

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$3,314,081	\$2,502,682	(\$811,399)	-24%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$14,090,656	\$14,881,466	\$790,810	6%
4	Current Assets Whose Use is Limited for Current Liabilities	\$677,311	\$762,364	\$85,053	13%
5	Due From Affiliates	\$105,104	\$170,422	\$65,318	62%
6	Due From Third Party Payers	\$1,585,717	\$0	(\$1,585,717)	-100%
7	Inventories of Supplies	\$1,175,285	\$1,113,332	(\$61,953)	-5%
8	Prepaid Expenses	\$280,392	\$839,664	\$559,272	199%
9	Other Current Assets	\$1,524,302	\$1,506,027	(\$18,275)	-1%
	Total Current Assets	\$22,752,848	\$21,775,957	(\$976,891)	-4%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$2,607,805	\$2,505,394	(\$102,411)	-4%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$1,673,374	\$1,439,934	(\$233,440)	-14%
4	Other Noncurrent Assets Whose Use is Limited	\$1,885,179	\$1,477,742	(\$407,437)	-22%
	Total Noncurrent Assets Whose Use is Limited:	\$6,166,358	\$5,423,070	(\$743,288)	-12%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$347,049	\$325,966	(\$21,083)	-6%
7	Other Noncurrent Assets	\$2,339,911	\$2,036,739	(\$303,172)	-13%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$98,445,867	\$101,775,114	\$3,329,247	3%
2	Less: Accumulated Depreciation	\$62,488,848	\$66,982,063	\$4,493,215	7%
	Property, Plant and Equipment, Net	\$35,957,019	\$34,793,051	(\$1,163,968)	-3%
3	Construction in Progress	\$270,392	\$2,014,711	\$1,744,319	645%
	Total Net Fixed Assets	\$36,227,411	\$36,807,762	\$580,351	2%
	Total Assets	\$67,833,577	\$66,369,494	(\$1,464,083)	-2%

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		FY 2010	FY 2011	AMOUNT	%
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II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$3,465,207	\$5,823,590	\$2,358,383	68%
2	Salaries, Wages and Payroll Taxes	\$840,849	\$813,367	(\$27,482)	-3%
3	Due To Third Party Payers	\$0	\$71,283	\$71,283	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$263,466	\$3,406,605	\$3,143,139	1193%
6	Current Portion of Notes Payable	\$440,019	\$367,375	(\$72,644)	-17%
7	Other Current Liabilities	\$5,800,501	\$6,135,012	\$334,511	6%
	Total Current Liabilities	\$10,810,042	\$16,617,232	\$5,807,190	54%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$19,435,038	\$19,388,119	(\$46,919)	0%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$19,435,038	\$19,388,119	(\$46,919)	0%
3	Accrued Pension Liability	\$53,726,319	\$56,931,181	\$3,204,862	6%
4	Other Long Term Liabilities	\$3,797,901	\$4,482,535	\$684,634	18%
	Total Long Term Liabilities	\$76,959,258	\$80,801,835	\$3,842,577	5%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	(\$25,203,815)	(\$35,978,450)	(\$10,774,635)	43%
2	Temporarily Restricted Net Assets	\$1,538,289	\$1,318,536	(\$219,753)	-14%
3	Permanently Restricted Net Assets	\$3,729,803	\$3,610,341	(\$119,462)	-3%
	Total Net Assets	(\$19,935,723)	(\$31,049,573)	(\$11,113,850)	56%
	Total Liabilities and Net Assets	\$67,833,577	\$66,369,494	(\$1,464,083)	-2%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(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>
