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$663,586,443	\$719,699,462	\$56,113,019	8%
22	TOTAL ACCRUED PAYMENTS	\$319,383,248	\$351,061,602	\$31,678,354	10%
23	TOTAL ALLOWANCES	\$344,203,195	\$368,637,860	\$24,434,665	7%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$9,642,822)	(\$12,321,321)	(\$2,678,499)	28%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$599,039,787	\$651,518,348	\$52,478,561	9%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$302,671,779	\$348,212,407	\$45,540,628	15%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$296,368,008	\$303,305,941	\$6,937,933	2%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.47%	46.55%	-2.92%	

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
C. UNINSURED					
UNINSURED INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$19,069,035	\$19,801,383	\$732,348	4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,264,171	\$1,057,043	(\$207,128)	-16%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	6.63%	5.34%	-1.29%	-19%
4	DISCHARGES	694	690	(4)	-1%
5	CASE MIX INDEX (CMI)	1.31090	1.35220	0.04130	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	909.76460	933.01800	23.25340	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,389.56	\$1,132.93	(\$256.63)	-18%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$7,991.80	\$8,786.77	\$794.96	10%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$7,484.45	\$7,944.00	\$459.55	6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,809,084	\$7,411,896	\$602,811	9%
11	PATIENT DAYS	3,053	2,939	(114)	-4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$414.08	\$359.66	(\$54.41)	-13%
13	AVERAGE LENGTH OF STAY	4.4	4.3	(0.1)	-3%
UNINSURED OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$26,654,052	\$27,329,396	\$675,344	3%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,767,017	\$1,458,906	(\$308,111)	-17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	6.63%	5.34%	-1.29%	-19%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	139.78%	138.02%	-1.76%	-1%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	970.04972	952.32152	(17.72820)	-2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,821.57	\$1,531.95	(\$289.63)	-16%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$10,344.93	\$11,392.69	\$1,047.76	10%
21	MEDICARE - UNINSURED OP PMT / OPED	\$10,526.60	\$12,000.91	\$1,474.31	14%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,211,324	\$11,428,725	\$1,217,401	12%
UNINSURED TOTALS (INPATIENT AND OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$45,723,087	\$47,130,779	\$1,407,692	3%
24	TOTAL ACCRUED PAYMENTS	\$3,031,188	\$2,515,949	(\$515,239)	-17%
25	TOTAL ALLOWANCES	\$42,691,899	\$44,614,830	\$1,922,931	5%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$17,020,409	\$18,840,621	\$1,820,212	11%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$151,645,210	\$197,558,048	\$45,912,838	30%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$50,841,503	\$66,489,002	\$15,647,499	31%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	33.53%	33.66%	0.13%	0%
4	DISCHARGES	6,942	7,923	981	14%
5	CASE MIX INDEX (CMI)	1.07920	1.10660	0.02740	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,491.80640	8,767.59180	1,275.78540	17%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,786.28	\$7,583.50	\$797.22	12%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$2,595.08	\$2,336.20	(\$258.88)	-10%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,087.72	\$1,493.43	(\$594.29)	-28%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$15,640,823	\$13,093,811	(\$2,547,012)	-16%
11	PATIENT DAYS	36,571	42,046	5,475	15%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,390.21	\$1,581.34	\$191.13	14%
13	AVERAGE LENGTH OF STAY	5.3	5.3	0.0	1%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$71,445,231	\$96,206,878	\$24,761,647	35%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$20,966,500	\$23,438,520	\$2,472,020	12%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.35%	24.36%	-4.98%	-17%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	47.11%	48.70%	1.58%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,270.61299	3,858.34494	587.73195	18%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,410.57	\$6,074.76	(\$335.81)	-5%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$5,755.94	\$6,849.88	\$1,093.94	19%
21	MEDICARE - MEDICAID OP PMT / OPED	\$5,937.60	\$7,458.10	\$1,520.50	26%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,419,594	\$28,775,912	\$9,356,318	48%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$223,090,441	\$293,764,926	\$70,674,485	32%
24	TOTAL ACCRUED PAYMENTS	\$71,808,003	\$89,927,522	\$18,119,519	25%
25	TOTAL ALLOWANCES	\$151,282,438	\$203,837,404	\$52,554,966	35%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$35,060,417	\$41,869,723	\$6,809,307	19%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$49,341,390	\$27,257,124	(\$22,084,266)	-45%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$7,516,434	\$7,279,004	(\$237,430)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	15.23%	26.70%	11.47%	75%
4	DISCHARGES	1,888	1,307	(581)	-31%
