

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$26,334,940	\$36,603,282	\$10,268,342	39%
2	Short Term Investments	\$173,186,305	\$0	(\$173,186,305)	-100%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$51,429,630	\$53,313,528	\$1,883,898	4%
4	Current Assets Whose Use is Limited for Current Liabilities	\$1,679,707	\$1,273,013	(\$406,694)	-24%
5	Due From Affiliates	\$4,041,813	\$6,177,652	\$2,135,839	53%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$7,538,558	\$8,853,966	\$1,315,408	17%
8	Prepaid Expenses	\$5,454,623	\$9,816,103	\$4,361,480	80%
9	Other Current Assets	\$0	\$0	\$0	0%
	<b>Total Current Assets</b>	<b>\$269,665,576</b>	<b>\$116,037,544</b>	<b>(\$153,628,032)</b>	<b>-57%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$151,523,870	\$151,523,870	0%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$0</b>	<b>\$151,523,870</b>	<b>\$151,523,870</b>	<b>0%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$150,579,966	\$227,259,186	\$76,679,220	51%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$438,070,317	\$492,540,194	\$54,469,877	12%
2	Less: Accumulated Depreciation	\$274,705,979	\$299,833,683	\$25,127,704	9%
	<b>Property, Plant and Equipment, Net</b>	<b>\$163,364,338</b>	<b>\$192,706,511</b>	<b>\$29,342,173</b>	<b>18%</b>
3	Construction in Progress	\$19,811,944	\$27,578,848	\$7,766,904	39%
	<b>Total Net Fixed Assets</b>	<b>\$183,176,282</b>	<b>\$220,285,359</b>	<b>\$37,109,077</b>	<b>20%</b>
	<b>Total Assets</b>	<b>\$603,421,824</b>	<b>\$715,105,959</b>	<b>\$111,684,135</b>	<b>19%</b>

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LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$20,675,079	\$27,356,488	\$6,681,409	32%
2	Salaries, Wages and Payroll Taxes	\$14,821,485	\$12,263,559	(\$2,557,926)	-17%
3	Due To Third Party Payers	\$11,079,973	\$11,107,547	\$27,574	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$2,545,000	\$2,515,000	(\$30,000)	-1%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$34,856,735	\$5,874,479	(\$28,982,256)	-83%
	<b>Total Current Liabilities</b>	<b>\$83,978,272</b>	<b>\$59,117,073</b>	<b>(\$24,861,199)</b>	<b>-30%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$81,260,000	\$252,100,000	\$170,840,000	210%
	<b>Total Long Term Debt</b>	<b>\$81,260,000</b>	<b>\$252,100,000</b>	<b>\$170,840,000</b>	<b>210%</b>
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$14,178,425	\$15,647,308	\$1,468,883	10%
	<b>Total Long Term Liabilities</b>	<b>\$95,438,425</b>	<b>\$267,747,308</b>	<b>\$172,308,883</b>	<b>181%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$368,034,236	\$332,255,763	(\$35,778,473)	-10%
2	Temporarily Restricted Net Assets	\$28,224,280	\$27,787,449	(\$436,831)	-2%
3	Permanently Restricted Net Assets	\$27,746,611	\$28,198,366	\$451,755	2%
	<b>Total Net Assets</b>	<b>\$424,005,127</b>	<b>\$388,241,578</b>	<b>(\$35,763,549)</b>	<b>-8%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$603,421,824</b>	<b>\$715,105,959</b>	<b>\$111,684,135</b>	<b>19%</b>

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$1,042,814,916	\$1,113,153,089	\$70,338,173	7%
2	Less: Allowances	\$559,026,360	\$604,072,976	\$45,046,616	8%
3	Less: Charity Care	\$12,767,832	\$11,359,623	(\$1,408,209)	-11%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$471,020,724</b>	<b>\$497,720,490</b>	<b>\$26,699,766</b>	<b>6%</b>
5	Other Operating Revenue	\$10,083,592	\$13,930,894	\$3,847,302	38%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$481,104,316</b>	<b>\$511,651,384</b>	<b>\$30,547,068</b>	<b>6%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$186,173,288	\$194,262,671	\$8,089,383	4%
2	Fringe Benefits	\$63,690,324	\$67,466,263	\$3,775,939	6%
3	Physicians Fees	\$41,098,443	\$45,908,952	\$4,810,509	12%
4	Supplies and Drugs	\$66,235,697	\$71,592,342	\$5,356,645	8%
5	Depreciation and Amortization	\$25,703,935	\$27,369,949	\$1,666,014	6%
6	Bad Debts	\$10,687,109	\$18,183,085	\$7,495,976	70%
7	Interest	\$4,557,278	\$4,587,742	\$30,464	1%
8	Malpractice	\$6,692,376	\$6,373,521	(\$318,855)	-5%
9	Other Operating Expenses	\$55,476,252	\$59,727,443	\$4,251,191	8%
	<b>Total Operating Expenses</b>	<b>\$460,314,702</b>	<b>\$495,471,968</b>	<b>\$35,157,266</b>	<b>8%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$20,789,614</b>	<b>\$16,179,416</b>	<b>(\$4,610,198)</b>	<b>-22%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$20,550,654	\$7,435,069	(\$13,115,585)	-64%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$3,239,430	\$71,435	(\$3,167,995)	-98%
	<b>Total Non-Operating Revenue</b>	<b>\$23,790,084</b>	<b>\$7,506,504</b>	<b>(\$16,283,580)</b>	<b>-68%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$44,579,698</b>	<b>\$23,685,920</b>	<b>(\$20,893,778)</b>	<b>-47%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$44,579,698</b>	<b>\$23,685,920</b>	<b>(\$20,893,778)</b>	<b>-47%</b>
	Principal Payments	\$2,460,000	\$35,125,000	\$32,665,000	1328%

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$244,317,017	\$268,150,184	\$23,833,167	10%
2	MEDICARE MANAGED CARE	\$18,140,524	\$23,714,332	\$5,573,808	31%
3	MEDICAID	\$29,728,277	\$41,817,164	\$12,088,887	41%
4	MEDICAID MANAGED CARE	\$16,597,039	\$18,059,075	\$1,462,036	9%
5	CHAMPUS/TRICARE	\$1,250,805	\$632,468	(\$618,337)	-49%
6	COMMERCIAL INSURANCE	\$98,382,451	\$89,264,881	(\$9,117,570)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$88,090,728	\$92,528,372	\$4,437,644	5%
8	WORKER'S COMPENSATION	\$4,031,338	\$3,174,286	(\$857,052)	-21%
9	SELF- PAY/UNINSURED	\$6,593,905	\$5,413,243	(\$1,180,662)	-18%
10	SAGA	\$4,769,955	\$0	(\$4,769,955)	-100%
11	OTHER	\$1,022,065	\$1,572,425	\$550,360	54%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$512,924,104</b>	<b>\$544,326,430</b>	<b>\$31,402,326</b>	<b>6%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$177,258,760	\$179,546,972	\$2,288,212	1%
2	MEDICARE MANAGED CARE	\$11,869,966	\$18,545,125	\$6,675,159	56%
3	MEDICAID	\$20,275,277	\$31,127,438	\$10,852,161	54%
4	MEDICAID MANAGED CARE	\$31,924,463	\$34,948,400	\$3,023,937	9%
5	CHAMPUS/TRICARE	\$805,622	\$696,661	(\$108,961)	-14%
6	COMMERCIAL INSURANCE	\$142,345,734	\$144,511,445	\$2,165,711	2%
7	NON-GOVERNMENT MANAGED CARE	\$113,193,542	\$131,344,234	\$18,150,692	16%
8	WORKER'S COMPENSATION	\$3,717,284	\$4,038,224	\$320,940	9%
9	SELF- PAY/UNINSURED	\$20,616,388	\$22,935,833	\$2,319,445	11%
10	SAGA	\$6,133,181	\$0	(\$6,133,181)	-100%
11	OTHER	\$1,750,595	\$1,132,327	(\$618,268)	-35%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$529,890,812</b>	<b>\$568,826,659</b>	<b>\$38,935,847</b>	<b>7%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$421,575,777	\$447,697,156	\$26,121,379	6%
2	MEDICARE MANAGED CARE	\$30,010,490	\$42,259,457	\$12,248,967	41%
3	MEDICAID	\$50,003,554	\$72,944,602	\$22,941,048	46%
4	MEDICAID MANAGED CARE	\$48,521,502	\$53,007,475	\$4,485,973	9%
5	CHAMPUS/TRICARE	\$2,056,427	\$1,329,129	(\$727,298)	-35%
6	COMMERCIAL INSURANCE	\$240,728,185	\$233,776,326	(\$6,951,859)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$201,284,270	\$223,872,606	\$22,588,336	11%
8	WORKER'S COMPENSATION	\$7,748,622	\$7,212,510	(\$536,112)	-7%
9	SELF- PAY/UNINSURED	\$27,210,293	\$28,349,076	\$1,138,783	4%
10	SAGA	\$10,903,136	\$0	(\$10,903,136)	-100%
11	OTHER	\$2,772,660	\$2,704,752	(\$67,908)	-2%
	<b>TOTAL GROSS REVENUE</b>	<b>\$1,042,814,916</b>	<b>\$1,113,153,089</b>	<b>\$70,338,173</b>	<b>7%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$84,336,220	\$91,658,965	\$7,322,745	9%
2	MEDICARE MANAGED CARE	\$6,377,528	\$7,290,698	\$913,170	14%
3	MEDICAID	\$9,729,167	\$9,986,029	\$256,862	3%
4	MEDICAID MANAGED CARE	\$4,450,305	\$4,465,320	\$15,015	0%
5	CHAMPUS/TRICARE	\$436,158	\$199,476	(\$236,682)	-54%
6	COMMERCIAL INSURANCE	\$63,657,349	\$55,263,947	(\$8,393,402)	-13%
7	NON-GOVERNMENT MANAGED CARE	\$48,524,276	\$54,551,869	\$6,027,593	12%
8	WORKER'S COMPENSATION	\$2,773,962	\$2,183,782	(\$590,180)	-21%
9	SELF- PAY/UNINSURED	\$1,946,025	\$613,179	(\$1,332,846)	-68%
10	SAGA	\$379,899	\$0	(\$379,899)	-100%
11	OTHER	\$155,806	\$286,024	\$130,218	84%

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$222,766,695</b>	<b>\$226,499,289</b>	<b>\$3,732,594</b>	<b>2%</b>
<b>B.</b>	<b>OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$61,188,262	\$61,372,658	\$184,396	0%
2	MEDICARE MANAGED CARE	\$4,173,035	\$5,701,485	\$1,528,450	37%
3	MEDICAID	\$4,847,819	\$7,534,470	\$2,686,651	55%
4	MEDICAID MANAGED CARE	\$8,560,178	\$8,641,406	\$81,228	1%
5	CHAMPUS/TRICARE	\$170,926	\$162,850	(\$8,076)	-5%
6	COMMERCIAL INSURANCE	\$87,635,692	\$88,667,757	\$1,032,065	1%
7	NON-GOVERNMENT MANAGED CARE	\$65,263,273	\$77,369,210	\$12,105,937	19%
8	WORKER'S COMPENSATION	\$2,541,352	\$2,778,137	\$236,785	9%
9	SELF- PAY/UNINSURED	\$6,084,409	\$2,598,031	(\$3,486,378)	-57%
10	SAGA	\$840,246	\$0	(\$840,246)	-100%
11	OTHER	\$155,118	\$284,556	\$129,438	83%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$241,460,310</b>	<b>\$255,110,560</b>	<b>\$13,650,250</b>	<b>6%</b>
<b>C.</b>	<b>TOTAL NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$145,524,482	\$153,031,623	\$7,507,141	5%
2	MEDICARE MANAGED CARE	\$10,550,563	\$12,992,183	\$2,441,620	23%
3	MEDICAID	\$14,576,986	\$17,520,499	\$2,943,513	20%
4	MEDICAID MANAGED CARE	\$13,010,483	\$13,106,726	\$96,243	1%
5	CHAMPUS/TRICARE	\$607,084	\$362,326	(\$244,758)	-40%
6	COMMERCIAL INSURANCE	\$151,293,041	\$143,931,704	(\$7,361,337)	-5%
7	NON-GOVERNMENT MANAGED CARE	\$113,787,549	\$131,921,079	\$18,133,530	16%
8	WORKER'S COMPENSATION	\$5,315,314	\$4,961,919	(\$353,395)	-7%
9	SELF- PAY/UNINSURED	\$8,030,434	\$3,211,210	(\$4,819,224)	-60%
10	SAGA	\$1,220,145	\$0	(\$1,220,145)	-100%
11	OTHER	\$310,924	\$570,580	\$259,656	84%
	<b>TOTAL NET REVENUE</b>	<b>\$464,227,005</b>	<b>\$481,609,849</b>	<b>\$17,382,844</b>	<b>4%</b>
<b>III.</b>	<b>STATISTICS BY PAYER</b>				
<b>A.</b>	<b>DISCHARGES</b>				
1	MEDICARE TRADITIONAL	8,302	8,759	457	6%
2	MEDICARE MANAGED CARE	615	736	121	20%
3	MEDICAID	1,606	1,907	301	19%
4	MEDICAID MANAGED CARE	1,121	1,162	41	4%
5	CHAMPUS/TRICARE	29	34	5	17%
6	COMMERCIAL INSURANCE	4,036	3,829	(207)	-5%
7	NON-GOVERNMENT MANAGED CARE	4,306	3,908	(398)	-9%
8	WORKER'S COMPENSATION	112	83	(29)	-26%
9	SELF- PAY/UNINSURED	298	248	(50)	-17%
10	SAGA	234	0	(234)	-100%
11	OTHER	56	97	41	73%
	<b>TOTAL DISCHARGES</b>	<b>20,715</b>	<b>20,763</b>	<b>48</b>	<b>0%</b>
<b>B.</b>	<b>PATIENT DAYS</b>				
1	MEDICARE TRADITIONAL	46,500	48,752	2,252	5%
2	MEDICARE MANAGED CARE	3,496	3,997	501	14%
3	MEDICAID	7,550	8,838	1,288	17%
4	MEDICAID MANAGED CARE	3,890	4,051	161	4%
5	CHAMPUS/TRICARE	226	97	(129)	-57%
6	COMMERCIAL INSURANCE	16,197	14,073	(2,124)	-13%
7	NON-GOVERNMENT MANAGED CARE	15,205	15,104	(101)	-1%
8	WORKER'S COMPENSATION	443	254	(189)	-43%
9	SELF- PAY/UNINSURED	1,120	960	(160)	-14%
10	SAGA	1,008	0	(1,008)	-100%
11	OTHER	249	537	288	116%
	<b>TOTAL PATIENT DAYS</b>	<b>95,884</b>	<b>96,663</b>	<b>779</b>	<b>1%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				