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$193,955,564	\$199,383,125	\$5,427,561	3%
2	Less: Allowances	\$104,466,765	\$110,493,786	\$6,027,021	6%
3	Less: Charity Care	\$2,546,093	\$3,033,891	\$487,798	19%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$86,942,706	\$85,855,448	(\$1,087,258)	-1%
5	Other Operating Revenue	\$2,622,664	\$3,044,239	\$421,575	16%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$89,565,370	\$88,899,687	(\$665,683)	-1%
B. Operating Expenses:					
1	Salaries and Wages	\$39,301,133	\$41,345,796	\$2,044,663	5%
2	Fringe Benefits	\$14,575,223	\$16,084,939	\$1,509,716	10%
3	Physicians Fees	\$932,425	\$693,799	(\$238,626)	-26%
4	Supplies and Drugs	\$7,995,028	\$7,777,841	(\$217,187)	-3%
5	Depreciation and Amortization	\$4,522,902	\$4,545,850	\$22,948	1%
6	Bad Debts	\$5,459,445	\$3,365,182	(\$2,094,263)	-38%
7	Interest	\$1,557,105	\$1,476,666	(\$80,439)	-5%
8	Malpractice	\$635,157	\$609,350	(\$25,807)	-4%
9	Other Operating Expenses	\$16,523,400	\$16,740,066	\$216,666	1%
	Total Operating Expenses	\$91,501,818	\$92,639,489	\$1,137,671	1%
	Income/(Loss) From Operations	(\$1,936,448)	(\$3,739,802)	(\$1,803,354)	93%
C. Non-Operating Revenue:					
1	Income from Investments	\$96,303	(\$16,806)	(\$113,109)	-117%
2	Gifts, Contributions and Donations	\$252,482	\$265,347	\$12,865	5%
3	Other Non-Operating Gains/(Losses)	(\$95,417)	(\$561,377)	(\$465,960)	488%
	Total Non-Operating Revenue	\$253,368	(\$312,836)	(\$566,204)	-223%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$1,683,080)	(\$4,052,638)	(\$2,369,558)	141%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$20,260	(\$10,172)	(\$30,432)	-150%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$20,260	(\$10,172)	(\$30,432)	-150%
	Excess/(Deficiency) of Revenue Over Expenses	(\$1,662,820)	(\$4,062,810)	(\$2,399,990)	144%
	Principal Payments	\$886,449	\$19,866,618	\$18,980,169	2141%

**WINDHAM COMMUNITY MEMORIAL 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
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$38,718,930	\$38,366,754	(\$352,176)	-1%
2	MEDICARE MANAGED CARE	\$4,682,719	\$5,467,650	\$784,931	17%
3	MEDICAID	\$5,417,337	\$7,584,999	\$2,167,662	40%
4	MEDICAID MANAGED CARE	\$4,618,852	\$3,679,039	(\$939,813)	-20%
5	CHAMPUS/TRICARE	\$136,260	\$117,471	(\$18,789)	-14%
6	COMMERCIAL INSURANCE	\$16,018,356	\$15,501,339	(\$517,017)	-3%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$254,774	\$239,510	(\$15,264)	-6%
9	SELF- PAY/UNINSURED	\$1,567,998	\$952,163	(\$615,835)	-39%
10	SAGA	\$1,854,887	\$0	(\$1,854,887)	-100%
11	OTHER	\$214,667	\$313,593	\$98,926	46%
	TOTAL INPATIENT GROSS REVENUE	\$73,484,780	\$72,222,518	(\$1,262,262)	-2%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$30,748,244	\$32,538,187	\$1,789,943	6%
2	MEDICARE MANAGED CARE	\$4,957,041	\$5,887,234	\$930,193	19%
3	MEDICAID	\$8,393,726	\$15,280,624	\$6,886,898	82%
4	MEDICAID MANAGED CARE	\$12,861,669	\$12,598,916	(\$262,753)	-2%
5	CHAMPUS/TRICARE	\$473,205	\$437,537	(\$35,668)	-8%