5	CASE MIX INDEX (CMI)	1.21340	1.24290	0.02950	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,290.89920	1,624.47030	(666.42890)	-29%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,281.00	\$4,480.85	\$1,199.85	37%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$6,100.37	\$5,438.85	(\$661.52)	-11%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$5,593.01	\$4,596.08	(\$996.93)	-18%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,813,016	\$7,466,198	(\$5,346,818)	-42%
11	PATIENT DAYS	10,525	7,453	(3,072)	-29%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$714.15	\$976.65	\$262.50	37%
13	AVERAGE LENGTH OF STAY	5.6	5.7	0.1	2%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$21,216,679	\$12,034,218	(\$9,182,461)	-43%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$4,336,291	\$2,632,027	(\$1,704,264)	-39%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.44%	21.87%	1.43%	7%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	43.00%	44.15%	1.15%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	811.83546	577.04998	(234.78548)	-29%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,341.34	\$4,561.18	(\$780.17)	-15%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$6,825.17	\$8,363.46	\$1,538.30	23%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$7,006.83	\$8,971.68	\$1,964.85	28%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,688,393	\$5,177,108	(\$511,285)	-9%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$70,558,069	\$39,291,342	(\$31,266,727)	-44%
24	TOTAL ACCRUED PAYMENTS	\$11,852,725	\$9,911,031	(\$1,941,694)	-16%
25	TOTAL ALLOWANCES	\$58,705,344	\$29,380,311	(\$29,325,033)	-50%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$18,501,410	\$12,643,307	(\$5,858,103)	-32%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$200,986,600	\$224,815,172	\$23,828,572	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$58,357,937	\$73,768,006	\$15,410,069	26%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.04%	32.81%	3.78%	13%
4	DISCHARGES	8,830	9,230	400	5%
5	CASE MIX INDEX (CMI)	1.10789	1.12590	0.01801	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	9,782.70560	10,392.06210	609.35650	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,965.42	\$7,098.50	\$1,133.08	19%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,415.94	\$2,821.20	(\$594.74)	-17%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,908.59	\$1,978.43	(\$930.15)	-32%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$28,453,839	\$20,560,010	(\$7,893,830)	-28%
11	PATIENT DAYS	47,096	49,499	2,403	5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,239.13	\$1,490.29	\$251.17	20%
13	AVERAGE LENGTH OF STAY	5.3	5.4	0.0	1%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$92,661,910	\$108,241,096	\$15,579,186	17%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$25,302,791	\$26,070,547	\$767,756	3%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.31%	24.09%	-3.22%	-12%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	46.10%	48.15%	2.04%	4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,082.44845	4,435.39492	352.94647	9%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,197.95	\$5,877.84	(\$320.10)	-5%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$5,968.56	\$7,046.80	\$1,078.24	18%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,150.23	\$7,655.02	\$1,504.79	24%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$25,107,987	\$33,953,020	\$8,845,033	35%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$293,648,510	\$333,056,268	\$39,407,758	13%
24	TOTAL ACCRUED PAYMENTS	\$83,660,728	\$99,838,553	\$16,177,825	19%
25	TOTAL ALLOWANCES	\$209,987,782	\$233,217,715	\$23,229,933	11%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$6,679,660	\$4,791,123	(\$1,888,537)	-28%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,922,241	\$897,963	(\$1,024,278)	-53%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	28.78%	18.74%	-10.04%	-35%
4	DISCHARGES	186	166	(20)	-11%
5	CASE MIX INDEX (CMI)	1.24000	1.06780	(0.17220)	-14%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	230.64000	177.25480	(53.38520)	-23%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,334.38	\$5,065.94	(\$3,268.43)	-39%
8	PATIENT DAYS	1,211	951	(260)	-21%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,587.32	\$944.23	(\$643.09)	-41%
10	AVERAGE LENGTH OF STAY	6.5	5.7	(0.8)	-12%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,586,174	\$2,317,387	\$731,213	46%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$517,232	\$1,091,920	\$574,688	111%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$8,265,834	\$7,108,510	(\$1,157,324)	-14%
14	TOTAL ACCRUED PAYMENTS	\$2,439,473	\$1,989,883	(\$449,590)	-18%
15	TOTAL ALLOWANCES	\$5,826,361	\$5,118,627	(\$707,734)	-12%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$122,550,875	\$129,170,425	\$6,619,550	5%
2	TOTAL OPERATING EXPENSES	\$824,454,105	\$920,001,155	\$95,547,050	12%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$4,364,687	\$3,946,217	(\$418,470)	-10%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$23,984,656	\$27,507,152	\$3,522,496	15%