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

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	51,174	51,641	467	1%
2	MEDICARE MANAGED CARE	3,850	5,060	1,210	31%
3	MEDICAID	8,764	11,668	2,904	33%
4	MEDICAID MANAGED CARE	22,569	22,441	(128)	-1%
5	CHAMPUS/TRICARE	269	278	9	3%
6	COMMERCIAL INSURANCE	45,070	42,989	(2,081)	-5%
7	NON-GOVERNMENT MANAGED CARE	36,790	39,448	2,658	7%
8	WORKER'S COMPENSATION	1,492	1,525	33	2%
9	SELF- PAY/UNINSURED	12,793	12,584	(209)	-2%
10	SAGA	2,212	0	(2,212)	-100%
11	OTHER	841	681	(160)	-19%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>185,824</b>	<b>188,315</b>	<b>2,491</b>	<b>1%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$17,856,523	\$18,094,150	\$237,627	1%
2	MEDICARE MANAGED CARE	\$1,399,220	\$1,726,648	\$327,428	23%
3	MEDICAID	\$7,056,421	\$10,076,697	\$3,020,276	43%
4	MEDICAID MANAGED CARE	\$14,969,456	\$15,691,850	\$722,394	5%
5	CHAMPUS/TRICARE	\$286,709	\$290,028	\$3,319	1%
6	COMMERCIAL INSURANCE	\$28,420,434	\$27,027,564	(\$1,392,870)	-5%
7	NON-GOVERNMENT MANAGED CARE	\$21,042,863	\$22,069,944	\$1,027,081	5%
8	WORKER'S COMPENSATION	\$1,906,619	\$1,964,289	\$57,670	3%
9	SELF- PAY/UNINSURED	\$10,409,786	\$10,701,566	\$291,780	3%
10	SAGA	\$2,647,084	\$0	(\$2,647,084)	-100%
11	OTHER	\$400,248	\$224,466	(\$175,782)	-44%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$106,395,363</b>	<b>\$107,867,202</b>	<b>\$1,471,839</b>	<b>1%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$3,433,316	\$3,175,362	(\$257,954)	-8%
2	MEDICARE MANAGED CARE	\$367,320	\$385,171	\$17,851	5%
3	MEDICAID	\$1,135,002	\$1,224,281	\$89,279	8%
4	MEDICAID MANAGED CARE	\$3,194,679	\$3,029,757	(\$164,922)	-5%
5	CHAMPUS/TRICARE	\$61,582	\$92,026	\$30,444	49%
6	COMMERCIAL INSURANCE	\$17,940,367	\$16,689,049	(\$1,251,318)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$13,409,703	\$14,413,621	\$1,003,918	7%
8	WORKER'S COMPENSATION	\$1,303,410	\$1,311,265	\$7,855	1%
9	SELF- PAY/UNINSURED	\$1,587,314	\$1,518,749	(\$68,565)	-4%
10	SAGA	\$222,678	\$0	(\$222,678)	-100%
11	OTHER	\$84,086	\$41,382	(\$42,704)	-51%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$42,739,457</b>	<b>\$41,880,663</b>	<b>(\$858,794)</b>	<b>-2%</b>
<b>C.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	7,754	7,689	(65)	-1%
2	MEDICARE MANAGED CARE	605	700	95	16%
3	MEDICAID	3,770	5,254	1,484	39%
4	MEDICAID MANAGED CARE	11,386	11,351	(35)	0%
5	CHAMPUS/TRICARE	156	155	(1)	-1%
6	COMMERCIAL INSURANCE	13,461	12,501	(960)	-7%
7	NON-GOVERNMENT MANAGED CARE	10,231	10,297	66	1%
8	WORKER'S COMPENSATION	1,256	1,295	39	3%
9	SELF- PAY/UNINSURED	5,785	5,619	(166)	-3%
10	SAGA	1,449	0	(1,449)	-100%
11	OTHER	283	131	(152)	-54%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>56,136</b>	<b>54,992</b>	<b>(1,144)</b>	<b>-2%</b>

**DANBURY HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2011**  
**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010 ACTUAL</u>	<u>FY 2011 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$54,797,841	\$58,301,687	\$3,503,846	6%
2	Physician Salaries	\$6,365,059	\$7,419,911	\$1,054,852	17%
3	Non-Nursing, Non-Physician Salaries	\$125,010,388	\$128,541,073	\$3,530,685	3%
	<b>Total Salaries &amp; Wages</b>	<b>\$186,173,288</b>	<b>\$194,262,671</b>	<b>\$8,089,383</b>	<b>4%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$18,746,472	\$20,247,827	\$1,501,355	8%
2	Physician Fringe Benefits	\$2,177,502	\$2,576,891	\$399,389	18%
3	Non-Nursing, Non-Physician Fringe Benefits	\$42,766,350	\$44,641,545	\$1,875,195	4%
	<b>Total Fringe Benefits</b>	<b>\$63,690,324</b>	<b>\$67,466,263</b>	<b>\$3,775,939</b>	<b>6%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$149,029	\$412,766	\$263,737	177%
2	Physician Fees	\$41,098,443	\$45,908,952	\$4,810,509	12%
3	Non-Nursing, Non-Physician Fees	\$329,219	\$490,035	\$160,816	49%
	<b>Total Contractual Labor Fees</b>	<b>\$41,576,691</b>	<b>\$46,811,753</b>	<b>\$5,235,062</b>	<b>13%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$47,533,352	\$51,736,677	\$4,203,325	9%
2	Pharmaceutical Costs	\$18,702,345	\$19,855,665	\$1,153,320	6%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$66,235,697</b>	<b>\$71,592,342</b>	<b>\$5,356,645</b>	<b>8%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$8,578,495	\$9,652,053	\$1,073,558	13%
2	Depreciation-Equipment	\$17,038,115	\$17,629,693	\$591,578	3%
3	Amortization	\$87,325	\$88,203	\$878	1%
	<b>Total Depreciation and Amortization</b>	<b>\$25,703,935</b>	<b>\$27,369,949</b>	<b>\$1,666,014</b>	<b>6%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$10,687,109	\$18,183,085	\$7,495,976	70%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$4,557,278	\$4,587,742	\$30,464	1%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$6,692,376	\$6,373,521	(\$318,855)	-5%
<b>I. Utilities:</b>					
1	Water	\$422,892	\$462,231	\$39,339	9%
2	Natural Gas	\$122,387	\$141,222	\$18,835	15%
3	Oil	\$1,258,752	\$1,838,684	\$579,932	46%
4	Electricity	\$4,091,028	\$3,002,549	(\$1,088,479)	-27%
5	Telephone	\$612,790	\$781,414	\$168,624	28%
6	Other Utilities	\$19,059	\$20,157	\$1,098	6%
	<b>Total Utilities</b>	<b>\$6,526,908</b>	<b>\$6,246,257</b>	<b>(\$280,651)</b>	<b>-4%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$347,637	\$440,724	\$93,087	27%
2	Legal Fees	\$1,054,189	\$1,759,483	\$705,294	67%
3	Consulting Fees	\$2,511,112	\$3,631,996	\$1,120,884	45%
4	Dues and Membership	\$1,084,399	\$1,231,947	\$147,548	14%
5	Equipment Leases	\$4,935,335	\$5,858,538	\$923,203	19%
6	Building Leases	\$0	\$0	\$0	0%
7	Repairs and Maintenance	\$7,535,591	\$7,767,449	\$231,858	3%
8	Insurance	\$654,918	\$848,225	\$193,307	30%

**DANBURY HOSPITAL**  
**TWELVE MONTHS ACTUAL FILING**  
**FISCAL YEAR 2011**  
**REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010 ACTUAL</u>	<u>FY 2011 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$436,180	\$510,240	\$74,060	17%
10	Conferences	\$350,159	\$362,374	\$12,215	3%
11	Property Tax	\$95,656	\$216,077	\$120,421	126%
12	General Supplies	\$9,219,790	\$9,571,824	\$352,034	4%
13	Licenses and Subscriptions	\$308,751	\$304,487	(\$4,264)	-1%
14	Postage and Shipping	\$664,390	\$632,087	(\$32,303)	-5%
15	Advertising	\$2,055,845	\$1,702,716	(\$353,129)	-17%
16	Other Business Expenses	\$17,217,144	\$17,740,218	\$523,074	3%
	<b>Total Business Expenses</b>	<b>\$48,471,096</b>	<b>\$52,578,385</b>	<b>\$4,107,289</b>	<b>8%</b>
<b>K.</b>	<b><u>Other Operating Expense:</u></b>				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$460,314,702</b>	<b>\$495,471,968</b>	<b>\$35,157,266</b>	<b>8%</b>
	<b>*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150</b>				
<b>II.</b>	<b><u>OPERATING EXPENSE BY DEPARTMENT</u></b>				
<b>A.</b>	<b><u>General Services:</u></b>				
1	General Administration	\$40,304,335	\$46,845,167	\$6,540,832	16%
2	General Accounting	\$1,135,450	\$1,099,748	(\$35,702)	-3%
3	Patient Billing & Collection	\$5,543,039	\$5,580,340	\$37,301	1%
4	Admitting / Registration Office	\$2,620,891	\$2,710,264	\$89,373	3%
5	Data Processing	\$20,482,758	\$19,705,104	(\$777,654)	-4%
6	Communications	\$1,896,629	\$2,245,393	\$348,764	18%
7	Personnel	\$4,753,357	\$5,014,584	\$261,227	5%
8	Public Relations	\$210,132	\$238,047	\$27,915	13%
9	Purchasing	\$1,334,268	\$1,553,035	\$218,767	16%
10	Dietary and Cafeteria	\$6,879,656	\$7,665,837	\$786,181	11%
11	Housekeeping	\$6,739,059	\$6,740,127	\$1,068	0%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$9,351,485	\$9,626,613	\$275,128	3%
14	Security	\$5,632,010	\$6,727,095	\$1,095,085	19%
15	Repairs and Maintenance	\$2,148,942	\$2,045,789	(\$103,153)	-5%
16	Central Sterile Supply	\$2,727,066	\$2,291,251	(\$435,815)	-16%
17	Pharmacy Department	\$12,227,252	\$12,048,321	(\$178,931)	-1%
18	Other General Services	\$140,721	\$185,369	\$44,648	32%
	<b>Total General Services</b>	<b>\$124,127,050</b>	<b>\$132,322,084</b>	<b>\$8,195,034</b>	<b>7%</b>
<b>B.</b>	<b><u>Professional Services:</u></b>				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$11,328,813	\$13,127,183	\$1,798,370	16%
3	Nursing Services Administration	\$7,521,020	\$7,555,521	\$34,501	0%
4	Medical Records	\$3,762,369	\$2,301,068	(\$1,461,301)	-39%
5	Social Service	\$4,049,389	\$4,176,394	\$127,005	3%
6	Other Professional Services	\$354,105	\$511,860	\$157,755	45%
	<b>Total Professional Services</b>	<b>\$27,015,696</b>	<b>\$27,672,026</b>	<b>\$656,330</b>	<b>2%</b>
<b>C.</b>	<b><u>Special Services:</u></b>				
1	Operating Room	\$40,450,846	\$44,206,484	\$3,755,638	9%
2	Recovery Room	\$3,914,324	\$4,221,166	\$306,842	8%
3	Anesthesiology	\$2,911,150	\$2,812,014	(\$99,136)	-3%
4	Delivery Room	\$5,008,238	\$5,265,671	\$257,433	5%
5	Diagnostic Radiology	\$9,763,083	\$9,615,624	(\$147,459)	-2%
6	Diagnostic Ultrasound	\$2,514,561	\$2,120,683	(\$393,878)	-16%
7	Radiation Therapy	\$4,232,625	\$4,310,049	\$77,424	2%

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

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010 ACTUAL</u>	<u>FY 2011 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
8	Radioisotopes	\$2,457,569	\$2,659,783	\$202,214	8%
9	CT Scan	\$2,559,422	\$2,494,825	(\$64,597)	-3%
10	Laboratory	\$28,136,424	\$29,815,094	\$1,678,670	6%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$18,328,634	\$16,649,748	(\$1,678,886)	-9%
13	Electrocardiology	\$339,430	\$265,550	(\$73,880)	-22%
14	Electroencephalography	\$167,777	\$151,650	(\$16,127)	-10%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$3,078,243	\$3,451,552	\$373,309	12%
19	Pulmonary Function	\$982,122	\$991,968	\$9,846	1%
20	Intravenous Therapy	\$13,413,797	\$14,908,187	\$1,494,390	11%
21	Shock Therapy	\$73,516	\$66,784	(\$6,732)	-9%
22	Psychiatry / Psychology Services	\$3,637,663	\$3,868,528	\$230,865	6%
23	Renal Dialysis	\$3,932,948	\$4,249,545	\$316,597	8%
24	Emergency Room	\$25,809,465	\$26,228,686	\$419,221	2%
25	MRI	\$2,598,130	\$2,126,746	(\$471,384)	-18%
26	PET Scan	\$1,101,464	\$1,211,296	\$109,832	10%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$4,996,998	\$5,444,516	\$447,518	9%
29	Sleep Center	\$1,475,315	\$1,416,685	(\$58,630)	-4%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$666,281	\$656,768	(\$9,513)	-1%
32	Occupational Therapy / Physical Therapy	\$8,554,357	\$8,555,682	\$1,325	0%
33	Dental Clinic	\$1,798,239	\$1,900,889	\$102,650	6%
34	Other Special Services	\$10,962,829	\$11,152,333	\$189,504	2%
	<b>Total Special Services</b>	<b>\$203,865,450</b>	<b>\$210,818,506</b>	<b>\$6,953,056</b>	<b>3%</b>
<b>D.</b>	<b><u>Routine Services:</u></b>				
1	Medical & Surgical Units	\$49,449,328	\$55,429,799	\$5,980,471	12%
2	Intensive Care Unit	\$6,595,514	\$6,514,626	(\$80,888)	-1%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$5,000,173	\$4,708,667	(\$291,506)	-6%
5	Pediatric Unit	\$3,013,534	\$3,108,965	\$95,431	3%
6	Maternity Unit	\$5,002,548	\$5,053,829	\$51,281	1%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$4,677,882	\$5,350,508	\$672,626	14%
9	Rehabilitation Unit	\$3,267,275	\$3,457,111	\$189,836	6%
10	Ambulatory Surgery	\$3,818,729	\$6,121,279	\$2,302,550	60%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$6,292,893	\$7,134,176	\$841,283	13%
13	Other Routine Services	\$0	\$0	\$0	0%
	<b>Total Routine Services</b>	<b>\$87,117,876</b>	<b>\$96,878,960</b>	<b>\$9,761,084</b>	<b>11%</b>
<b>E.</b>	<b><u>Other Departments:</u></b>				
1	Miscellaneous Other Departments	\$18,188,630	\$27,780,392	\$9,591,762	53%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$460,314,702</b>	<b>\$495,471,968</b>	<b>\$35,157,266</b>	<b>8%</b>
	<b>*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>				