6	COMMERCIAL INSURANCE	\$53,167,559	\$54,124,923	\$957,364	2%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$2,240,081	\$2,372,135	\$132,054	6%
9	SELF- PAY/UNINSURED	\$3,290,522	\$3,740,586	\$450,064	14%
10	SAGA	\$4,127,519	\$0	(\$4,127,519)	-100%
11	OTHER	\$211,217	\$180,466	(\$30,751)	-15%
	TOTAL OUTPATIENT GROSS REVENUE	\$120,470,783	\$127,160,608	\$6,689,825	6%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$69,467,174	\$70,904,941	\$1,437,767	2%
2	MEDICARE MANAGED CARE	\$9,639,760	\$11,354,884	\$1,715,124	18%
3	MEDICAID	\$13,811,063	\$22,865,623	\$9,054,560	66%
4	MEDICAID MANAGED CARE	\$17,480,521	\$16,277,955	(\$1,202,566)	-7%
5	CHAMPUS/TRICARE	\$609,465	\$555,008	(\$54,457)	-9%
6	COMMERCIAL INSURANCE	\$69,185,915	\$69,626,262	\$440,347	1%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$2,494,855	\$2,611,645	\$116,790	5%
9	SELF- PAY/UNINSURED	\$4,858,520	\$4,692,749	(\$165,771)	-3%
10	SAGA	\$5,982,406	\$0	(\$5,982,406)	-100%
11	OTHER	\$425,884	\$494,059	\$68,175	16%
	TOTAL GROSS REVENUE	\$193,955,563	\$199,383,126	\$5,427,563	3%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$24,076,685	\$23,402,812	(\$673,873)	-3%
2	MEDICARE MANAGED CARE	\$2,531,836	\$2,932,137	\$400,301	16%
3	MEDICAID	\$2,692,056	\$2,510,251	(\$181,805)	-7%
4	MEDICAID MANAGED CARE	\$2,351,919	\$1,653,364	(\$698,555)	-30%
5	CHAMPUS/TRICARE	\$57,058	\$53,482	(\$3,576)	-6%
6	COMMERCIAL INSURANCE	\$8,698,382	\$9,205,280	\$506,898	6%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$151,797	\$161,785	\$9,988	7%
9	SELF- PAY/UNINSURED	\$147,158	\$46,750	(\$100,408)	-68%
10	SAGA	\$582,283	\$0	(\$582,283)	-100%
11	OTHER	\$63,718	\$118,590	\$54,872	86%

**WINDHAM COMMUNITY MEMORIAL HOSPITAL
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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
	TOTAL INPATIENT NET REVENUE	\$41,352,892	\$40,084,451	(\$1,268,441)	-3%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$8,157,216	\$8,007,435	(\$149,781)	-2%
2	MEDICARE MANAGED CARE	\$1,341,064	\$1,466,728	\$125,664	9%
3	MEDICAID	\$1,873,675	\$3,390,249	\$1,516,574	81%
4	MEDICAID MANAGED CARE	\$3,870,021	\$3,315,979	(\$554,042)	-14%
5	CHAMPUS/TRICARE	\$170,553	\$134,184	(\$36,369)	-21%
6	COMMERCIAL INSURANCE	\$23,328,960	\$24,461,844	\$1,132,884	5%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$1,523,255	\$1,495,438	(\$27,817)	-2%
9	SELF- PAY/UNINSURED	\$155,386	\$122,464	(\$32,922)	-21%
10	SAGA	\$656,708	\$0	(\$656,708)	-100%
11	OTHER	\$58,337	\$28,274	(\$30,063)	-52%
	TOTAL OUTPATIENT NET REVENUE	\$41,135,175	\$42,422,595	\$1,287,420	3%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$32,233,901	\$31,410,247	(\$823,654)	-3%
2	MEDICARE MANAGED CARE	\$3,872,900	\$4,398,865	\$525,965	14%
3	MEDICAID	\$4,565,731	\$5,900,500	\$1,334,769	29%
4	MEDICAID MANAGED CARE	\$6,221,940	\$4,969,343	(\$1,252,597)	-20%
5	CHAMPUS/TRICARE	\$227,611	\$187,666	(\$39,945)	-18%
6	COMMERCIAL INSURANCE	\$32,027,342	\$33,667,124	\$1,639,782	5%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$1,675,052	\$1,657,223	(\$17,829)	-1%