5	BAD DEBTS (CHARGES)	\$23,850,531	\$37,824,767	\$13,974,236	59%
6	UNCOMPENSATED CARE (CHARGES)	\$47,835,187	\$65,331,919	\$17,496,732	37%
7	COST OF UNCOMPENSATED CARE	\$19,043,979	\$26,329,428	\$7,285,449	38%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$293,648,510	\$333,056,268	\$39,407,758	13%
9	TOTAL ACCRUED PAYMENTS	\$83,660,728	\$99,838,553	\$16,177,825	19%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$116,906,329	\$134,225,064	\$17,318,735	15%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$33,245,601	\$34,386,511	\$1,140,910	3%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$1,220,439,016	\$1,323,691,385	\$103,252,369	8%
2	TOTAL INPATIENT PAYMENTS	\$497,796,276	\$554,077,870	\$56,281,594	11%
3	TOTAL INPATIENT PAYMENTS / CHARGES	40.79%	41.86%	1.07%	3%
4	TOTAL DISCHARGES	41,188	41,265	77	0%
5	TOTAL CASE MIX INDEX	1.40924	1.48651	0.07727	5%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	58,043.80010	61,340.99560	3,297.19550	6%
7	TOTAL OUTPATIENT CHARGES	\$493,992,632	\$578,027,738	\$84,035,106	17%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	40.48%	43.67%	3.19%	8%
9	TOTAL OUTPATIENT PAYMENTS	\$190,722,801	\$220,814,660	\$30,091,859	16%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	38.61%	38.20%	-0.41%	-1%
11	TOTAL CHARGES	\$1,714,431,648	\$1,901,719,123	\$187,287,475	11%
12	TOTAL PAYMENTS	\$688,519,077	\$774,892,530	\$86,373,453	13%
13	TOTAL PAYMENTS / TOTAL CHARGES	40.16%	40.75%	0.59%	1%
14	PATIENT DAYS	215,958	220,114	4,156	2%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$791,246,593	\$884,631,093	\$93,384,500	12%
2	INPATIENT PAYMENTS	\$288,970,383	\$335,608,348	\$46,637,965	16%
3	GOVT. INPATIENT PAYMENTS / CHARGES	36.52%	37.94%	1.42%	4%
4	DISCHARGES	24,549	25,215	666	3%
5	CASE MIX INDEX	1.45766	1.55928	0.10162	7%
6	CASE MIX ADJUSTED DISCHARGES	35,784.14590	39,317.18560	3,533.03970	10%
7	OUTPATIENT CHARGES	\$259,598,612	\$297,388,568	\$37,789,956	15%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	32.81%	33.62%	0.81%	2%
9	OUTPATIENT PAYMENTS	\$80,165,446	\$88,222,580	\$8,057,134	10%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.88%	29.67%	-1.21%	-4%
11	TOTAL CHARGES	\$1,050,845,205	\$1,182,019,661	\$131,174,456	12%
12	TOTAL PAYMENTS	\$369,135,829	\$423,830,928	\$54,695,099	15%
13	TOTAL PAYMENTS / CHARGES	35.13%	35.86%	0.73%	2%
14	PATIENT DAYS	145,073	151,744	6,671	5%
15	TOTAL GOVERNMENT DEDUCTIONS	\$681,709,376	\$758,188,733	\$76,479,357	11%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	6.2	6.4	0.2	3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.3	4.3	(0.0)	0%
3	UNINSURED	4.4	4.3	(0.1)	-3%
4	MEDICAID	5.3	5.3	0.0	1%
5	OTHER MEDICAL ASSISTANCE	5.6	5.7	0.1	2%
6	CHAMPUS / TRICARE	6.5	5.7	(0.8)	-12%
7	TOTAL AVERAGE LENGTH OF STAY	5.2	5.3	0.1	2%

HARTFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2010					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2009	FY 2010	DIFFERENCE	DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,714,431,648	\$1,901,719,123	\$187,287,475	11%
2	TOTAL GOVERNMENT DEDUCTIONS	\$681,709,376	\$758,188,733	\$76,479,357	11%
3	UNCOMPENSATED CARE	\$47,835,187	\$65,331,919	\$17,496,732	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$296,368,008	\$303,305,941	\$6,937,933	2%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,340,167	\$12,426,593	\$2,086,426	20%
6	TOTAL ADJUSTMENTS	\$1,036,252,738	\$1,139,253,186	\$103,000,448	10%
7	TOTAL ACCRUED PAYMENTS	\$678,178,910	\$762,465,937	\$84,287,027	12%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$4,364,687	\$3,946,217	(\$418,470)	-10%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMTS.	\$682,543,597	\$766,412,154	\$83,868,557	12%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3981165407	0.4030101737	0.0048936329	1%
11	COST OF UNCOMPENSATED CARE	\$19,043,979	\$26,329,428	\$7,285,449	38%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$33,245,601	\$34,386,511	\$1,140,910	3%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$52,289,580	\$60,715,939	\$8,426,359	16%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$19,419,594	\$28,775,912	\$9,356,318	48%
2	OTHER MEDICAL ASSISTANCE	\$18,501,410	\$12,643,307	(\$5,858,103)	-32%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$17,020,409	\$18,840,621	\$1,820,212	11%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$54,941,412	\$60,259,840	\$5,318,427	10%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$19,836,452	\$22,538,851	\$2,702,399	13.62%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$14,296,570	\$22,154,628	\$7,858,058	54.96%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$707,180,334	\$800,993,375	\$93,813,041	13.27%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,714,431,648	\$1,901,719,123	\$187,287,475	10.92%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$6,257,785	\$2,296,537	(\$3,961,248)	-63.30%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$54,092,972	\$67,628,456	\$13,535,484	25.02%

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$429,192,423	\$439,060,292	\$9,867,869
2	MEDICARE	\$583,580,333	655,024,798	\$71,444,465
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$200,986,600	224,815,172	\$23,828,572