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$457,712,742	\$ 471,020,724	\$497,720,490
2	Other Operating Revenue	9,727,398	10,083,592	13,930,894
3	Total Operating Revenue	\$467,440,140	\$481,104,316	\$511,651,384
4	Total Operating Expenses	442,588,744	460,314,702	495,471,968
5	Income/(Loss) From Operations	\$24,851,396	\$20,789,614	\$16,179,416
6	Total Non-Operating Revenue	13,663,243	23,790,084	7,506,504
7	Excess/(Deficiency) of Revenue Over Expenses	\$38,514,639	\$44,579,698	\$23,685,920
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	5.17%	4.12%	3.12%
2	Hospital Non Operating Margin	2.84%	4.71%	1.45%
3	Hospital Total Margin	8.01%	8.83%	4.56%
4	Income/(Loss) From Operations	\$24,851,396	\$20,789,614	\$16,179,416
5	Total Operating Revenue	\$467,440,140	\$481,104,316	\$511,651,384
6	Total Non-Operating Revenue	\$13,663,243	\$23,790,084	\$7,506,504
7	Total Revenue	\$481,103,383	\$504,894,400	\$519,157,888
8	Excess/(Deficiency) of Revenue Over Expenses	\$38,514,639	\$44,579,698	\$23,685,920
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$325,008,268	\$368,034,236	\$332,255,763
2	Hospital Total Net Assets	\$380,666,988	\$424,005,127	\$388,241,578
3	Hospital Change in Total Net Assets	\$4,264,802	\$43,338,139	(\$35,763,549)
4	Hospital Change in Total Net Assets %	101.1%	11.4%	-8.4%
<b>D. <u>Cost Data Summary</u></b>				
1	<b>Ratio of Cost to Charges</b>	<b>0.44</b>	<b>0.44</b>	<b>0.44</b>
2	Total Operating Expenses	\$442,588,744	\$460,314,702	\$495,471,968
3	Total Gross Revenue	\$1,002,343,396	\$1,042,814,916	\$1,113,153,089
4	Total Other Operating Revenue	\$7,344,217	\$7,515,933	\$11,802,461
5	<b>Private Payment to Cost Ratio</b>	<b>1.36</b>	<b>1.37</b>	<b>1.37</b>
6	Total Non-Government Payments	\$268,618,141	\$278,426,338	\$284,025,912

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>
7	Total Uninsured Payments	\$2,795,211	\$8,030,434	\$3,211,210
8	Total Non-Government Charges	\$471,850,921	\$476,971,370	\$493,210,518
9	Total Uninsured Charges	\$27,565,078	\$27,210,293	\$28,349,076
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.79</b>	<b>0.79</b>	<b>0.77</b>
11	Total Medicare Payments	\$148,032,576	\$156,075,045	\$166,023,806
12	Total Medicare Charges	\$427,574,048	\$451,586,267	\$489,956,613
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.64</b>	<b>0.64</b>	<b>0.55</b>
14	Total Medicaid Payments	\$22,952,045	\$27,587,469	\$30,627,225
15	Total Medicaid Charges	\$81,499,078	\$98,525,056	\$125,952,077
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$12,695,350</b>	<b>\$10,279,289</b>	<b>\$13,011,700</b>
17	Charity Care	\$12,266,705	\$12,767,832	\$11,359,623
18	Bad Debts	\$16,695,481	\$10,687,109	\$18,183,085
19	Total Uncompensated Care	\$28,962,186	\$23,454,941	\$29,542,708
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>2.9%</b>	<b>2.2%</b>	<b>2.6%</b>
21	Total Operating Expenses	\$442,588,744	\$460,314,702	\$495,471,968
<b>E.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>4.87</b>	<b>3.21</b>	<b>1.96</b>
2	Total Current Assets	\$241,828,286	\$269,665,576	\$116,037,544
3	Total Current Liabilities	\$49,624,388	\$83,978,272	\$59,117,073
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>160</b>	<b>168</b>	<b>29</b>
5	Cash and Cash Equivalents	\$38,643,022	\$26,334,940	\$36,603,282
6	Short Term Investments	144,958,291	173,186,305	0
7	Total Cash and Short Term Investments	\$183,601,313	\$199,521,245	\$36,603,282
8	Total Operating Expenses	\$442,588,744	\$460,314,702	\$495,471,968
9	Depreciation Expense	\$23,125,624	\$25,703,935	\$27,369,949
10	Operating Expenses less Depreciation Expense	\$419,463,120	\$434,610,767	\$468,102,019
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>26.31</b>	<b>31.27</b>	<b>30.95</b>

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2009</b>	<b>FY 2010</b>	<b>FY 2011</b>
12	Net Patient Accounts Receivable	\$ 41,637,724	\$ 51,429,630	\$ 53,313,528
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$8,646,835	\$11,079,973	\$11,107,547
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 32,990,889	\$ 40,349,657	\$ 42,205,981
16	Total Net Patient Revenue	\$457,712,742	\$ 471,020,724	\$ 497,720,490
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>43.18</b>	<b>70.53</b>	<b>46.10</b>
18	Total Current Liabilities	\$49,624,388	\$83,978,272	\$59,117,073
19	Total Operating Expenses	\$442,588,744	\$460,314,702	\$495,471,968
20	Depreciation Expense	\$23,125,624	\$25,703,935	\$27,369,949
21	Total Operating Expenses less Depreciation Expense	\$419,463,120	\$434,610,767	\$468,102,019
<b>F.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>68.0</b>	<b>70.3</b>	<b>54.3</b>
2	Total Net Assets	\$380,666,988	\$424,005,127	\$388,241,578
3	Total Assets	\$559,454,847	\$603,421,824	\$715,105,959
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>37.5</b>	<b>42.5</b>	<b>16.4</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$38,514,639	\$44,579,698	\$23,685,920
6	Depreciation Expense	\$23,125,624	\$25,703,935	\$27,369,949
7	Excess of Revenues Over Expenses and Depreciation Expense	\$61,640,263	\$70,283,633	\$51,055,869
8	Total Current Liabilities	\$49,624,388	\$83,978,272	\$59,117,073
9	Total Long Term Debt	\$114,675,000	\$81,260,000	\$252,100,000
10	Total Current Liabilities and Total Long Term Debt	\$164,299,388	\$165,238,272	\$311,217,073
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>23.2</b>	<b>16.1</b>	<b>39.4</b>
12	Total Long Term Debt	\$114,675,000	\$81,260,000	\$252,100,000
13	Total Net Assets	\$380,666,988	\$424,005,127	\$388,241,578
14	Total Long Term Debt and Total Net Assets	\$495,341,988	\$505,265,127	\$640,341,578
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>9.3</b>	<b>10.7</b>	<b>1.4</b>
16	Excess Revenues over Expenses	\$38,514,639	\$44,579,698	\$23,685,920
17	Interest Expense	\$4,667,920	\$4,557,278	\$4,587,742
18	Depreciation and Amortization Expense	\$23,125,624	\$25,703,935	\$27,369,949

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>
19	Principal Payments	\$2,425,000	\$2,460,000	\$35,125,000
<b>G. <u>Other Financial Ratios</u></b>				
20	<b>Average Age of Plant</b>	<b>10.9</b>	<b>10.7</b>	<b>11.0</b>
21	Accumulated Depreciation	\$251,993,763	\$274,705,979	\$299,833,683
22	Depreciation and Amortization Expense	\$23,125,624	\$25,703,935	\$27,369,949
<b>H. <u>Utilization Measures Summary</u></b>				
1	Patient Days	91,794	95,884	96,663
2	Discharges	20,497	20,715	20,763
3	ALOS	4.5	4.6	4.7
4	Staffed Beds	271	278	286
5	Available Beds	-	365	371
6	Licensed Beds	371	371	371
6	Occupancy of Staffed Beds	92.8%	94.5%	92.6%
7	Occupancy of Available Beds	71.6%	72.0%	71.4%
8	Full Time Equivalent Employees	2,448.0	2,492.8	2,541.3
<b>I. <u>Hospital Gross Revenue Payer Mix Percentage</u></b>				
1	Non-Government Gross Revenue Payer Mix Percentage	44.3%	43.1%	41.8%
2	Medicare Gross Revenue Payer Mix Percentage	42.7%	43.3%	44.0%
3	Medicaid Gross Revenue Payer Mix Percentage	8.1%	9.4%	11.3%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	2.0%	1.3%	0.2%
5	Uninsured Gross Revenue Payer Mix Percentage	2.8%	2.6%	2.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.2%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$444,285,843	\$449,761,077	\$464,861,442
9	Medicare Gross Revenue (Charges)	\$427,574,048	\$451,586,267	\$489,956,613
10	Medicaid Gross Revenue (Charges)	\$81,499,078	\$98,525,056	\$125,952,077
11	Other Medical Assistance Gross Revenue (Charges)	\$20,408,649	\$13,675,796	\$2,704,752
12	Uninsured Gross Revenue (Charges)	\$27,565,078	\$27,210,293	\$28,349,076
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,010,700	\$2,056,427	\$1,329,129
14	Total Gross Revenue (Charges)	\$1,002,343,396	\$1,042,814,916	\$1,113,153,089
<b>J. <u>Hospital Net Revenue Payer Mix Percentage</u></b>				
1	Non-Government Net Revenue Payer Mix Percentage	59.9%	58.2%	58.3%

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>
2	Medicare Net Revenue Payer Mix Percentage	33.4%	33.6%	34.5%
3	Medicaid Net Revenue Payer Mix Percentage	5.2%	5.9%	6.4%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.8%	0.3%	0.1%
5	Uninsured Net Revenue Payer Mix Percentage	0.6%	1.7%	0.7%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$265,822,930	\$270,395,904	\$280,814,702
9	Medicare Net Revenue (Payments)	\$148,032,576	\$156,075,045	\$166,023,806
10	Medicaid Net Revenue (Payments)	\$22,952,045	\$27,587,469	\$30,627,225
11	Other Medical Assistance Net Revenue (Payments)	\$3,644,120	\$1,531,069	\$570,580
12	Uninsured Net Revenue (Payments)	\$2,795,211	\$8,030,434	\$3,211,210
13	CHAMPUS / TRICARE Net Revenue Payments)	\$293,618	\$607,084	\$362,326
14	Total Net Revenue (Payments)	\$443,540,500	\$464,227,005	\$481,609,849
<b>K. Discharges</b>				
1	Non-Government (Including Self Pay / Uninsured)	9,049	8,752	8,068
2	Medicare	8,566	8,917	9,495
3	Medical Assistance	2,857	3,017	3,166
4	Medicaid	2,312	2,727	3,069
5	Other Medical Assistance	545	290	97
6	CHAMPUS / TRICARE	25	29	34
7	Uninsured (Included In Non-Government)	322	298	248
8	Total	20,497	20,715	20,763
<b>L. Case Mix Index</b>				
1	Non-Government (Including Self Pay / Uninsured)	1.122600	1.161400	1.195200
2	Medicare	1.371100	1.348500	1.332800
3	Medical Assistance	0.927379	0.883284	1.027836
4	Medicaid	0.941400	0.865800	1.031400
5	Other Medical Assistance	0.867900	1.047700	0.915100
6	CHAMPUS / TRICARE	0.813900	0.908600	0.901500
7	Uninsured (Included In Non-Government)	1.033200	1.241600	1.215300
8	Total Case Mix Index	1.198864	1.201079	1.232124
<b>M. Emergency Department Visits</b>				
1	Emergency Room - Treated and Admitted	13,885	14,124	14,603
2	Emergency Room - Treated and Discharged	55,697	56,136	54,992
3	Total Emergency Room Visits	69,582	70,260	69,595

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$169,823	\$169,823	0%
2	Inpatient Payments	\$0	\$24,407	\$24,407	0%
3	Outpatient Charges	\$117,071	\$178,916	\$61,845	53%
4	Outpatient Payments	\$94,009	\$22,547	(\$71,462)	-76%
5	Discharges	0	4	4	0%
6	Patient Days	0	25	25	0%
7	Outpatient Visits (Excludes ED Visits)	32	42	10	31%
8	Emergency Department Outpatient Visits	8	0	(8)	-100%
9	Emergency Department Inpatient Admissions	0	1	1	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$117,071</b>	<b>\$348,739</b>	<b>\$231,668</b>	<b>198%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$94,009</b>	<b>\$46,954</b>	<b>(\$47,055)</b>	<b>-50%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$2,916,107	\$2,841,503	(\$74,604)	-3%
2	Inpatient Payments	\$957,578	\$869,758	(\$87,820)	-9%
3	Outpatient Charges	\$2,024,828	\$3,215,019	\$1,190,191	59%
4	Outpatient Payments	\$716,537	\$904,033	\$187,496	26%
5	Discharges	83	98	15	18%
6	Patient Days	555	472	(83)	-15%
7	Outpatient Visits (Excludes ED Visits)	553	756	203	37%
8	Emergency Department Outpatient Visits	74	79	5	7%
9	Emergency Department Inpatient Admissions	50	67	17	34%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$4,940,935</b>	<b>\$6,056,522</b>	<b>\$1,115,587</b>	<b>23%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,674,115</b>	<b>\$1,773,791</b>	<b>\$99,676</b>	<b>6%</b>

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$7,609,148	\$2,206,792	(\$5,402,356)	-71%
2	Inpatient Payments	\$2,636,320	\$839,402	(\$1,796,918)	-68%
3	Outpatient Charges	\$4,609,775	\$1,396,921	(\$3,212,854)	-70%
4	Outpatient Payments	\$1,424,520	\$437,668	(\$986,852)	-69%
5	Discharges	256	61	(195)	-76%
6	Patient Days	1,364	457	(907)	-66%
7	Outpatient Visits (Excludes ED Visits)	1,262	328	(934)	-74%
8	Emergency Department Outpatient Visits	214	64	(150)	-70%
9	Emergency Department Inpatient Admissions	174	44	(130)	-75%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$12,218,923</b>	<b>\$3,603,713</b>	<b>(\$8,615,210)</b>	<b>-71%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$4,060,840</b>	<b>\$1,277,070</b>	<b>(\$2,783,770)</b>	<b>-69%</b>
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$2,851,662	\$4,819,561	\$1,967,899	69%
2	Inpatient Payments	\$932,143	\$1,554,061	\$621,918	67%
3	Outpatient Charges	\$1,465,204	\$1,986,574	\$521,370	36%
4	Outpatient Payments	\$505,335	\$739,266	\$233,931	46%
5	Discharges	91	133	42	46%
6	Patient Days	597	713	116	19%
7	Outpatient Visits (Excludes ED Visits)	400	467	67	17%
8	Emergency Department Outpatient Visits	112	140	28	25%
9	Emergency Department Inpatient Admissions	77	106	29	38%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$4,316,866</b>	<b>\$6,806,135</b>	<b>\$2,489,269</b>	<b>58%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,437,478</b>	<b>\$2,293,327</b>	<b>\$855,849</b>	<b>60%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>I. AETNA</b>					
1	Inpatient Charges	\$2,177,543	\$2,275,333	\$97,790	4%
2	Inpatient Payments	\$821,518	\$711,483	(\$110,035)	-13%
3	Outpatient Charges	\$1,558,489	\$2,024,448	\$465,959	30%
4	Outpatient Payments	\$799,970	\$874,702	\$74,732	9%
5	Discharges	89	75	(14)	-16%
6	Patient Days	468	397	(71)	-15%
7	Outpatient Visits (Excludes ED Visits)	426	476	50	12%
8	Emergency Department Outpatient Visits	65	74	9	14%
9	Emergency Department Inpatient Admissions	71	59	(12)	-17%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$3,736,032</b>	<b>\$4,299,781</b>	<b>\$563,749</b>	<b>15%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,621,488</b>	<b>\$1,586,185</b>	<b>(\$35,303)</b>	<b>-2%</b>