9	SELF- PAY/UNINSURED	\$302,544	\$169,214	(\$133,330)	-44%
10	SAGA	\$1,238,991	\$0	(\$1,238,991)	-100%
11	OTHER	\$122,055	\$146,864	\$24,809	20%
	TOTAL NET REVENUE	\$82,488,067	\$82,507,046	\$18,979	0%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	2,256	2,057	(199)	-9%
2	MEDICARE MANAGED CARE	261	315	54	21%
3	MEDICAID	428	529	101	24%
4	MEDICAID MANAGED CARE	633	506	(127)	-20%
5	CHAMPUS/TRICARE	14	18	4	29%
6	COMMERCIAL INSURANCE	1,260	1,174	(86)	-7%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	15	16	1	7%
9	SELF- PAY/UNINSURED	106	66	(40)	-38%
10	SAGA	115	0	(115)	-100%
11	OTHER	12	20	8	67%
	TOTAL DISCHARGES	5,100	4,701	(399)	-8%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	11,040	10,775	(265)	-2%
2	MEDICARE MANAGED CARE	1,300	1,625	325	25%
3	MEDICAID	1,733	2,251	518	30%
4	MEDICAID MANAGED CARE	1,626	1,274	(352)	-22%
5	CHAMPUS/TRICARE	38	35	(3)	-8%
6	COMMERCIAL INSURANCE	4,043	3,694	(349)	-9%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	50	52	2	4%
9	SELF- PAY/UNINSURED	398	220	(178)	-45%
10	SAGA	568	0	(568)	-100%
11	OTHER	54	70	16	30%
	TOTAL PATIENT DAYS	20,850	19,996	(854)	-4%
C.	OUTPATIENT VISITS				

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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	42,252	42,541	289	1%
2	MEDICARE MANAGED CARE	6,519	7,587	1,068	16%
3	MEDICAID	8,661	14,362	5,701	66%
4	MEDICAID MANAGED CARE	17,673	17,743	70	0%
5	CHAMPUS/TRICARE	535	532	(3)	-1%
6	COMMERCIAL INSURANCE	73,175	72,640	(535)	-1%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	1,851	1,816	(35)	-2%
9	SELF- PAY/UNINSURED	4,982	5,128	146	3%
10	SAGA	4,005	0	(4,005)	-100%
11	OTHER	181	162	(19)	-10%
	TOTAL OUTPATIENT VISITS	159,834	162,511	2,677	2%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$5,173,583	\$5,762,199	\$588,616	11%
2	MEDICARE MANAGED CARE	\$718,141	\$847,284	\$129,143	18%
3	MEDICAID	\$4,284,511	\$7,640,412	\$3,355,901	78%
4	MEDICAID MANAGED CARE	\$6,808,915	\$6,462,154	(\$346,761)	-5%
5	CHAMPUS/TRICARE	\$280,812	\$209,846	(\$70,966)	-25%
6	COMMERCIAL INSURANCE	\$11,410,289	\$11,876,912	\$466,623	4%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$502,722	\$554,692	\$51,970	10%
9	SELF- PAY/UNINSURED	\$2,236,098	\$2,363,314	\$127,216	6%
10	SAGA	\$2,237,938	\$0	(\$2,237,938)	-100%
11	OTHER	\$141,946	\$149,142	\$7,196	5%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$33,794,955	\$35,865,955	\$2,071,000	6%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$1,476,535	\$1,453,094	(\$23,441)	-2%
2	MEDICARE MANAGED CARE	\$202,837	\$212,062	\$9,225	5%
3	MEDICAID	\$988,662	\$1,528,494	\$539,832	55%
4	MEDICAID MANAGED CARE	\$2,008,891	\$1,634,434	(\$374,457)	-19%
5	CHAMPUS/TRICARE	\$100,362	\$65,926	(\$34,436)	-34%
6	COMMERCIAL INSURANCE	\$5,149,839	\$5,527,783	\$377,944	7%
7	NON-GOVERNMENT MANAGED CARE	\$0	\$0	\$0	0%
8	WORKER'S COMPENSATION	\$386,758	\$391,004	\$4,246	1%
9	SELF- PAY/UNINSURED	\$65,233	\$43,188	(\$22,045)	-34%
10	SAGA	\$381,059	\$0	(\$381,059)	-100%
11	OTHER	\$36,011	\$21,961	(\$14,050)	-39%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$10,796,187	\$10,877,946	\$81,759	1%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	3,606	3,929	323	9%