4	MEDICAID	\$151,645,210	197,558,048	\$45,912,838
5	OTHER MEDICAL ASSISTANCE	\$49,341,390	27,257,124	(\$22,084,266)
6	CHAMPUS / TRICARE	\$6,679,660	4,791,123	(\$1,888,537)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$19,069,035	19,801,383	\$732,348
	TOTAL INPATIENT GOVERNMENT CHARGES	\$791,246,593	\$884,631,093	\$93,384,500
	TOTAL INPATIENT CHARGES	\$1,220,439,016	\$1,323,691,385	\$103,252,369
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$234,394,020	\$280,639,170	\$46,245,150
2	MEDICARE	\$165,350,528	186,830,085	\$21,479,557
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$92,661,910	108,241,096	\$15,579,186
4	MEDICAID	\$71,445,231	96,206,878	\$24,761,647
5	OTHER MEDICAL ASSISTANCE	\$21,216,679	12,034,218	(\$9,182,461)
6	CHAMPUS / TRICARE	\$1,586,174	2,317,387	\$731,213
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$26,654,052	27,329,396	\$675,344
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$259,598,612	\$297,388,568	\$37,789,956
	TOTAL OUTPATIENT CHARGES	\$493,992,632	\$578,027,738	\$84,035,106
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$663,586,443	\$719,699,462	\$56,113,019
2	TOTAL MEDICARE	\$748,930,861	\$841,854,883	\$92,924,022
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$293,648,510	\$333,056,268	\$39,407,758
4	TOTAL MEDICAID	\$223,090,441	\$293,764,926	\$70,674,485
5	TOTAL OTHER MEDICAL ASSISTANCE	\$70,558,069	\$39,291,342	(\$31,266,727)
6	TOTAL CHAMPUS / TRICARE	\$8,265,834	\$7,108,510	(\$1,157,324)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$45,723,087	\$47,130,779	\$1,407,692
	TOTAL GOVERNMENT CHARGES	\$1,050,845,205	\$1,182,019,661	\$131,174,456
	TOTAL CHARGES	\$1,714,431,648	\$1,901,719,123	\$187,287,475
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$208,825,893	\$218,469,522	\$9,643,629
2	MEDICARE	\$228,690,205	260,942,379	\$32,252,174
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$58,357,937	73,768,006	\$15,410,069
4	MEDICAID	\$50,841,503	66,489,002	\$15,647,499
5	OTHER MEDICAL ASSISTANCE	\$7,516,434	7,279,004	(\$237,430)
6	CHAMPUS / TRICARE	\$1,922,241	897,963	(\$1,024,278)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,264,171	1,057,043	(\$207,128)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$288,970,383	\$335,608,348	\$46,637,965
	TOTAL INPATIENT PAYMENTS	\$497,796,276	\$554,077,870	\$56,281,594
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$110,557,355	\$132,592,080	\$22,034,725
2	MEDICARE	\$54,345,423	61,060,113	\$6,714,690
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$25,302,791	26,070,547	\$767,756
4	MEDICAID	\$20,966,500	23,438,520	\$2,472,020
5	OTHER MEDICAL ASSISTANCE	\$4,336,291	2,632,027	(\$1,704,264)
6	CHAMPUS / TRICARE	\$517,232	1,091,920	\$574,688
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,767,017	1,458,906	(\$308,111)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$80,165,446	\$88,222,580	\$8,057,134
	TOTAL OUTPATIENT PAYMENTS	\$190,722,801	\$220,814,660	\$30,091,859
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$319,383,248	\$351,061,602	\$31,678,354
2	TOTAL MEDICARE	\$283,035,628	\$322,002,492	\$38,966,864
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$83,660,728	\$99,838,553	\$16,177,825
4	TOTAL MEDICAID	\$71,808,003	\$89,927,522	\$18,119,519
5	TOTAL OTHER MEDICAL ASSISTANCE	\$11,852,725	\$9,911,031	(\$1,941,694)
6	TOTAL CHAMPUS / TRICARE	\$2,439,473	\$1,989,883	(\$449,590)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,031,188	\$2,515,949	(\$515,239)
	TOTAL GOVERNMENT PAYMENTS	\$369,135,829	\$423,830,928	\$54,695,099
	TOTAL PAYMENTS	\$688,519,077	\$774,892,530	\$86,373,453

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.03%	23.09%	-1.95%
2	MEDICARE	34.04%	34.44%	0.40%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11.72%	11.82%	0.10%
4	MEDICAID	8.85%	10.39%	1.54%
5	OTHER MEDICAL ASSISTANCE	2.88%	1.43%	-1.44%
6	CHAMPUS / TRICARE	0.39%	0.25%	-0.14%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.11%	1.04%	-0.07%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	46.15%	46.52%	0.37%
	TOTAL INPATIENT PAYER MIX	71.19%	69.60%	-1.58%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.67%	14.76%	1.09%
2	MEDICARE	9.64%	9.82%	0.18%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.40%	5.69%	0.29%
4	MEDICAID	4.17%	5.06%	0.89%
5	OTHER MEDICAL ASSISTANCE	1.24%	0.63%	-0.60%
6	CHAMPUS / TRICARE	0.09%	0.12%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.55%	1.44%	-0.12%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	15.14%	15.64%	0.50%
	TOTAL OUTPATIENT PAYER MIX	28.81%	30.40%	1.58%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.33%	28.19%	-2.14%
2	MEDICARE	33.21%	33.67%	0.46%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.48%	9.52%	1.04%
4	MEDICAID	7.38%	8.58%	1.20%
5	OTHER MEDICAL ASSISTANCE	1.09%	0.94%	-0.15%
6	CHAMPUS / TRICARE	0.28%	0.12%	-0.16%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.18%	0.14%	-0.05%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	41.97%	43.31%	1.34%
	TOTAL INPATIENT PAYER MIX	72.30%	71.50%	-0.80%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16.06%	17.11%	1.05%
2	MEDICARE	7.89%	7.88%	-0.01%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.67%	3.36%	-0.31%