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>J. HUMANA</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>K. SECURE HORIZONS</b>					
1	Inpatient Charges	\$1,903,804	\$10,734,214	\$8,830,410	464%
2	Inpatient Payments	\$750,797	\$3,085,109	\$2,334,312	311%
3	Outpatient Charges	\$1,421,286	\$9,339,872	\$7,918,586	557%
4	Outpatient Payments	\$374,867	\$2,608,027	\$2,233,160	596%
5	Discharges	64	350	286	447%
6	Patient Days	361	1,791	1,430	396%
7	Outpatient Visits (Excludes ED Visits)	388	2,196	1,808	466%
8	Emergency Department Outpatient Visits	83	311	228	275%
9	Emergency Department Inpatient Admissions	48	262	214	446%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$3,325,090</b>	<b>\$20,074,086</b>	<b>\$16,748,996</b>	<b>504%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,125,664</b>	<b>\$5,693,136</b>	<b>\$4,567,472</b>	<b>406%</b>
<b>L. UNICARE LIFE &amp; HEALTH INSURANCE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>M. UNIVERSAL AMERICAN</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N. EVERCARE</b>					
1	Inpatient Charges	\$682,260	\$667,106	(\$15,154)	-2%
2	Inpatient Payments	\$279,172	\$206,478	(\$72,694)	-26%
3	Outpatient Charges	\$673,313	\$403,375	(\$269,938)	-40%
4	Outpatient Payments	\$257,797	\$115,242	(\$142,555)	-55%
5	Discharges	32	15	(17)	-53%
6	Patient Days	151	142	(9)	-6%
7	Outpatient Visits (Excludes ED Visits)	184	95	(89)	-48%
8	Emergency Department Outpatient Visits	49	32	(17)	-35%
9	Emergency Department Inpatient Admissions	24	12	(12)	-50%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,355,573</b>	<b>\$1,070,481</b>	<b>(\$285,092)</b>	<b>-21%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$536,969</b>	<b>\$321,720</b>	<b>(\$215,249)</b>	<b>-40%</b>
<b>II. TOTAL MEDICARE MANAGED CARE</b>					
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$18,140,524</b>	<b>\$23,714,332</b>	<b>\$5,573,808</b>	<b>31%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$6,377,528</b>	<b>\$7,290,698</b>	<b>\$913,170</b>	<b>14%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$11,869,966</b>	<b>\$18,545,125</b>	<b>\$6,675,159</b>	<b>56%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$4,173,035</b>	<b>\$5,701,485</b>	<b>\$1,528,450</b>	<b>37%</b>
	<b>TOTAL DISCHARGES</b>	<b>615</b>	<b>736</b>	<b>121</b>	<b>20%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>3,496</b>	<b>3,997</b>	<b>501</b>	<b>14%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>3,245</b>	<b>4,360</b>	<b>1,115</b>	<b>34%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>605</b>	<b>700</b>	<b>95</b>	<b>16%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>444</b>	<b>551</b>	<b>107</b>	<b>24%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$30,010,490</b>	<b>\$42,259,457</b>	<b>\$12,248,967</b>	<b>41%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$10,550,563</b>	<b>\$12,992,183</b>	<b>\$2,441,620</b>	<b>23%</b>

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$6,776,055	\$7,314,852	\$538,797	8%
2	Inpatient Payments	\$1,783,294	\$1,855,792	\$72,498	4%
3	Outpatient Charges	\$14,571,290	\$14,710,540	\$139,250	1%
4	Outpatient Payments	\$3,934,120	\$3,604,229	(\$329,891)	-8%
5	Discharges	442	457	15	3%
6	Patient Days	1,528	1,656	128	8%
7	Outpatient Visits (Excludes ED Visits)	5,106	4,669	(437)	-9%
8	Emergency Department Outpatient Visits	5,191	4,794	(397)	-8%
9	Emergency Department Inpatient Admissions	117	118	1	1%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$21,347,345</b>	<b>\$22,025,392</b>	<b>\$678,047</b>	<b>3%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$5,717,414</b>	<b>\$5,460,021</b>	<b>(\$257,393)</b>	<b>-5%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>		<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$261,642	\$493,140	\$231,498	88%
2	Inpatient Payments	\$77,803	\$71,764	(\$6,039)	-8%
3	Outpatient Charges	\$169,592	\$403,271	\$233,679	138%
4	Outpatient Payments	\$35,619	\$27,949	(\$7,670)	-22%
5	Discharges	15	22	7	47%
6	Patient Days	68	119	51	75%
7	Outpatient Visits (Excludes ED Visits)	65	128	63	97%
8	Emergency Department Outpatient Visits	66	210	144	218%
9	Emergency Department Inpatient Admissions	14	17	3	21%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$431,234</b>	<b>\$896,411</b>	<b>\$465,177</b>	<b>108%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$113,422</b>	<b>\$99,713</b>	<b>(\$13,709)</b>	<b>-12%</b>
<b>E. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**DANBURY HOSPITAL  
TWELVE MONTHS ACTUAL FILING  
FISCAL YEAR 2011  
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>G. UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$2,831,502	\$2,517,677	(\$313,825)	-11%
2	Inpatient Payments	\$731,337	\$698,170	(\$33,167)	-5%
3	Outpatient Charges	\$4,309,934	\$5,333,463	\$1,023,529	24%
4	Outpatient Payments	\$887,999	\$1,437,884	\$549,885	62%
5	Discharges	172	170	(2)	-1%
6	Patient Days	627	544	(83)	-13%
7	Outpatient Visits (Excludes ED Visits)	1,508	1,693	185	12%
8	Emergency Department Outpatient Visits	1,662	1,801	139	8%
9	Emergency Department Inpatient Admissions	51	41	(10)	-20%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,141,436</b>	<b>\$7,851,140</b>	<b>\$709,704</b>	<b>10%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,619,336</b>	<b>\$2,136,054</b>	<b>\$516,718</b>	<b>32%</b>
	<b>H. AETNA</b>				
1	Inpatient Charges	\$6,727,840	\$7,733,406	\$1,005,566	15%
2	Inpatient Payments	\$1,857,871	\$1,839,594	(\$18,277)	-1%
3	Outpatient Charges	\$12,873,647	\$14,501,126	\$1,627,479	13%
4	Outpatient Payments	\$3,702,440	\$3,571,344	(\$131,096)	-4%
5	Discharges	492	513	21	4%
6	Patient Days	1,667	1,732	65	4%
7	Outpatient Visits (Excludes ED Visits)	4,504	4,600	96	2%
8	Emergency Department Outpatient Visits	4,467	4,546	79	2%
9	Emergency Department Inpatient Admissions	117	116	(1)	-1%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$19,601,487</b>	<b>\$22,234,532</b>	<b>\$2,633,045</b>	<b>13%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$5,560,311</b>	<b>\$5,410,938</b>	<b>(\$149,373)</b>	<b>-3%</b>
	<b>II. TOTAL MEDICAID MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$16,597,039</b>	<b>\$18,059,075</b>	<b>\$1,462,036</b>	<b>9%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$4,450,305</b>	<b>\$4,465,320</b>	<b>\$15,015</b>	<b>0%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$31,924,463</b>	<b>\$34,948,400</b>	<b>\$3,023,937</b>	<b>9%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$8,560,178</b>	<b>\$8,641,406</b>	<b>\$81,228</b>	<b>1%</b>
	<b>TOTAL DISCHARGES</b>	<b>1,121</b>	<b>1,162</b>	<b>41</b>	<b>4%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>3,890</b>	<b>4,051</b>	<b>161</b>	<b>4%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>11,183</b>	<b>11,090</b>	<b>(93)</b>	<b>-1%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>11,386</b>	<b>11,351</b>	<b>(35)</b>	<b>0%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>299</b>	<b>292</b>	<b>(7)</b>	<b>-2%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$48,521,502</b>	<b>\$53,007,475</b>	<b>\$4,485,973</b>	<b>9%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$13,010,483</b>	<b>\$13,106,726</b>	<b>\$96,243</b>	<b>1%</b>

**DANBURY HOSPITAL  
 TWELVE MONTHS ACTUAL FILING  
 FISCAL YEAR 2011  
 REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE

<b>WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2011</b>					
<b>REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010 ACTUAL</b>	<b>FY 2011 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$44,650,227	\$56,787,869	\$12,137,642	27%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$76,702,649	\$74,395,713	(\$2,306,936)	-3%
4	Current Assets Whose Use is Limited for Current Liabilities	\$3,802,296	\$2,780,279	(\$1,022,017)	-27%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$10,833,964	\$12,213,567	\$1,379,603	13%
8	Prepaid Expenses	\$11,787,082	\$16,364,779	\$4,577,697	39%
9	Other Current Assets	\$1,143,377	\$1,768,111	\$624,734	55%
	<b>Total Current Assets</b>	<b>\$148,919,595</b>	<b>\$164,310,318</b>	<b>\$15,390,723</b>	<b>10%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$6,901,020	\$6,439,298	(\$461,722)	-7%
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	\$68,042,366	\$182,369,612	\$114,327,246	168%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$74,943,386</b>	<b>\$188,808,910</b>	<b>\$113,865,524</b>	<b>152%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$234,672,059	\$210,629,807	(\$24,042,252)	-10%
7	Other Noncurrent Assets	\$17,853,747	\$25,794,210	\$7,940,463	44%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$568,174,918	\$627,841,143	\$59,666,225	11%
2	Less: Accumulated Depreciation	\$358,628,526	\$388,704,091	\$30,075,565	\$0
	<b>Property, Plant and Equipment, Net</b>	<b>\$209,546,392</b>	<b>\$239,137,052</b>	<b>\$29,590,660</b>	<b>14%</b>
3	Construction in Progress	\$21,879,446	\$27,578,848	\$5,699,402	26%
	<b>Total Net Fixed Assets</b>	<b>\$231,425,838</b>	<b>\$266,715,900</b>	<b>\$35,290,062</b>	<b>15%</b>
	<b>Total Assets</b>	<b>\$707,814,625</b>	<b>\$856,259,145</b>	<b>\$148,444,520</b>	<b>21%</b>

<b>WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2011</b>					
<b>REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010 ACTUAL</b>	<b>FY 2011 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					
1	Accounts Payable and Accrued Expenses	\$38,370,678	\$41,087,673	\$2,716,995	7%
2	Salaries, Wages and Payroll Taxes	\$24,800,451	\$28,131,050	\$3,330,599	13%
3	Due To Third Party Payers	\$14,882,325	\$15,337,343	\$455,018	3%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$6,455,637	\$3,024,773	(\$3,430,864)	-53%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$30,870,000	\$0	(\$30,870,000)	-100%
	<b>Total Current Liabilities</b>	<b>\$115,379,091</b>	<b>\$87,580,839</b>	<b>(\$27,798,252)</b>	<b>-24%</b>
<b>B. Long Term Debt:</b>					
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$92,471,763	\$253,514,718	\$161,042,955	174%
	<b>Total Long Term Debt</b>	<b>\$92,471,763</b>	<b>\$253,514,718</b>	<b>\$161,042,955</b>	<b>174%</b>
3	Accrued Pension Liability	\$0	\$0	\$0	0%
4	Other Long Term Liabilities	\$189,583,107	\$166,759,146	(\$22,823,961)	-12%
	<b>Total Long Term Liabilities</b>	<b>\$282,054,870</b>	<b>\$420,273,864</b>	<b>\$138,218,994</b>	<b>49%</b>
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
<b>C. Net Assets:</b>					
1	Unrestricted Net Assets or Equity	\$244,887,741	\$286,369,831	\$41,482,090	17%
2	Temporarily Restricted Net Assets	\$33,595,748	\$30,149,404	(\$3,446,344)	-10%
3	Permanently Restricted Net Assets	\$31,897,175	\$31,885,207	(\$11,968)	0%
	<b>Total Net Assets</b>	<b>\$310,380,664</b>	<b>\$348,404,442</b>	<b>\$38,023,778</b>	<b>12%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$707,814,625</b>	<b>\$856,259,145</b>	<b>\$148,444,520</b>	<b>21%</b>

<b>WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2011</b>					
<b>REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>	<b>(6)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010 ACTUAL</b>	<b>FY 2011 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$1,553,240,039	\$1,620,897,693	\$67,657,654	4%
2	Less: Allowances	\$834,830,614	\$884,704,840	\$49,874,226	6%
3	Less: Charity Care	\$16,342,281	\$15,667,675	(\$674,606)	-4%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$702,067,144</b>	<b>\$720,525,178</b>	<b>\$18,458,034</b>	<b>3%</b>
5	Other Operating Revenue	\$12,102,843	\$14,009,110	\$1,906,267	16%
6	Net Assets Released from Restrictions	\$2,790,050	\$3,167,079	\$377,029	14%
	<b>Total Operating Revenue</b>	<b>\$716,960,037</b>	<b>\$737,701,367</b>	<b>\$20,741,330</b>	<b>3%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$331,520,495	\$350,055,265	\$18,534,770	6%
2	Fringe Benefits	\$97,866,909	\$102,484,957	\$4,618,048	5%
3	Physicians Fees	\$7,112,259	\$6,168,576	(\$943,683)	-13%
4	Supplies and Drugs	\$194,663,965	\$200,275,229	\$5,611,264	3%
5	Depreciation and Amortization	\$34,179,238	\$36,236,656	\$2,057,418	6%
6	Bad Debts	\$19,660,897	\$26,465,527	\$6,804,630	35%
7	Interest	\$5,539,104	\$5,333,933	(\$205,171)	-4%
8	Malpractice	\$9,434,195	\$8,742,635	(\$691,560)	-7%
9	Other Operating Expenses	\$1,000	\$10,338,542	\$10,337,542	1033754%
	<b>Total Operating Expenses</b>	<b>\$699,978,062</b>	<b>\$746,101,320</b>	<b>\$46,123,258</b>	<b>7%</b>
	<b>Income/(Loss) From Operations</b>	<b>\$16,981,975</b>	<b>(\$8,399,953)</b>	<b>(\$25,381,928)</b>	<b>-149%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$7,650,146	\$9,355,429	\$1,705,283	22%
2	Gifts, Contributions and Donations	\$3,404,377	\$3,166,972	(\$237,405)	-7%
3	Other Non-Operating Gains/(Losses)	\$10,722,195	(\$6,929,617)	(\$17,651,812)	-165%
	<b>Total Non-Operating Revenue</b>	<b>\$21,776,718</b>	<b>\$5,592,784</b>	<b>(\$16,183,934)</b>	<b>-74%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>\$38,758,693</b>	<b>(\$2,807,169)</b>	<b>(\$41,565,862)</b>	<b>-107%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>\$38,758,693</b>	<b>(\$2,807,169)</b>	<b>(\$41,565,862)</b>	<b>-107%</b>