2	MEDICARE MANAGED CARE	504	543	39	8%
3	MEDICAID	3,025	5,473	2,448	81%
4	MEDICAID MANAGED CARE	7,185	7,603	418	6%
5	CHAMPUS/TRICARE	266	197	(69)	-26%
6	COMMERCIAL INSURANCE	9,316	9,677	361	4%
7	NON-GOVERNMENT MANAGED CARE	0	0	0	0%
8	WORKER'S COMPENSATION	698	746	48	7%
9	SELF- PAY/UNINSURED	2,313	2,446	133	6%
10	SAGA	1,670	0	(1,670)	-100%
11	OTHER	114	130	16	14%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	28,697	30,744	2,047	7%

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

(1) <u>LINE</u>	(2) <u>DESCRIPTION</u>	(3) <u>FY 2010 ACTUAL</u>	(4) <u>FY 2011 ACTUAL</u>	(5) <u>AMOUNT DIFFERENCE</u>	(6) <u>% DIFFERENCE</u>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$12,409,863	\$12,572,579	\$162,716	1%
2	Physician Salaries	\$887,642	\$2,054,798	\$1,167,156	131%
3	Non-Nursing, Non-Physician Salaries	\$26,003,628	\$26,718,419	\$714,791	3%
	Total Salaries & Wages	\$39,301,133	\$41,345,796	\$2,044,663	5%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$4,602,323	\$4,891,166	\$288,843	6%
2	Physician Fringe Benefits	\$329,191	\$799,387	\$470,196	143%
3	Non-Nursing, Non-Physician Fringe Benefits	\$9,643,709	\$10,394,386	\$750,677	8%
	Total Fringe Benefits	\$14,575,223	\$16,084,939	\$1,509,716	10%
C. Contractual Labor Fees:					
1	Nursing Fees	\$592,337	\$488,358	(\$103,979)	-18%
2	Physician Fees	\$932,425	\$693,799	(\$238,626)	-26%
3	Non-Nursing, Non-Physician Fees	\$5,853,147	\$6,116,829	\$263,682	5%
	Total Contractual Labor Fees	\$7,377,909	\$7,298,986	(\$78,923)	-1%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$5,671,740	\$5,503,723	(\$168,017)	-3%
2	Pharmaceutical Costs	\$2,323,288	\$2,274,118	(\$49,170)	-2%
	Total Medical Supplies and Pharmaceutical Cost	\$7,995,028	\$7,777,841	(\$217,187)	-3%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$1,663,918	\$1,673,434	\$9,516	1%
2	Depreciation-Equipment	\$2,843,074	\$2,856,493	\$13,419	0%
3	Amortization	\$15,910	\$15,923	\$13	0%
	Total Depreciation and Amortization	\$4,522,902	\$4,545,850	\$22,948	1%
F. Bad Debts:					
1	Bad Debts	\$5,459,445	\$3,365,182	(\$2,094,263)	-38%
G. Interest Expense:					
1	Interest Expense	\$1,557,105	\$1,476,666	(\$80,439)	-5%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$635,157	\$609,350	(\$25,807)	-4%
I. Utilities:					
1	Water	\$81,761	\$67,904	(\$13,857)	-17%
2	Natural Gas	\$848,236	\$728,167	(\$120,069)	-14%
3	Oil	\$2,488	\$3,836	\$1,348	54%
4	Electricity	\$670,559	\$658,793	(\$11,766)	-2%
5	Telephone	\$139,052	\$162,331	\$23,279	17%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$1,742,096	\$1,621,031	(\$121,065)	-7%
J. Business Expenses:					
1	Accounting Fees	\$196,835	\$242,695	\$45,860	23%
2	Legal Fees	\$311,514	\$444,650	\$133,136	43%
3	Consulting Fees	\$149,511	\$184,315	\$34,804	23%
4	Dues and Membership	\$371,726	\$374,452	\$2,726	1%
5	Equipment Leases	\$686,518	\$638,999	(\$47,519)	-7%
6	Building Leases	\$175,865	\$218,868	\$43,003	24%
7	Repairs and Maintenance	\$2,642,551	\$2,875,783	\$233,232	9%
8	Insurance	\$408,819	\$275,990	(\$132,829)	-32%