4	MEDICAID	3.05%	3.02%	-0.02%
5	OTHER MEDICAL ASSISTANCE	0.63%	0.34%	-0.29%
6	CHAMPUS / TRICARE	0.08%	0.14%	0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.26%	0.19%	-0.07%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	11.64%	11.39%	-0.26%
	TOTAL OUTPATIENT PAYER MIX	27.70%	28.50%	0.80%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE DESCRIPTION		ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16,639	16,050	(589)
2	MEDICARE	15,533	15,819	286
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,830	9,230	400
4	MEDICAID	6,942	7,923	981
5	OTHER MEDICAL ASSISTANCE	1,888	1,307	(581)
6	CHAMPUS / TRICARE	186	166	(20)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	694	690	(4)
	TOTAL GOVERNMENT DISCHARGES	24,549	25,215	666
	TOTAL DISCHARGES	41,188	41,265	77
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	70,885	68,370	(2,515)
2	MEDICARE	96,766	101,294	4,528
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	47,096	49,499	2,403
4	MEDICAID	36,571	42,046	5,475
5	OTHER MEDICAL ASSISTANCE	10,525	7,453	(3,072)
6	CHAMPUS / TRICARE	1,211	951	(260)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,053	2,939	(114)
	TOTAL GOVERNMENT PATIENT DAYS	145,073	151,744	6,671
	TOTAL PATIENT DAYS	215,958	220,114	4,156
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.3	4.3	(0.0)
2	MEDICARE	6.2	6.4	0.2
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.3	5.4	0.0
4	MEDICAID	5.3	5.3	0.0
5	OTHER MEDICAL ASSISTANCE	5.6	5.7	0.1
6	CHAMPUS / TRICARE	6.5	5.7	(0.8)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.4	4.3	(0.1)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.9	6.0	0.1
	TOTAL AVERAGE LENGTH OF STAY	5.2	5.3	0.1
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.33780	1.37220	0.03440
2	MEDICARE	1.65910	1.81730	0.15820
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.10789	1.12590	0.01801
4	MEDICAID	1.07920	1.10660	0.02740
5	OTHER MEDICAL ASSISTANCE	1.21340	1.24290	0.02950
6	CHAMPUS / TRICARE	1.24000	1.06780	(0.17220)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.31090	1.35220	0.04130
	TOTAL GOVERNMENT CASE MIX INDEX	1.45766	1.55928	0.10162
	TOTAL CASE MIX INDEX	1.40924	1.48651	0.07727
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$599,039,787	\$651,518,348	\$52,478,561
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$302,671,779	\$348,212,407	\$45,540,628
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$296,368,008	\$303,305,941	\$6,937,933
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.47%	46.55%	-2.92%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$19,836,452	\$22,538,851	\$2,702,399
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,340,167	\$12,426,593	\$2,086,426
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$4,364,687	\$3,946,217	(\$418,470)
8	CHARITY CARE	\$23,984,656	\$27,507,152	\$3,522,496
9	BAD DEBTS	\$23,850,531	\$37,824,767	\$13,974,236
10	TOTAL UNCOMPENSATED CARE	\$47,835,187	\$65,331,919	\$17,496,732
11	TOTAL OTHER OPERATING REVENUE	\$599,039,787	\$651,518,348	\$52,478,561
12	TOTAL OPERATING EXPENSES	\$824,454,105	\$920,001,155	\$95,547,050

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	22,259.65420	22,023.81000	(235.84420)
2	MEDICARE	25,770.80030	28,747.86870	2,977.06840
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,782.70560	10,392.06210	609.35650
4	MEDICAID	7,491.80640	8,767.59180	1,275.78540
5	OTHER MEDICAL ASSISTANCE	2,290.89920	1,624.47030	(666.42890)
6	CHAMPUS / TRICARE	230.64000	177.25480	(53.38520)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	909.76460	933.01800	23.25340
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	35,784.14590	39,317.18560	3,533.03970
	TOTAL CASE MIX ADJUSTED DISCHARGES	58,043.80010	61,340.99560	3,297.19550
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,087.02458	10,258.86139	1,171.83681
2	MEDICARE	4,401.09031	4,511.98966	110.89934
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,082.44845	4,435.39492	352.94647
4	MEDICAID	3,270.61299	3,858.34494	587.73195
5	OTHER MEDICAL ASSISTANCE	811.83546	577.04998	-234.78548
6	CHAMPUS / TRICARE	44.16817	80.29146	36.12329
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	970.04972	952.32152	-17.72820
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	8,527.70693	9,027.67603	499.96910
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	17,614.73152	19,286.53743	1,671.80591
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,381.36	\$9,919.70	\$538.33
2	MEDICARE	\$8,874.00	\$9,076.93	\$202.92
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,965.42	\$7,098.50	\$1,133.08
4	MEDICAID	\$6,786.28	\$7,583.50	\$797.22
5	OTHER MEDICAL ASSISTANCE	\$3,281.00	\$4,480.85	\$1,199.85
6	CHAMPUS / TRICARE	\$8,334.38	\$5,065.94	(\$3,268.43)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,389.56	\$1,132.93	(\$256.63)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,075.37	\$8,535.92	\$460.55
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,576.22	\$9,032.75	\$456.53
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,166.51	\$12,924.64	\$758.13
2	MEDICARE	\$12,348.17	\$13,532.86	\$1,184.68
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,197.95	\$5,877.84	(\$320.10)