<b>WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2009</b>	<b>FY 2010</b>	<b>FY 2011</b>
<b>A. Parent Corporation Statement of Operations Summary</b>				
1	Net Patient Revenue	\$500,116,851	\$702,067,144	\$720,525,178
2	Other Operating Revenue	12,259,910	14,892,893	17,176,189
3	Total Operating Revenue	\$512,376,761	\$716,960,037	\$737,701,367
4	Total Operating Expenses	486,012,841	699,978,062	746,101,320
5	Income/(Loss) From Operations	\$26,363,920	\$16,981,975	(\$8,399,953)
6	Total Non-Operating Revenue	11,775,650	21,776,718	5,592,784
7	Excess/(Deficiency) of Revenue Over Expenses	\$38,139,570	\$38,758,693	(\$2,807,169)
<b>B. Parent Corporation Profitability Summary</b>				
1	Parent Corporation Operating Margin	5.03%	2.30%	-1.13%
2	Parent Corporation Non-Operating Margin	2.25%	2.95%	0.75%
3	Parent Corporation Total Margin	7.28%	5.25%	-0.38%
4	Income/(Loss) From Operations	\$26,363,920	\$16,981,975	(\$8,399,953)
5	Total Operating Revenue	\$512,376,761	\$716,960,037	\$737,701,367
6	Total Non-Operating Revenue	\$11,775,650	\$21,776,718	\$5,592,784
7	Total Revenue	\$524,152,411	\$738,736,755	\$743,294,151
8	Excess/(Deficiency) of Revenue Over Expenses	\$38,139,570	\$38,758,693	(\$2,807,169)
<b>C. Parent Corporation Net Assets Summary</b>				
1	Parent Corporation Unrestricted Net Assets	\$183,488,285	\$244,887,741	\$286,369,831
2	Parent Corporation Total Net Assets	\$239,197,827	\$310,380,664	\$348,404,442
3	Parent Corporation Change in Total Net Assets	(\$50,206,909)	\$71,182,837	\$38,023,778
4	Parent Corporation Change in Total Net Assets %	82.7%	29.8%	12.3%

<b>WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2009</b>	<b>FY 2010</b>	<b>FY 2011</b>
	<b>D. <u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>2.00</b>	<b>1.29</b>	<b>1.88</b>
2	Total Current Assets	\$122,696,843	\$148,919,595	\$164,310,318
3	Total Current Liabilities	\$61,338,167	\$115,379,091	\$87,580,839
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>37</b>	<b>24</b>	<b>29</b>
5	Cash and Cash Equivalents	\$46,525,880	\$44,650,227	\$56,787,869
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$46,525,880	\$44,650,227	\$56,787,869
8	Total Operating Expenses	\$486,012,841	\$699,978,062	\$746,101,320
9	Depreciation Expense	\$25,227,586	\$34,179,238	\$36,236,656
10	Operating Expenses less Depreciation Expense	\$460,785,255	\$665,798,824	\$709,864,664
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>27</b>	<b>32</b>	<b>30</b>
12	Net Patient Accounts Receivable	\$ 45,303,281	\$ 76,702,649	\$ 74,395,713
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$8,795,411	\$14,882,325	\$15,337,343
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 36,507,870	\$ 61,820,324	\$ 59,058,370
16	Total Net Patient Revenue	\$500,116,851	\$702,067,144	\$720,525,178
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>49</b>	<b>63</b>	<b>45</b>
18	Total Current Liabilities	\$61,338,167	\$115,379,091	\$87,580,839
19	Total Operating Expenses	\$486,012,841	\$699,978,062	\$746,101,320
20	Depreciation Expense	\$25,227,586	\$34,179,238	\$36,236,656
21	Total Operating Expenses less Depreciation Expense	\$460,785,255	\$665,798,824	\$709,864,664

<b>WESTERN CONNECTICUT HEALTH NETWORK, INC. (FORMERLY WESTERN CONNECTICUT HEALTHCARE, INC.)</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2009</b>	<b>FY 2010</b>	<b>FY 2011</b>
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>41.0</b>	<b>43.9</b>	<b>40.7</b>
2	Total Net Assets	\$239,197,827	\$310,380,664	\$348,404,442
3	Total Assets	\$583,772,372	\$707,814,625	\$856,259,145
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>35.0</b>	<b>35.1</b>	<b>9.8</b>
5	Excess/(Deficiency) of Revenues Over Expenses	\$38,139,570	\$38,758,693	(\$2,807,169)
6	Depreciation Expense	\$25,227,586	\$34,179,238	\$36,236,656
7	Excess of Revenues Over Expenses and Depreciation Expense	\$63,367,156	\$72,937,931	\$33,429,487
8	Total Current Liabilities	\$61,338,167	\$115,379,091	\$87,580,839
9	Total Long Term Debt	\$119,676,912	\$92,471,763	\$253,514,718
10	Total Current Liabilities and Total Long Term Debt	\$181,015,079	\$207,850,854	\$341,095,557
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>33.3</b>	<b>23.0</b>	<b>42.1</b>
12	Total Long Term Debt	\$119,676,912	\$92,471,763	\$253,514,718
13	Total Net Assets	\$239,197,827	\$310,380,664	\$348,404,442
14	Total Long Term Debt and Total Net Assets	\$358,874,739	\$402,852,427	\$601,919,160

DANBURY HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2011								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
<u>LINE</u>	<u>DESCRIPTION</u>	<u>DAYS</u>	<u># PATIENT</u>		<u>BEDS (A)</u>	<u>BEDS</u>	<u>BEDS (A)</u>	<u>BEDS</u>
1	Adult Medical/Surgical	66,698	15,273	13,569	191	227	95.7%	80.5%
2	ICU/CCU (Excludes Neonatal ICU)	4,048	159	0	13	30	85.3%	37.0%
3	Psychiatric: Ages 0 to 17	53	14	14	1	1	14.5%	14.5%
4	Psychiatric: Ages 18+	6,217	732	726	18	22	94.6%	77.4%
	<b>TOTAL PSYCHIATRIC</b>	<b>6,270</b>	<b>746</b>	<b>740</b>	<b>19</b>	<b>23</b>	<b>90.4%</b>	<b>74.7%</b>
5	Rehabilitation	4,291	295	294	13	14	90.4%	84.0%
6	Maternity	6,322	2,104	2,106	20	32	86.6%	54.1%
7	Newborn	4,748	1,851	1,851	15	26	86.7%	50.0%
8	Neonatal ICU	3,712	205	0	12	15	84.7%	67.8%
9	Pediatric	574	289	286	3	4	52.4%	39.3%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>91,915</b>	<b>18,912</b>	<b>16,995</b>	<b>271</b>	<b>345</b>	<b>92.9%</b>	<b>73.0%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>96,663</b>	<b>20,763</b>	<b>18,846</b>	<b>286</b>	<b>371</b>	<b>92.6%</b>	<b>71.4%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>96,663</b>	<b>20,763</b>	<b>18,846</b>	<b>286</b>	<b>371</b>	<b>92.6%</b>	<b>71.4%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>95,884</b>	<b>0</b>	<b>0</b>	<b>278</b>	<b>365</b>	<b>94.5%</b>	<b>72.0%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>779</b>	<b>20,763</b>	<b>18,846</b>	<b>8</b>	<b>6</b>	<b>-1.9%</b>	<b>-0.6%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>	<b>3%</b>	<b>2%</b>	<b>-2%</b>	<b>-1%</b>
	Total Licensed Beds and Bassinets	371						
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>								

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	11,998	12,277	279	2%
2	Outpatient Scans (Excluding Emergency Department Scans)	13,625	13,597	-28	0%
3	Emergency Department Scans	11,040	10,103	-937	-8%
4	Other Non-Hospital Providers' Scans (A)	8,814	6,793	-2,021	-23%
	<b>Total CT Scans</b>	<b>45,477</b>	<b>42,770</b>	<b>-2,707</b>	<b>-6%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	1,413	1,309	-104	-7%
2	Outpatient Scans (Excluding Emergency Department Scans)	6,897	6,963	66	1%
3	Emergency Department Scans	163	157	-6	-4%
4	Other Non-Hospital Providers' Scans (A)	6,554	6,606	52	1%
	<b>Total MRI Scans</b>	<b>15,027</b>	<b>15,035</b>	<b>8</b>	<b>0%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	5	5	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	167	183	16	10%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>167</b>	<b>188</b>	<b>21</b>	<b>13%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	7	8	1	14%
2	Outpatient Scans (Excluding Emergency Department Scans)	567	663	96	17%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>574</b>	<b>671</b>	<b>97</b>	<b>17%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	479	322	-157	-33%
2	Outpatient Procedures	10,168	11,654	1,486	15%
	<b>Total Linear Accelerator Procedures</b>	<b>10,647</b>	<b>11,976</b>	<b>1,329</b>	<b>12%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	871	856	-15	-2%
2	Outpatient Procedures	800	856	56	7%
	<b>Total Cardiac Catheterization Procedures</b>	<b>1,671</b>	<b>1,712</b>	<b>41</b>	<b>2%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	100	107	7	7%
2	Elective Procedures	305	318	13	4%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>405</b>	<b>425</b>	<b>20</b>	<b>5%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	19	24	5	26%
2	Outpatient Studies	100	115	15	15%
	<b>Total Electrophysiology Studies</b>	<b>119</b>	<b>139</b>	<b>20</b>	<b>17%</b>
<b>I. Surgical Procedures</b>					
1	Inpatient Surgical Procedures	4,625	4,442	-183	-4%
2	Outpatient Surgical Procedures	7,615	7,776	161	2%
	<b>Total Surgical Procedures</b>	<b>12,240</b>	<b>12,218</b>	<b>-22</b>	<b>0%</b>
<b>J. Endoscopy Procedures</b>					

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	834	909	75	9%
2	Outpatient Endoscopy Procedures	9,891	9,777	-114	-1%
	<b>Total Endoscopy Procedures</b>	<b>10,725</b>	<b>10,686</b>	<b>-39</b>	<b>0%</b>
	<b>K. Hospital Emergency Room Visits</b>				
1	Emergency Room Visits: Treated and Admitted	14,124	14,603	479	3%
2	Emergency Room Visits: Treated and Discharged	56,136	54,992	-1,144	-2%
	<b>Total Emergency Room Visits</b>	<b>70,260</b>	<b>69,595</b>	<b>-665</b>	<b>-1%</b>
	<b>L. Hospital Clinic Visits</b>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	12,450	12,421	-29	0%
3	Psychiatric Clinic Visits	21,803	20,411	-1,392	-6%
4	Medical Clinic Visits	39,551	45,970	6,419	16%
5	Specialty Clinic Visits	3,067	2,569	-498	-16%
	<b>Total Hospital Clinic Visits</b>	<b>76,871</b>	<b>81,371</b>	<b>4,500</b>	<b>6%</b>
	<b>M. Other Hospital Outpatient Visits</b>				
1	Rehabilitation (PT/OT/ST)	41,425	42,519	1,094	3%
2	Cardiology	6,715	6,501	-214	-3%
3	Chemotherapy	2,931	2,931	0	0%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	0	0	0	0%
	<b>Total Other Hospital Outpatient Visits</b>	<b>51,071</b>	<b>51,951</b>	<b>880</b>	<b>2%</b>
	<b>N. Hospital Full Time Equivalent Employees</b>				
1	Total Nursing FTEs	564.3	572.3	8.0	1%
2	Total Physician FTEs	87.4	97.8	10.4	12%
3	Total Non-Nursing and Non-Physician FTEs	1,841.1	1,871.2	30.1	2%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>2,492.8</b>	<b>2,541.3</b>	<b>48.5</b>	<b>2%</b>

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Outpatient Surgical Procedures</b>					
1	Hospital	7,615	7,776	161	2%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>7,615</b>	<b>7,776</b>	<b>161</b>	<b>2%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Hospital	9,891	9,777	-114	-1%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>9,891</b>	<b>9,777</b>	<b>-114</b>	<b>-1%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	Hospital	56,136	54,992	-1,144	-2%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>56,136</b>	<b>54,992</b>	<b>-1,144</b>	<b>-2%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$262,457,541	\$291,864,516	\$29,406,975	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$90,713,748	\$98,949,663	\$8,235,915	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	34.56%	33.90%	-0.66%	-2%
4	DISCHARGES	8,917	9,495	578	6%
5	CASE MIX INDEX (CMI)	1.34850	1.33280	(0.01570)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	12,024,57450	12,654,93600	630,36150	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,544.03	\$7,819.06	\$275.03	4%
8	PATIENT DAYS	49,996	52,749	2,753	6%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,814.42	\$1,875.86	\$61.44	3%
10	AVERAGE LENGTH OF STAY	5.6	5.6	(0.1)	-1%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$189,128,726	\$198,092,097	\$8,963,371	5%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$65,361,297	\$67,074,143	\$1,712,846	3%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	34.56%	33.86%	-0.70%	-2%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	72.06%	67.87%	-4.19%	-6%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,425.65210	6,444.37524	18,72314	0%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$10,171.93	\$10,408.17	\$236.24	2%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$451,586,267	\$489,956,613	\$38,370,346	8%
18	TOTAL ACCRUED PAYMENTS	\$156,075,045	\$166,023,806	\$9,948,761	6%
19	TOTAL ALLOWANCES	\$295,511,222	\$323,932,807	\$28,421,585	10%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$197,098,422	\$190,380,782	(\$6,717,640)	-3%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$116,901,612	\$112,612,777	(\$4,288,835)	-4%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	59.31%	59.15%	-0.16%	0%
4	DISCHARGES	8,752	8,068	(684)	-8%
5	CASE MIX INDEX (CMI)	1.16140	1.19520	0.03380	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	10,164.57280	9,642.87360	(521.69920)	-5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,500.89	\$11,678.34	\$177.45	2%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$3,956.86)	(\$3,859.29)	\$97.57	-2%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$40,219,772)	(\$37,214,601)	\$3,005,171	-7%
10	PATIENT DAYS	32,965	30,391	(2,574)	-8%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,546.23	\$3,705.46	\$159.23	4%
12	AVERAGE LENGTH OF STAY	3.8	3.8	0.0	0%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$279,872,948	\$302,829,736	\$22,956,788	8%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$161,524,726	\$171,413,135	\$9,888,409	6%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	57.71%	56.60%	-1.11%	-2%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	142.00%	159.07%	17.07%	12%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	12,427.53755	12,833.38730	405.84975	3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$12,997.32	\$13,356.81	\$359.49	3%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$2,825.39)	(\$2,948.64)	(\$123.25)	4%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$35,112,658)	(\$37,841,078)	(\$2,728,421)	8%
<b>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</b>					
21	TOTAL ACCRUED CHARGES	\$476,971,370	\$493,210,518	\$16,239,148	3%
22	TOTAL ACCRUED PAYMENTS	\$278,426,338	\$284,025,912	\$5,599,574	2%
23	TOTAL ALLOWANCES	\$198,545,032	\$209,184,606	\$10,639,574	5%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$75,332,430)	(\$75,055,679)	\$276,751	0%
<b>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$427,508,232	\$440,484,262	\$12,976,030	3%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$264,490,798	\$274,413,100	\$9,922,302	4%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$163,017,434	\$166,071,162	\$3,053,728	2%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	38.13%	37.70%	-0.43%	