4	MEDICAID	\$6,410.57	\$6,074.76	(\$335.81)
5	OTHER MEDICAL ASSISTANCE	\$5,341.34	\$4,561.18	(\$780.17)
6	CHAMPUS / TRICARE	\$11,710.51	\$13,599.45	\$1,888.94
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,821.57	\$1,531.95	(\$289.63)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$9,400.59	\$9,772.46	\$371.87
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$10,827.46	\$11,449.16	\$621.70

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$19,419,594	\$28,775,912	\$9,356,318
2	OTHER MEDICAL ASSISTANCE	\$18,501,410	\$12,643,307	(\$5,858,103)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$17,020,409	\$18,840,621	\$1,820,212
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$54,941,412	\$60,259,840	\$5,318,427
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,714,431,648	\$1,901,719,123	\$187,287,475
2	TOTAL GOVERNMENT DEDUCTIONS	\$681,709,376	\$758,188,733	\$76,479,357
3	UNCOMPENSATED CARE	\$47,835,187	\$65,331,919	\$17,496,732
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$296,368,008	\$303,305,941	\$6,937,933
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$10,340,167	\$12,426,593	\$2,086,426
6	TOTAL ADJUSTMENTS	\$1,036,252,738	\$1,139,253,186	\$103,000,448
7	TOTAL ACCRUED PAYMENTS	\$678,178,910	\$762,465,937	\$84,287,027
8	UCP DSH PAYMENTS (OHCA INPUT)	\$4,364,687	\$3,946,217	(\$418,470)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$682,543,597	\$766,412,154	\$83,868,557
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3981165407	0.4030101737	0.0048936329
11	COST OF UNCOMPENSATED CARE	\$19,043,979	\$26,329,428	\$7,285,449
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$33,245,601	\$34,386,511	\$1,140,910
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$52,289,580	\$60,715,939	\$8,426,359
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	48.66%	49.76%	1.10%
2	MEDICARE	39.19%	39.84%	0.65%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	29.04%	32.81%	3.78%
4	MEDICAID	33.53%	33.66%	0.13%
5	OTHER MEDICAL ASSISTANCE	15.23%	26.70%	11.47%
6	CHAMPUS / TRICARE	28.78%	18.74%	-10.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6.63%	5.34%	-1.29%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	36.52%	37.94%	1.42%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	40.79%	41.86%	1.07%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	47.17%	47.25%	0.08%
2	MEDICARE	32.87%	32.68%	-0.18%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27.31%	24.09%	-3.22%
4	MEDICAID	29.35%	24.36%	-4.98%
5	OTHER MEDICAL ASSISTANCE	20.44%	21.87%	1.43%
6	CHAMPUS / TRICARE	32.61%	47.12%	14.51%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6.63%	5.34%	-1.29%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	30.88%	29.67%	-1.21%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	38.61%	38.20%	-0.41%

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$688,519,077	\$774,892,530	\$86,373,453
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$4,364,687	\$3,946,217	(\$418,470)
	OHCA DEFINED NET REVENUE	\$692,883,764	\$778,838,747	\$85,954,983
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$14,296,570	\$22,154,628	\$7,858,058
4	CALCULATED NET REVENUE	\$707,180,334	\$800,993,375	\$93,813,041
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$707,180,334	\$800,993,375	\$93,813,041
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,714,431,648	\$1,901,719,123	\$187,287,475
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,714,431,648	\$1,901,719,123	\$187,287,475
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,714,431,648	\$1,901,719,123	\$187,287,475
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$47,835,187	\$65,331,919	\$17,496,732
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$6,257,785	\$2,296,537	(\$3,961,248)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$54,092,972	\$67,628,456	\$13,535,484
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$54,092,972	\$67,628,456	\$13,535,484
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$439,060,292
2	MEDICARE	655,024,798
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	224,815,172
4	MEDICAID	197,558,048
5	OTHER MEDICAL ASSISTANCE	27,257,124
6	CHAMPUS / TRICARE	4,791,123
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	19,801,383
	TOTAL INPATIENT GOVERNMENT CHARGES	\$884,631,093
	TOTAL INPATIENT CHARGES	\$1,323,691,385
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$280,639,170
2	MEDICARE	186,830,085
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	108,241,096
4	MEDICAID	96,206,878
5	OTHER MEDICAL ASSISTANCE	12,034,218
6	CHAMPUS / TRICARE	2,317,387
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	27,329,396
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$297,388,568
	TOTAL OUTPATIENT CHARGES	\$578,027,738
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$719,699,462
2	TOTAL GOVERNMENT ACCRUED CHARGES	1,182,019,661
	TOTAL ACCRUED CHARGES	\$1,901,719,123
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$218,469,522
2	MEDICARE	260,942,379
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	73,768,006
4	MEDICAID	66,489,002
5	OTHER MEDICAL ASSISTANCE	7,279,004