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<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>AMOUNT</b>	<b>%</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2010</b>	<b>FY 2011</b>	<b>DIFFERENCE</b>	<b>DIFFERENCE</b>
<b>C.</b>	<b><u>UNINSURED</u></b>				
	<b><u>UNINSURED INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$6,593,905	\$5,413,243	(\$1,180,662)	-18%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,946,025	\$613,179	(\$1,332,846)	-68%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.51%	11.33%	-18.19%	-62%
4	DISCHARGES	298	248	(50)	-17%
5	CASE MIX INDEX (CMI)	1.24160	1.21530	(0.02630)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	369.99680	301.39440	(68.60240)	-19%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,259.57	\$2,034.47	(\$3,225.10)	-61%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,241.32	\$9,643.87	\$3,402.55	55%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$2,284.46	\$5,784.58	\$3,500.13	153%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$845,242	\$1,743,441	\$898,199	106%
11	PATIENT DAYS	1,120	960	(160)	-14%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,737.52	\$638.73	(\$1,098.79)	-63%
13	AVERAGE LENGTH OF STAY	3.8	3.9	0.1	3%
	<b><u>UNINSURED OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$20,616,388	\$22,935,833	\$2,319,445	11%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,084,409	\$2,598,031	(\$3,486,378)	-57%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.51%	11.33%	-18.19%	-62%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	312.66%	423.70%	111.04%	36%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	931.72159	1,050.77245	119.05086	13%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,530.29	\$2,472.50	(\$4,057.79)	-62%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$6,467.04	\$10,884.32	\$4,417.28	68%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,641.65	\$7,935.67	\$4,294.03	118%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,393,000	\$8,338,586	\$4,945,586	146%
	<b><u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$27,210,293	\$28,349,076	\$1,138,783	4%
24	TOTAL ACCRUED PAYMENTS	\$8,030,434	\$3,211,210	(\$4,819,224)	-60%
25	TOTAL ALLOWANCES	\$19,179,859	\$25,137,866	\$5,958,007	31%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,238,242	\$10,082,027	\$5,843,785	138%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$46,325,316	\$59,876,239	\$13,550,923	29%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,179,472	\$14,451,349	\$271,877	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.61%	24.14%	-6.47%	-21%
4	DISCHARGES	2,727	3,069	342	13%
5	CASE MIX INDEX (CMI)	0.86580	1.03140	0.16560	19%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,361.03660	3,165.36660	804.33000	34%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,005.61	\$4,565.46	(\$1,440.15)	-24%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$5,495.27	\$7,112.88	\$1,617.61	29%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,538.42	\$3,253.60	\$1,715.18	111%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,632,258	\$10,298,832	\$6,666,574	184%
11	PATIENT DAYS	11,440	12,889	1,449	13%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,239.46	\$1,121.22	(\$118.25)	-10%
13	AVERAGE LENGTH OF STAY	4.2	4.2	0.0	0%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$52,199,740	\$66,075,838	\$13,876,098	27%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$13,407,997	\$16,175,876	\$2,767,879	21%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.69%	24.48%	-1.21%	-5%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	112.68%	110.35%	-2.33%	-2%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,072.80561	3,386.76494	313.95933	10%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,363.44	\$4,776.20	\$412.76	9%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$8,633.89	\$8,580.61	(\$53.28)	-1%
21	MEDICARE - MEDICAID OP PMT / OPED	\$5,808.49	\$5,631.97	(\$176.53)	-3%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$17,848,373	\$19,074,144	\$1,225,771	7%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$98,525,056	\$125,952,077	\$27,427,021	28%
24	TOTAL ACCRUED PAYMENTS	\$27,587,469	\$30,627,225	\$3,039,756	11%
25	TOTAL ALLOWANCES	\$70,937,587	\$95,324,852	\$24,387,265	34%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$21,480,632	\$29,372,976	\$7,892,345	37%

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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
<b>E.</b>	<b><u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u></b>				
	<b><u>OTHER MEDICAL ASSISTANCE INPATIENT</u></b>				
1	INPATIENT ACCRUED CHARGES	\$5,792,020	\$1,572,425	(\$4,219,595)	-73%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$535,705	\$286,024	(\$249,681)	-47%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	9.25%	18.19%	8.94%	97%
4	DISCHARGES	290	97	(193)	-67%
5	CASE MIX INDEX (CMI)	1.04770	0.91510	(0.13260)	-13%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	303.83300	88.76470	(215.06830)	-71%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,763.16	\$3,222.27	\$1,459.12	83%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$9,737.73	\$8,456.07	(\$1,281.66)	-13%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$5,780.87	\$4,596.78	(\$1,184.09)	-20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,756,420	\$408,032	(\$1,348,388)	-77%
11	PATIENT DAYS	1,257	537	(720)	-57%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$426.18	\$532.63	\$106.46	25%
13	AVERAGE LENGTH OF STAY	4.3	5.5	1.2	28%
	<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$7,883,776	\$1,132,327	(\$6,751,449)	-86%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$995,364	\$284,556	(\$710,808)	-71%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	12.63%	25.13%	12.50%	99%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	136.11%	72.01%	-64.10%	-47%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	394.73190	69.85117	(324.88073)	-82%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,521.62	\$4,073.75	\$1,552.13	62%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$10,475.70	\$9,283.06	(\$1,192.64)	-11%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$7,650.31	\$6,334.42	(\$1,315.89)	-17%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,019,822	\$442,467	(\$2,577,355)	-85%
	<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>				
23	TOTAL ACCRUED CHARGES	\$13,675,796	\$2,704,752	(\$10,971,044)	-80%
24	TOTAL ACCRUED PAYMENTS	\$1,531,069	\$570,580	(\$960,489)	-63%
25	TOTAL ALLOWANCES	\$12,144,727	\$2,134,172	(\$10,010,555)	-82%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$4,776,242	\$850,499	(\$3,925,743)	-82%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>					
<b>TOTAL MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$52,117,336	\$61,448,664	\$9,331,328	18%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,715,177	\$14,737,373	\$22,196	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	28.23%	23.98%	-4.25%	-15%
4	DISCHARGES	3,017	3,166	149	5%
5	CASE MIX INDEX (CMI)	0.88328	1.02784	0.14455	16%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,664.86960	3,254.13130	589.26170	22%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,521.91	\$4,528.82	(\$993.09)	-18%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$5,978.98	\$7,149.52	\$1,170.55	20%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,022.12	\$3,290.24	\$1,268.12	63%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,388,679	\$10,706,864	\$5,318,186	99%
11	PATIENT DAYS	12,697	13,426	729	6%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,158.95	\$1,097.67	(\$61.27)	-5%
13	AVERAGE LENGTH OF STAY	4.2	4.2	0.0	1%
<b>TOTAL MEDICAL ASSISTANCE OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$60,083,516	\$67,208,165	\$7,124,649	12%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,403,361	\$16,460,432	\$2,057,071	14%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.97%	24.49%	0.52%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	115.29%	109.37%	-5.91%	-5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,467.53751	3,456.61610	(10.92141)	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,153.77	\$4,762.01	\$608.24	15%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$8,843.55	\$8,594.80	(\$248.75)	-3%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,018.16	\$5,646.16	(\$372.00)	-6%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$20,868,195	\$19,516,611	(\$1,351,585)	-6%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$112,200,852	\$128,656,829	\$16,455,977	15%
24	TOTAL ACCRUED PAYMENTS	\$29,118,538	\$31,197,805	\$2,079,267	7%
25	TOTAL ALLOWANCES	\$83,082,314	\$97,459,024	\$14,376,710	17%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$1,250,805	\$632,468	(\$618,337)	-49%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$436,158	\$199,476	(\$236,682)	-54%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	34.87%	31.54%	-3.33%	-10%
4	DISCHARGES	29	34	5	17%
5	CASE MIX INDEX (CMI)	0.90860	0.90150	(0.00710)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	26.34940	30.65100	4.30160	16%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$16,552.86	\$6,507.98	(\$10,044.89)	-61%
8	PATIENT DAYS	226	97	(129)	-57%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,929.90	\$2,056.45	\$126.55	7%
10	AVERAGE LENGTH OF STAY	7.8	2.9	(4.9)	-63%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$805,622	\$696,661	(\$108,961)	-14%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$170,926	\$162,850	(\$8,076)	-5%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$2,056,427	\$1,329,129	(\$727,298)	-35%
14	TOTAL ACCRUED PAYMENTS	\$607,084	\$362,326	(\$244,758)	-40%
15	TOTAL ALLOWANCES	\$1,449,343	\$966,803	(\$482,540)	-33%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$7,515,933	\$11,802,461	\$4,286,528	57%
2	TOTAL OPERATING EXPENSES	\$460,314,702	\$495,471,968	\$35,157,266	8%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$2,277,658	\$0	(\$2,277,658)	-100%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$12,767,832	\$11,359,623	(\$1,408,209)	-11%
5	BAD DEBTS (CHARGES)	\$10,687,109	\$18,183,085	\$7,495,976	70%
6	UNCOMPENSATED CARE (CHARGES)	\$23,454,941	\$29,542,708	\$6,087,767	26%
7	COST OF UNCOMPENSATED CARE	\$10,460,001	\$12,756,105	\$2,296,104	22%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$112,200,852	\$128,656,829	\$16,455,977	15%
9	TOTAL ACCRUED PAYMENTS	\$29,118,538	\$31,197,805	\$2,079,267	7%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$50,037,262	\$55,552,117	\$5,514,855	11%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$20,918,724	\$24,354,312	\$3,435,588	16%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$512,924,104	\$544,326,430	\$31,402,326	6%
2	TOTAL INPATIENT PAYMENTS	\$222,766,695	\$226,499,289	\$3,732,594	2%
3	TOTAL INPATIENT PAYMENTS / CHARGES	43.43%	41.61%	-1.82%	-4%
4	TOTAL DISCHARGES	20,715	20,763	48	0%
5	TOTAL CASE MIX INDEX	1.20108	1.23212	0.03104	3%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	24,880,36630	25,582,59190	702,22560	3%
7	TOTAL OUTPATIENT CHARGES	\$529,890,812	\$568,826,659	\$38,935,847	7%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	103.31%	104.50%	1.19%	1%
9	TOTAL OUTPATIENT PAYMENTS	\$241,460,310	\$255,110,560	\$13,650,250	6%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	45.57%	44.85%	-0.72%	-2%
11	TOTAL CHARGES	\$1,042,814,916	\$1,113,153,089	\$70,338,173	7%
12	TOTAL PAYMENTS	\$464,227,005	\$481,609,849	\$17,382,844	4%
13	TOTAL PAYMENTS / TOTAL CHARGES	44.52%	43.27%	-1.25%	-3%
14	PATIENT DAYS	95,884	96,663	779	1%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$315,825,682	\$353,945,648	\$38,119,966	12%
2	INPATIENT PAYMENTS	\$105,865,083	\$113,886,512	\$8,021,429	8%
3	GOVT. INPATIENT PAYMENTS / CHARGES	33.52%	32.18%	-1.34%	-4%
4	DISCHARGES	11,963	12,695	732	6%
5	CASE MIX INDEX	1.23011	1.25559	0.02548	2%
6	CASE MIX ADJUSTED DISCHARGES	14,715.79350	15,939.71830	1,223.92480	8%
7	OUTPATIENT CHARGES	\$250,017,864	\$265,996,923	\$15,979,059	6%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	79.16%	75.15%	-4.01%	-5%
9	OUTPATIENT PAYMENTS	\$79,935,584	\$83,697,425	\$3,761,841	5%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.97%	31.47%	-0.51%	-2%
11	TOTAL CHARGES	\$565,843,546	\$619,942,571	\$54,099,025	10%
12	TOTAL PAYMENTS	\$185,800,667	\$197,583,937	\$11,783,270	6%
13	TOTAL PAYMENTS / CHARGES	32.84%	31.87%	-0.96%	-3%
14	PATIENT DAYS	62,919	66,272	3,353	5%
15	TOTAL GOVERNMENT DEDUCTIONS	\$380,042,879	\$422,358,634	\$42,315,755	11%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	5.6	5.6	(0.1)	-1%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.8	3.8	0.0	0%
3	UNINSURED	3.8	3.9	0.1	3%
4	MEDICAID	4.2	4.2	0.0	0%
5	OTHER MEDICAL ASSISTANCE	4.3	5.5	1.2	28%
6	CHAMPUS / TRICARE	7.8	2.9	(4.9)	-63%
7	TOTAL AVERAGE LENGTH OF STAY	4.6	4.7	0.0	1%

DANBURY HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$1,042,814,916	\$1,113,153,089	\$70,338,173	7%
2	TOTAL GOVERNMENT DEDUCTIONS	\$380,042,879	\$422,358,634	\$42,315,755	11%
3	UNCOMPENSATED CARE	\$23,454,941	\$29,542,708	\$6,087,767	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$163,017,434	\$166,071,162	\$3,053,728	2%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$13,522,001	\$14,537,538	\$1,015,537	8%
6	TOTAL ADJUSTMENTS	\$580,037,255	\$632,510,042	\$52,472,787	9%
7	TOTAL ACCRUED PAYMENTS	\$462,777,661	\$480,643,047	\$17,865,386	4%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$2,277,658	\$0	(\$2,277,658)	-100%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$465,055,319	\$480,643,047	\$15,587,728	3%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4459615142	0.4317852160	(0.0141762982)	-3%
11	COST OF UNCOMPENSATED CARE	\$10,460,001	\$12,756,105	\$2,296,104	22%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$20,918,724	\$24,354,312	\$3,435,588	16%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$31,378,725	\$37,110,416	\$5,731,691	18%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$17,848,373	\$19,074,144	\$1,225,771	7%
2	OTHER MEDICAL ASSISTANCE	\$4,776,242	\$850,499	(\$3,925,743)	-82%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,238,242	\$10,082,027	\$5,843,785	138%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$26,862,857	\$30,006,669	\$3,143,812	12%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,462,733	\$24,904,012	\$1,441,279	6.14%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$6,793,719	\$16,110,641	\$9,316,922	137.14%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$473,298,383	\$497,720,490	\$24,422,107	5.16%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,042,814,916	\$1,113,153,089	\$70,338,173	6.75%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$23,454,941	\$29,542,708	\$6,087,767	25.96%

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>AMOUNT DIFFERENCE</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$197,098,422	\$190,380,782	(\$6,717,640)
2	MEDICARE	\$262,457,541	291,864,516	\$29,406,975
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$52,117,336	61,448,664	\$9,331,328
4	MEDICAID	\$46,325,316	59,876,239	\$13,550,923
5	OTHER MEDICAL ASSISTANCE	\$5,792,020	1,572,425	(\$4,219,595)
6	CHAMPUS / TRICARE	\$1,250,805	632,468	(\$618,337)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,593,905	5,413,243	(\$1,180,662)
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$315,825,682</b>	<b>\$353,945,648</b>	<b>\$38,119,966</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$512,924,104</b>	<b>\$544,326,430</b>	<b>\$31,402,326</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$279,872,948	\$302,829,736	\$22,956,788
2	MEDICARE	\$189,128,726	198,092,097	\$8,963,371
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$60,083,516	67,208,165	\$7,124,649
4	MEDICAID	\$52,199,740	66,075,838	\$13,876,098
5	OTHER MEDICAL ASSISTANCE	\$7,883,776	1,132,327	(\$6,751,449)
6	CHAMPUS / TRICARE	\$805,622	696,661	(\$108,961)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$20,616,388	22,935,833	\$2,319,445
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$250,017,864</b>	<b>\$265,996,923</b>	<b>\$15,979,059</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$529,890,812</b>	<b>\$568,826,659</b>	<b>\$38,935,847</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$476,971,370	\$493,210,518	\$16,239,148
2	TOTAL MEDICARE	\$451,586,267	\$489,956,613	\$38,370,346
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$112,200,852	\$128,656,829	\$16,455,977
4	TOTAL MEDICAID	\$98,525,056	\$125,952,077	\$27,427,021
5	TOTAL OTHER MEDICAL ASSISTANCE	\$13,675,796	\$2,704,752	(\$10,971,044)
6	TOTAL CHAMPUS / TRICARE	\$2,056,427	\$1,329,129	(\$727,298)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$27,210,293	\$28,349,076	\$1,138,783
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$565,843,546</b>	<b>\$619,942,571</b>	<b>\$54,099,025</b>
	<b>TOTAL CHARGES</b>	<b>\$1,042,814,916</b>	<b>\$1,113,153,089</b>	<b>\$70,338,173</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$116,901,612	\$112,612,777	(\$4,288,835)
2	MEDICARE	\$90,713,748	98,949,663	\$8,235,915
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,715,177	14,737,373	\$22,196
4	MEDICAID	\$14,179,472	14,451,349	\$271,877
5	OTHER MEDICAL ASSISTANCE	\$535,705	286,024	(\$249,681)
6	CHAMPUS / TRICARE	\$436,158	199,476	(\$236,682)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,946,025	613,179	(\$1,332,846)
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$105,865,083</b>	<b>\$113,886,512</b>	<b>\$8,021,429</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$222,766,695</b>	<b>\$226,499,289</b>	<b>\$3,732,594</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$161,524,726	\$171,413,135	\$9,888,409
2	MEDICARE	\$65,361,297	67,074,143	\$1,712,846
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,403,361	16,460,432	\$2,057,071
4	MEDICAID	\$13,407,997	16,175,876	\$2,767,879
5	OTHER MEDICAL ASSISTANCE	\$995,364	284,556	(\$710,808)
6	CHAMPUS / TRICARE	\$170,926	162,850	(\$8,076)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,084,409	2,598,031	(\$3,486,378)
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$79,935,584</b>	<b>\$83,697,425</b>	<b>\$3,761,841</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$241,460,310</b>	<b>\$255,110,560</b>	<b>\$13,650,250</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$278,426,338	\$284,025,912	\$5,599,574
2	TOTAL MEDICARE	\$156,075,045	\$166,023,806	\$9,948,761
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$29,118,538	\$31,197,805	\$2,079,267
4	TOTAL MEDICAID	\$27,587,469	\$30,627,225	\$3,039,756
5	TOTAL OTHER MEDICAL ASSISTANCE	\$1,531,069	\$570,580	(\$960,489)
6	TOTAL CHAMPUS / TRICARE	\$607,084	\$362,326	(\$244,758)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,030,434	\$3,211,210	(\$4,819,224)
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$185,800,667</b>	<b>\$197,583,937</b>	<b>\$11,783,270</b>
	<b>TOTAL PAYMENTS</b>	<b>\$464,227,005</b>	<b>\$481,609,849</b>	<b>\$17,382,844</b>

<b>DANBURY HOSPITAL</b>				
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<b>FISCAL YEAR 2011</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>AMOUNT DIFFERENCE</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.90%	17.10%	-1.80%
2	MEDICARE	25.17%	26.22%	1.05%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.00%	5.52%	0.52%
4	MEDICAID	4.44%	5.38%	0.94%
5	OTHER MEDICAL ASSISTANCE	0.56%	0.14%	-0.41%
6	CHAMPUS / TRICARE	0.12%	0.06%	-0.06%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.63%	0.49%	-0.15%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>30.29%</b>	<b>31.80%</b>	<b>1.51%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>49.19%</b>	<b>48.90%</b>	<b>-0.29%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.84%	27.20%	0.37%
2	MEDICARE	18.14%	17.80%	-0.34%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.76%	6.04%	0.28%
4	MEDICAID	5.01%	5.94%	0.93%
5	OTHER MEDICAL ASSISTANCE	0.76%	0.10%	-0.65%
6	CHAMPUS / TRICARE	0.08%	0.06%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.98%	2.06%	0.08%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>23.98%</b>	<b>23.90%</b>	<b>-0.08%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>50.81%</b>	<b>51.10%</b>	<b>0.29%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.18%	23.38%	-1.80%
2	MEDICARE	19.54%	20.55%	1.00%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.17%	3.06%	-0.11%
4	MEDICAID	3.05%	3.00%	-0.05%
5	OTHER MEDICAL ASSISTANCE	0.12%	0.06%	-0.06%
6	CHAMPUS / TRICARE	0.09%	0.04%	-0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%	0.13%	-0.29%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>22.80%</b>	<b>23.65%</b>	<b>0.84%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>47.99%</b>	<b>47.03%</b>	<b>-0.96%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.79%	35.59%	0.80%
2	MEDICARE	14.08%	13.93%	-0.15%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.10%	3.42%	0.32%
4	MEDICAID	2.89%	3.36%	0.47%
5	OTHER MEDICAL ASSISTANCE	0.21%	0.06%	-0.16%
6	CHAMPUS / TRICARE	0.04%	0.03%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.31%	0.54%	-0.77%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>17.22%</b>	<b>17.38%</b>	<b>0.16%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>52.01%</b>	<b>52.97%</b>	<b>0.96%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>

<b>DANBURY HOSPITAL</b>				
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<b>FISCAL YEAR 2011</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE DESCRIPTION</b>		<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>AMOUNT DIFFERENCE</b>
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,752	8,068	(684)
2	MEDICARE	8,917	9,495	578
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,017	3,166	149
4	MEDICAID	2,727	3,069	342
5	OTHER MEDICAL ASSISTANCE	290	97	(193)
6	CHAMPUS / TRICARE	29	34	5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	298	248	(50)
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>11,963</b>	<b>12,695</b>	<b>732</b>
	<b>TOTAL DISCHARGES</b>	<b>20,715</b>	<b>20,763</b>	<b>48</b>
<b>B. PATIENT DAYS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32,965	30,391	(2,574)
2	MEDICARE	49,996	52,749	2,753
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12,697	13,426	729
4	MEDICAID	11,440	12,889	1,449
5	OTHER MEDICAL ASSISTANCE	1,257	537	(720)
6	CHAMPUS / TRICARE	226	97	(129)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,120	960	(160)
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>62,919</b>	<b>66,272</b>	<b>3,353</b>
	<b>TOTAL PATIENT DAYS</b>	<b>95,884</b>	<b>96,663</b>	<b>779</b>
<b>C. AVERAGE LENGTH OF STAY (ALOS)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.8	3.8	0.0
2	MEDICARE	5.6	5.6	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.2	4.2	0.0
4	MEDICAID	4.2	4.2	0.0
5	OTHER MEDICAL ASSISTANCE	4.3	5.5	1.2
6	CHAMPUS / TRICARE	7.8	2.9	(4.9)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.8	3.9	0.1
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>5.3</b>	<b>5.2</b>	<b>(0.0)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.6</b>	<b>4.7</b>	<b>0.0</b>
<b>D. CASE MIX INDEX</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.16140	1.19520	0.03380
2	MEDICARE	1.34850	1.33280	(0.01570)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.88328	1.02784	0.14455
4	MEDICAID	0.86580	1.03140	0.16560
5	OTHER MEDICAL ASSISTANCE	1.04770	0.91510	(0.13260)
6	CHAMPUS / TRICARE	0.90860	0.90150	(0.00710)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.24160	1.21530	(0.02630)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.23011</b>	<b>1.25559</b>	<b>0.02548</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.20108</b>	<b>1.23212</b>	<b>0.03104</b>
<b>E. OTHER REQUIRED DATA</b>				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$427,508,232	\$440,484,262	\$12,976,030
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$264,490,798	\$274,413,100	\$9,922,302
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$163,017,434	\$166,071,162	\$3,053,728
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	38.13%	37.70%	-0.43%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,462,733	\$24,904,012	\$1,441,279
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$13,522,001	\$14,537,538	\$1,015,537
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$2,277,658	\$0	(\$2,277,658)
8	CHARITY CARE	\$12,767,832	\$11,359,623	(\$1,408,209)
9	BAD DEBTS	\$10,687,109	\$18,183,085	\$7,495,976
10	TOTAL UNCOMPENSATED CARE	\$23,454,941	\$29,542,708	\$6,087,767
11	TOTAL OTHER OPERATING REVENUE	\$427,508,232	\$440,484,262	\$12,976,030
12	TOTAL OPERATING EXPENSES	\$460,314,702	\$495,471,968	\$35,157,266

<b>DANBURY HOSPITAL</b>				
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<b>FISCAL YEAR 2011</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE DESCRIPTION</b>		<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>AMOUNT DIFFERENCE</b>
<b>IV. DSH UPPER PAYMENT LIMIT CALCULATIONS</b>				
<b>A. CASE MIX ADJUSTED DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10,164.57280	9,642.87360	(521.69920)
2	MEDICARE	12,024.57450	12,654.93600	630.36150
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,664.86960	3,254.13130	589.26170
4	MEDICAID	2,361.03660	3,165.36660	804.33000
5	OTHER MEDICAL ASSISTANCE	303.83300	88.76470	(215.06830)
6	CHAMPUS / TRICARE	26.34940	30.65100	4.30160
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	369.99680	301.39440	(68.60240)
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>14,715.79350</b>	<b>15,939.71830</b>	<b>1,223.92480</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>24,880.36630</b>	<b>25,582.59190</b>	<b>702.22560</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12,427.53755	12,833.38730	405.84975
2	MEDICARE	6,425.65210	6,444.37524	18.72314
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,467.53751	3,456.61610	-10.92141
4	MEDICAID	3,072.80561	3,386.76494	313.95933
5	OTHER MEDICAL ASSISTANCE	394.73190	69.85117	-324.88073
6	CHAMPUS / TRICARE	18.67840	37.45087	18.77246
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	931.72159	1,050.77245	119.05086
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>9,911.86801</b>	<b>9,938.44221</b>	<b>26.57420</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>22,339.40556</b>	<b>22,771.82951</b>	<b>432.42395</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,500.89	\$11,678.34	\$177.45
2	MEDICARE	\$7,544.03	\$7,819.06	\$275.03
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,521.91	\$4,528.82	(\$993.09)
4	MEDICAID	\$6,005.61	\$4,565.46	(\$1,440.15)
5	OTHER MEDICAL ASSISTANCE	\$1,763.16	\$3,222.27	\$1,459.12
6	CHAMPUS / TRICARE	\$16,552.86	\$6,507.98	(\$10,044.89)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,259.57	\$2,034.47	(\$3,225.10)
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,193.98</b>	<b>\$7,144.83</b>	<b>(\$49.15)</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$8,953.51</b>	<b>\$8,853.65</b>	<b>(\$99.86)</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,997.32	\$13,356.81	\$359.49
2	MEDICARE	\$10,171.93	\$10,408.17	\$236.24
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,153.77	\$4,762.01	\$608.24
4	MEDICAID	\$4,363.44	\$4,776.20	\$412.76
5	OTHER MEDICAL ASSISTANCE	\$2,521.62	\$4,073.75	\$1,552.13
6	CHAMPUS / TRICARE	\$9,151.00	\$4,348.36	(\$4,802.63)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,530.29	\$2,472.50	(\$4,057.79)
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$8,064.63</b>	<b>\$8,421.58</b>	<b>\$356.95</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$10,808.72</b>	<b>\$11,202.90</b>	<b>\$394.18</b>