6	CHAMPUS / TRICARE	897,963
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,057,043
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$335,608,348
	TOTAL INPATIENT PAYMENTS	\$554,077,870
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$132,592,080
2	MEDICARE	61,060,113
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	26,070,547
4	MEDICAID	23,438,520
5	OTHER MEDICAL ASSISTANCE	2,632,027
6	CHAMPUS / TRICARE	1,091,920
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,458,906
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$88,222,580
	TOTAL OUTPATIENT PAYMENTS	\$220,814,660
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$351,061,602
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	423,830,928
	TOTAL ACCRUED PAYMENTS	\$774,892,530

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16,050
2	MEDICARE	15,819
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,230
4	MEDICAID	7,923
5	OTHER MEDICAL ASSISTANCE	1,307
6	CHAMPUS / TRICARE	166
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	690
	TOTAL GOVERNMENT DISCHARGES	25,215
	TOTAL DISCHARGES	41,265
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.37220
2	MEDICARE	1.81730
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.12590
4	MEDICAID	1.10660
5	OTHER MEDICAL ASSISTANCE	1.24290
6	CHAMPUS / TRICARE	1.06780
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.35220
	TOTAL GOVERNMENT CASE MIX INDEX	1.55928
	TOTAL CASE MIX INDEX	1.48651
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$651,518,348
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$348,212,407
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$303,305,941
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	46.55%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$22,538,851
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$12,426,593
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$3,946,217
8	CHARITY CARE	\$27,507,152
9	BAD DEBTS	\$37,824,767
10	TOTAL UNCOMPENSATED CARE	\$65,331,919
11	TOTAL OTHER OPERATING REVENUE	\$129,170,425
12	TOTAL OPERATING EXPENSES	\$920,001,155

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2010
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$774,892,530
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$3,946,217
	OHCA DEFINED NET REVENUE	\$778,838,747
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$22,154,628
	CALCULATED NET REVENUE	\$800,993,375
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$800,993,375
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$1,901,719,123
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,901,719,123
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,901,719,123
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$65,331,919
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$2,296,537
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$67,628,456
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$67,628,456
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	12,382	11,293	(1,089)	-9%
2	Number of Approved Applicants	11,763	10,728	(1,035)	-9%
3	Total Charges (A)	\$23,984,656	\$27,507,152	\$3,522,496	15%
4	Average Charges	\$2,039	\$2,564	\$525	26%
5	Ratio of Cost to Charges (RCC)	0.478729	0.448659	(0.030070)	-6%
6	Total Cost	\$11,482,150	\$12,341,331	\$859,181	7%
7	Average Cost	\$976	\$1,150	\$174	18%
8	Charity Care - Inpatient Charges	\$13,785,970	\$17,294,944	\$3,508,974	25%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	6,466,196	6,588,371	122,175	2%
10	Charity Care - Emergency Department Charges	3,732,490	3,623,837	(108,653)	-3%
11	Total Charges (A)	\$23,984,656	\$27,507,152	\$3,522,496	15%
12	Charity Care - Number of Patient Days	2,139	2,425	286	13%
13	Charity Care - Number of Discharges	437	408	(29)	-7%
14	Charity Care - Number of Outpatient ED Visits	7,139	7,422	283	4%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	11,953	11,907	(46)	0%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$10,541,182	\$17,445,641	\$6,904,459	65%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	4,135,605	6,280,347	2,144,742	52%
3	Bad Debts - Emergency Department	9,173,744	14,098,779	4,925,035	54%
4	Total Bad Debts (A)	\$23,850,531	\$37,824,767	\$13,974,236	59%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$23,984,656	\$27,507,152	\$3,522,496	15%
2	Bad Debts (A)	23,850,531	37,824,767	13,974,236	59%
3	Total Uncompensated Care (A)	\$47,835,187	\$65,331,919	\$17,496,732	37%
4	Uncompensated Care - Inpatient Services	\$24,327,152	\$34,740,585	\$10,413,433	43%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	10,601,801	12,868,718	2,266,917	21%
6	Uncompensated Care - Emergency Department	12,906,234	17,722,616	4,816,382	37%
7	Total Uncompensated Care (A)	\$47,835,187	\$65,331,919	\$17,496,732	37%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

HARTFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2010 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2009	(4) FY 2010	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$599,039,787	\$651,518,348	\$52,478,561	9%
2	Total Contractual Allowances	\$296,368,008	\$303,305,941	\$6,937,933	2%
	Total Accrued Payments (A)	\$302,671,779	\$348,212,407	\$45,540,628	15%
	Total Discount Percentage	49.47%	46.55%	-2.92%	-6%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$1,115,172,714	\$1,220,439,016	\$1,323,691,385
2	Outpatient Gross Revenue	\$440,699,072	\$493,992,632	\$578,027,738
3	Total Gross Patient Revenue	\$1,555,871,786	\$1,714,431,648	\$1,901,719,123
4	Net Patient Revenue	\$639,563,211	\$717,211,741	\$794,806,049
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$779,129,428	\$824,454,105	\$920,001,155
C. <u>Utilization Statistics</u>				
1	Patient Days	212,013	215,958	220,114
2	Discharges	39,840	41,188	41,265
3	Average Length of Stay	5.3	5.2	5.3
4	Equivalent (Adjusted) Patient Days (EPD)	295,797	303,371	316,233
0	Equivalent (Adjusted) Discharges (ED)	55,584	57,860	59,285
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.39658	1.40924	1.48651
2	Case Mix Adjusted Patient Days (CMAPD)	296,093	304,337	327,203
3	Case Mix Adjusted Discharges (CMAD)	55,640	58,044	61,341
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	413,104	427,522	470,085
5	Case Mix Adjusted Equivalent Discharges (CMAED)	77,628	81,538	88,127
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$7,339	\$7,939	\$8,640
2	Total Gross Revenue per Discharge	\$39,053	\$41,625	\$46,086
3	Total Gross Revenue per EPD	\$5,260	\$5,651	\$6,014
4	Total Gross Revenue per ED	\$27,991	\$29,631	\$32,078
5	Total Gross Revenue per CMAEPD	\$3,766	\$4,010	\$4,045
6	Total Gross Revenue per CMAED	\$20,043	\$21,026	\$21,579
7	Inpatient Gross Revenue per EPD	\$3,770	\$4,023	\$4,186
8	Inpatient Gross Revenue per ED	\$20,063	\$21,093	\$22,328

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$3,017	\$3,321	\$3,611
2	Net Patient Revenue per Discharge	\$16,053	\$17,413	\$19,261
3	Net Patient Revenue per EPD	\$2,162	\$2,364	\$2,513
4	Net Patient Revenue per ED	\$11,506	\$12,396	\$13,407
5	Net Patient Revenue per CMAEPD	\$1,548	\$1,678	\$1,691
6	Net Patient Revenue per CMAED	\$8,239	\$8,796	\$9,019
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$3,675	\$3,818	\$4,180
2	Total Operating Expense per Discharge	\$19,556	\$20,017	\$22,295
3	Total Operating Expense per EPD	\$2,634	\$2,718	\$2,909
4	Total Operating Expense per ED	\$14,017	\$14,249	\$15,518
5	Total Operating Expense per CMAEPD	\$1,886	\$1,928	\$1,957
6	Total Operating Expense per CMAED	\$10,037	\$10,111	\$10,439
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$129,019,458	\$121,405,571	\$133,233,307
2	Nursing Fringe Benefits Expense	\$24,857,654	\$26,537,268	\$33,209,967
3	Total Nursing Salary and Fringe Benefits Expense	\$153,877,112	\$147,942,839	\$166,443,274
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$34,042,782	\$36,421,774	\$38,244,961
2	Physician Fringe Benefits Expense	\$6,558,884	\$7,961,203	\$10,063,626
3	Total Physician Salary and Fringe Benefits Expense	\$40,601,666	\$44,382,977	\$48,308,587
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$184,912,209	\$207,582,325	\$227,027,658
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$35,626,283	\$42,912,522	\$57,362,671
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$220,538,492	\$250,494,847	\$284,390,329
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$347,974,449	\$365,409,670	\$398,505,926
2	Total Fringe Benefits Expense	\$67,042,821	\$77,410,993	\$100,636,264
3	Total Salary and Fringe Benefits Expense	\$415,017,270	\$442,820,663	\$499,142,190

HARTFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2010				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2008	ACTUAL FY 2009	ACTUAL FY 2010
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	1449.0	1406.4	1499.0
2	Total Physician FTEs	202.7	209.4	210.0
3	Total Non-Nursing, Non-Physician FTEs	3679.6	3780.5	3939.0
4	Total Full Time Equivalent Employees (FTEs)	5,331.3	5,396.3	5,648.0
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$89,040	\$86,324	\$88,881
2	Nursing Fringe Benefits Expense per FTE	\$17,155	\$18,869	\$22,155
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$106,195	\$105,193	\$111,036
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$167,947	\$173,934	\$182,119
2	Physician Fringe Benefits Expense per FTE	\$32,358	\$38,019	\$47,922
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$200,304	\$211,953	\$230,041
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$50,253	\$54,909	\$57,636
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$9,682	\$11,351	\$14,563
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$59,935	\$66,260	\$72,199
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$65,270	\$67,715	\$70,557
2	Total Fringe Benefits Expense per FTE	\$12,575	\$14,345	\$17,818
3	Total Salary and Fringe Benefits Expense per FTE	\$77,845	\$82,060	\$88,375
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,958	\$2,050	\$2,268
2	Total Salary and Fringe Benefits Expense per Discharge	\$10,417	\$10,751	\$12,096
3	Total Salary and Fringe Benefits Expense per EPD	\$1,403	\$1,460	\$1,578
4	Total Salary and Fringe Benefits Expense per ED	\$7,466	\$7,653	\$8,419
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,005	\$1,036	\$1,062
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,346	\$5,431	\$5,664