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE DESCRIPTION</b>		<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>	<b>AMOUNT DIFFERENCE</b>
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$17,848,373	\$19,074,144	\$1,225,771
2	OTHER MEDICAL ASSISTANCE	\$4,776,242	\$850,499	(\$3,925,743)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,238,242	\$10,082,027	\$5,843,785
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$26,862,857</b>	<b>\$30,006,669</b>	<b>\$3,143,812</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$1,042,814,916	\$1,113,153,089	\$70,338,173
2	TOTAL GOVERNMENT DEDUCTIONS	\$380,042,879	\$422,358,634	\$42,315,755
3	UNCOMPENSATED CARE	\$23,454,941	\$29,542,708	\$6,087,767
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$163,017,434	\$166,071,162	\$3,053,728
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$13,522,001	\$14,537,538	\$1,015,537
6	TOTAL ADJUSTMENTS	\$580,037,255	\$632,510,042	\$52,472,787
7	TOTAL ACCRUED PAYMENTS	\$462,777,661	\$480,643,047	\$17,865,386
8	UCP DSH PAYMENTS (OHCA INPUT)	\$2,277,658	\$0	(\$2,277,658)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$465,055,319	\$480,643,047	\$15,587,728
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4459615142	0.4317852160	(0.0141762982)
11	COST OF UNCOMPENSATED CARE	\$10,460,001	\$12,756,105	\$2,296,104
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$20,918,724	\$24,354,312	\$3,435,588
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$31,378,725	\$37,110,416	\$5,731,691
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	59.31%	59.15%	-0.16%
2	MEDICARE	34.56%	33.90%	-0.66%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28.23%	23.98%	-4.25%
4	MEDICAID	30.61%	24.14%	-6.47%
5	OTHER MEDICAL ASSISTANCE	9.25%	18.19%	8.94%
6	CHAMPUS / TRICARE	34.87%	31.54%	-3.33%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	29.51%	11.33%	-18.19%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>33.52%</b>	<b>32.18%</b>	<b>-1.34%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>43.43%</b>	<b>41.61%</b>	<b>-1.82%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	57.71%	56.60%	-1.11%
2	MEDICARE	34.56%	33.86%	-0.70%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23.97%	24.49%	0.52%
4	MEDICAID	25.69%	24.48%	-1.21%
5	OTHER MEDICAL ASSISTANCE	12.63%	25.13%	12.50%
6	CHAMPUS / TRICARE	21.22%	23.38%	2.16%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	29.51%	11.33%	-18.19%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>31.97%</b>	<b>31.47%</b>	<b>-0.51%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>45.57%</b>	<b>44.85%</b>	<b>-0.72%</b>

DANBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$464,227,005	\$481,609,849	\$17,382,844
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,277,658	\$0	(\$2,277,658)
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$466,504,663</b>	<b>\$481,609,849</b>	<b>\$15,105,186</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$6,793,719	\$16,110,641	\$9,316,922
4	<b>CALCULATED NET REVENUE</b>	<b>\$473,298,382</b>	<b>\$497,720,490</b>	<b>\$24,422,108</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$473,298,383	\$497,720,490	\$24,422,107
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>(\$1)</b>	<b>\$0</b>	<b>\$1</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$1,042,814,916	\$1,113,153,089	\$70,338,173
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$1,042,814,916</b>	<b>\$1,113,153,089</b>	<b>\$70,338,173</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,042,814,916	\$1,113,153,089	\$70,338,173
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$23,454,941	\$29,542,708	\$6,087,767
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$23,454,941</b>	<b>\$29,542,708</b>	<b>\$6,087,767</b>
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$23,454,941	\$29,542,708	\$6,087,767
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>DANBURY HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2011</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$190,380,782
2	MEDICARE	291,864,516
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	61,448,664
4	MEDICAID	59,876,239
5	OTHER MEDICAL ASSISTANCE	1,572,425
6	CHAMPUS / TRICARE	632,468
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,413,243
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$353,945,648</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$544,326,430</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$302,829,736
2	MEDICARE	198,092,097
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	67,208,165
4	MEDICAID	66,075,838
5	OTHER MEDICAL ASSISTANCE	1,132,327
6	CHAMPUS / TRICARE	696,661
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	22,935,833
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$265,996,923</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$568,826,659</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$493,210,518
2	TOTAL GOVERNMENT ACCRUED CHARGES	619,942,571
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$1,113,153,089</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$112,612,777
2	MEDICARE	98,949,663
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,737,373
4	MEDICAID	14,451,349
5	OTHER MEDICAL ASSISTANCE	286,024
6	CHAMPUS / TRICARE	199,476
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	613,179
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$113,886,512</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$226,499,289</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$171,413,135
2	MEDICARE	67,074,143
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16,460,432
4	MEDICAID	16,175,876
5	OTHER MEDICAL ASSISTANCE	284,556
6	CHAMPUS / TRICARE	162,850
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,598,031
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$83,697,425</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$255,110,560</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$284,025,912
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	197,583,937
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$481,609,849</b>

<b>DANBURY HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2011</b> <b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,068
2	MEDICARE	9,495
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,166
4	MEDICAID	3,069
5	OTHER MEDICAL ASSISTANCE	97
6	CHAMPUS / TRICARE	34
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	248
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>12,695</b>
	<b>TOTAL DISCHARGES</b>	<b>20,763</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.19520
2	MEDICARE	1.33280
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.02784
4	MEDICAID	1.03140
5	OTHER MEDICAL ASSISTANCE	0.91510
6	CHAMPUS / TRICARE	0.90150
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.21530
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.25559</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.23212</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$440,484,262
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$274,413,100
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$166,071,162
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	37.70%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$24,904,012
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$14,537,538
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$11,359,623
9	BAD DEBTS	\$18,183,085
10	TOTAL UNCOMPENSATED CARE	\$29,542,708
11	TOTAL OTHER OPERATING REVENUE	\$11,802,461
12	TOTAL OPERATING EXPENSES	\$495,471,968

<b>DANBURY HOSPITAL</b> <b>TWELVE MONTHS ACTUAL FILING</b> <b>FISCAL YEAR 2011</b> <b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b> <b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
(1)	(2)	(3)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$481,609,849
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$481,609,849</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$16,110,641
	<b>CALCULATED NET REVENUE</b>	<b>\$497,720,490</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$497,720,490
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$1,113,153,089
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$1,113,153,089</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,113,153,089
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$29,542,708
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$29,542,708</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$29,542,708
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

DANBURY HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. Hospital Charity Care (from HRS Report 500)</b>					
1	Number of Applicants	2,794	3,738	944	34%
2	Number of Approved Applicants	2,692	3,625	933	35%
3	<b>Total Charges (A)</b>	\$12,767,832	\$11,359,623	(\$1,408,209)	-11%
4	<b>Average Charges</b>	<b>\$4,743</b>	<b>\$3,134</b>	<b>(\$1,609)</b>	<b>-34%</b>
5	Ratio of Cost to Charges (RCC)	0.438342	0.438257	(0.000085)	0%
6	<b>Total Cost</b>	<b>\$5,596,677</b>	<b>\$4,978,434</b>	<b>(\$618,243)</b>	<b>-11%</b>
7	<b>Average Cost</b>	<b>\$2,079</b>	<b>\$1,373</b>	<b>(\$706)</b>	<b>-34%</b>
8	Charity Care - Inpatient Charges	\$4,155,473	\$2,043,598	(\$2,111,875)	-51%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,431,257	2,362,328	(68,929)	-3%
10	Charity Care - Emergency Department Charges	6,181,102	6,953,697	772,595	12%
11	<b>Total Charges (A)</b>	<b>\$12,767,832</b>	<b>\$11,359,623</b>	<b>(\$1,408,209)</b>	<b>-11%</b>
12	Charity Care - Number of Patient Days	1,215	611	(604)	-50%
13	Charity Care - Number of Discharges	244	149	(95)	-39%
14	Charity Care - Number of Outpatient ED Visits	1,597	1,968	371	23%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	9,250	11,172	1,922	21%
<b>B. Hospital Bad Debts (from HRS Report 500)</b>					
1	Bad Debts - Inpatient Services	\$3,390,996	\$4,398,990	\$1,007,994	30%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	6,108,716	11,296,531	5,187,815	85%
3	Bad Debts - Emergency Department	1,187,397	2,487,564	1,300,167	109%
4	<b>Total Bad Debts (A)</b>	<b>\$10,687,109</b>	<b>\$18,183,085</b>	<b>\$7,495,976</b>	<b>70%</b>
<b>C. Hospital Uncompensated Care (from HRS Report 500)</b>					
1	Charity Care (A)	\$12,767,832	\$11,359,623	(\$1,408,209)	-11%
2	Bad Debts (A)	10,687,109	18,183,085	7,495,976	70%
3	<b>Total Uncompensated Care (A)</b>	<b>\$23,454,941</b>	<b>\$29,542,708</b>	<b>\$6,087,767</b>	<b>26%</b>
4	Uncompensated Care - Inpatient Services	\$7,546,469	\$6,442,588	(\$1,103,881)	-15%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	8,539,973	13,658,859	5,118,886	60%
6	Uncompensated Care - Emergency Department	7,368,499	9,441,261	2,072,762	28%
7	<b>Total Uncompensated Care (A)</b>	<b>\$23,454,941</b>	<b>\$29,542,708</b>	<b>\$6,087,767</b>	<b>26%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					

<b>DANBURY HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2011</b>					
<b>REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,</b>					
<b>ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011		
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL</u> <u>NON-GOVERNMENT</u>	<u>ACTUAL TOTAL</u> <u>NON-GOVERNMENT</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>	<u>%</u> <u>DIFFERENCE</u>
	<b><u>COMMERCIAL - ALL PAYERS</u></b>				
1	Total Gross Revenue	\$427,508,232	\$440,484,262	\$12,976,030	3%
2	Total Contractual Allowances	\$163,017,434	\$166,071,162	\$3,053,728	2%
	<b>Total Accrued Payments (A)</b>	<b>\$264,490,798</b>	<b>\$274,413,100</b>	<b>\$9,922,302</b>	<b>4%</b>
	<b>Total Discount Percentage</b>	<b>38.13%</b>	<b>37.70%</b>	<b>-0.43%</b>	<b>-1%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>
<b>A. <u>Gross and Net Revenue</u></b>				
1	Inpatient Gross Revenue	\$498,743,209	\$512,924,104	\$544,326,430
2	Outpatient Gross Revenue	\$503,600,187	\$529,890,812	\$568,826,659
3	Total Gross Patient Revenue	\$1,002,343,396	\$1,042,814,916	\$1,113,153,089
4	Net Patient Revenue	\$457,712,742	\$471,020,724	\$497,720,490
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$442,588,744	\$460,314,702	\$495,471,968
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	91,794	95,884	96,663
2	Discharges	20,497	20,715	20,763
3	Average Length of Stay	4.5	4.6	4.7
4	Equivalent (Adjusted) Patient Days (EPD)	184,482	194,940	197,677
0	Equivalent (Adjusted) Discharges (ED)	41,194	42,115	42,461
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.19886	1.20108	1.23212
2	Case Mix Adjusted Patient Days (CMAPD)	110,049	115,164	119,101
3	Case Mix Adjusted Discharges (CMAD)	24,573	24,880	25,583
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	221,169	234,138	243,562
5	Case Mix Adjusted Equivalent Discharges (CMAED)	49,386	50,584	52,317
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$10,919	\$10,876	\$11,516
2	Total Gross Revenue per Discharge	\$48,902	\$50,341	\$53,612
3	Total Gross Revenue per EPD	\$5,433	\$5,349	\$5,631
4	Total Gross Revenue per ED	\$24,332	\$24,761	\$26,216
5	Total Gross Revenue per CMAEPD	\$4,532	\$4,454	\$4,570
6	Total Gross Revenue per CMAED	\$20,296	\$20,616	\$21,277
7	Inpatient Gross Revenue per EPD	\$2,703	\$2,631	\$2,754
8	Inpatient Gross Revenue per ED	\$12,107	\$12,179	\$12,820

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>
<b>F. Net Revenue Per Statistic</b>				
1	Net Patient Revenue per Patient Day	\$4,986	\$4,912	\$5,149
2	Net Patient Revenue per Discharge	\$22,331	\$22,738	\$23,972
3	Net Patient Revenue per EPD	\$2,481	\$2,416	\$2,518
4	Net Patient Revenue per ED	\$11,111	\$11,184	\$11,722
5	Net Patient Revenue per CMAEPD	\$2,070	\$2,012	\$2,044
6	Net Patient Revenue per CMAED	\$9,268	\$9,312	\$9,514
<b>G. Operating Expense Per Statistic</b>				
1	Total Operating Expense per Patient Day	\$4,822	\$4,801	\$5,126
2	Total Operating Expense per Discharge	\$21,593	\$22,221	\$23,863
3	Total Operating Expense per EPD	\$2,399	\$2,361	\$2,506
4	Total Operating Expense per ED	\$10,744	\$10,930	\$11,669
5	Total Operating Expense per CMAEPD	\$2,001	\$1,966	\$2,034
6	Total Operating Expense per CMAED	\$8,962	\$9,100	\$9,471
<b>H. Nursing Salary and Fringe Benefits Expense</b>				
1	Nursing Salary Expense	\$52,331,167	\$54,797,841	\$58,301,687
2	Nursing Fringe Benefits Expense	\$14,967,226	\$18,746,472	\$20,247,827
3	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$67,298,393</b>	<b>\$73,544,313</b>	<b>\$78,549,514</b>
<b>I. Physician Salary and Fringe Expense</b>				
1	Physician Salary Expense	\$5,994,805	\$6,365,059	\$7,419,911
2	Physician Fringe Benefits Expense	\$1,714,573	\$2,177,502	\$2,576,891
3	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$7,709,378</b>	<b>\$8,542,561</b>	<b>\$9,996,802</b>
<b>J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</b>				
1	Non-Nursing, Non-Physician Salary Expense	\$123,640,954	\$125,010,388	\$128,541,073
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$35,362,523	\$42,766,350	\$44,641,545
3	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$159,003,477</b>	<b>\$167,776,738</b>	<b>\$173,182,618</b>
<b>K. Total Salary and Fringe Benefits Expense</b>				
1	Total Salary Expense	\$181,966,926	\$186,173,288	\$194,262,671
2	Total Fringe Benefits Expense	\$52,044,322	\$63,690,324	\$67,466,263
3	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$234,011,248</b>	<b>\$249,863,612</b>	<b>\$261,728,934</b>

<b>DANBURY HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2011</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2009</b>	<b>ACTUAL FY 2010</b>	<b>ACTUAL FY 2011</b>
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	551.4	564.3	572.3
2	Total Physician FTEs	79.6	87.4	97.8
3	Total Non-Nursing, Non-Physician FTEs	1817.0	1841.1	1871.2
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>2,448.0</b>	<b>2,492.8</b>	<b>2,541.3</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$94,906	\$97,108	\$101,873
2	Nursing Fringe Benefits Expense per FTE	\$27,144	\$33,221	\$35,380
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$122,050</b>	<b>\$130,328</b>	<b>\$137,252</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$75,312	\$72,827	\$75,868
2	Physician Fringe Benefits Expense per FTE	\$21,540	\$24,914	\$26,349
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$96,851</b>	<b>\$97,741</b>	<b>\$102,217</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$68,047	\$67,900	\$68,694
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$19,462	\$23,229	\$23,857
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$87,509</b>	<b>\$91,129</b>	<b>\$92,552</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$74,333	\$74,684	\$76,442
2	Total Fringe Benefits Expense per FTE	\$21,260	\$25,550	\$26,548
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$95,593</b>	<b>\$100,234</b>	<b>\$102,990</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,549	\$2,606	\$2,708
2	Total Salary and Fringe Benefits Expense per Discharge	\$11,417	\$12,062	\$12,606
3	Total Salary and Fringe Benefits Expense per EPD	\$1,268	\$1,282	\$1,324
4	Total Salary and Fringe Benefits Expense per ED	\$5,681	\$5,933	\$6,164
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,058	\$1,067	\$1,075
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,738	\$4,940	\$5,003