**WINDHAM COMMUNITY MEMORIAL 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	\$72,501	\$53,684	(\$18,817)	-26%
10	Conferences	\$148,574	\$163,578	\$15,004	10%
11	Property Tax	\$71,179	\$71,745	\$566	1%
12	General Supplies	\$1,401,737	\$1,441,730	\$39,993	3%
13	Licenses and Subscriptions	\$65,091	\$65,568	\$477	1%
14	Postage and Shipping	\$138,053	\$132,176	(\$5,877)	-4%
15	Advertising	\$267,748	\$368,966	\$101,218	38%
16	Other Business Expenses	\$281,781	\$365,236	\$83,455	30%
	Total Business Expenses	\$7,390,003	\$7,918,435	\$528,432	7%
K.	<u>Other Operating Expense:</u>				
1	Miscellaneous Other Operating Expenses	\$945,817	\$595,413	(\$350,404)	-37%
	Total Operating Expenses - All Expense Categories*	\$91,501,818	\$92,639,489	\$1,137,671	1%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	<u>OPERATING EXPENSE BY DEPARTMENT</u>				
A.	<u>General Services:</u>				
1	General Administration	\$2,779,388	\$2,402,375	(\$377,013)	-14%
2	General Accounting	\$754,250	\$751,182	(\$3,068)	0%
3	Patient Billing & Collection	\$604,333	\$587,163	(\$17,170)	-3%
4	Admitting / Registration Office	\$1,466,725	\$1,569,500	\$102,775	7%
5	Data Processing	\$2,121,519	\$2,271,588	\$150,069	7%
6	Communications	\$160,250	\$142,211	(\$18,039)	-11%
7	Personnel	\$880,984	\$855,778	(\$25,206)	-3%
8	Public Relations	\$456,998	\$678,364	\$221,366	48%
9	Purchasing	\$226,382	\$210,270	(\$16,112)	-7%
10	Dietary and Cafeteria	\$1,966,012	\$2,009,913	\$43,901	2%
11	Housekeeping	\$1,155,350	\$1,094,760	(\$60,590)	-5%
12	Laundry & Linen	\$523,697	\$558,852	\$35,155	7%
13	Operation of Plant	\$1,258,211	\$1,280,465	\$22,254	2%
14	Security	\$465,258	\$475,152	\$9,894	2%
15	Repairs and Maintenance	\$1,873,714	\$1,767,949	(\$105,765)	-6%
16	Central Sterile Supply	\$416,757	\$469,357	\$52,600	13%
17	Pharmacy Department	\$3,403,240	\$3,386,365	(\$16,875)	0%
18	Other General Services	\$436,302	\$416,369	(\$19,933)	-5%
	Total General Services	\$20,949,370	\$20,927,613	(\$21,757)	0%
B.	<u>Professional Services:</u>				
1	Medical Care Administration	\$156,136	\$114,360	(\$41,776)	-27%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$2,597,521	\$2,375,518	(\$222,003)	-9%
4	Medical Records	\$1,048,330	\$1,161,186	\$112,856	11%
5	Social Service	\$0	\$0	\$0	0%
6	Other Professional Services	\$0	\$396,996	\$396,996	0%
	Total Professional Services	\$3,801,987	\$4,048,060	\$246,073	6%
C.	<u>Special Services:</u>				
1	Operating Room	\$4,314,508	\$4,453,788	\$139,280	3%
2	Recovery Room	\$255,510	\$186,803	(\$68,707)	-27%
3	Anesthesiology	\$0	\$0	\$0	0%
4	Delivery Room	\$935,002	\$860,152	(\$74,850)	-8%
5	Diagnostic Radiology	\$2,501,319	\$2,481,443	(\$19,876)	-1%
6	Diagnostic Ultrasound	\$499,392	\$506,680	\$7,288	1%
7	Radiation Therapy	\$0	\$0	\$0	0%

**WINDHAM COMMUNITY MEMORIAL 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>
8	Radioisotopes	\$644,383	\$650,015	\$5,632	1%
9	CT Scan	\$465,624	\$465,067	(\$557)	0%
10	Laboratory	\$4,545,022	\$4,369,258	(\$175,764)	-4%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$542,447	\$509,260	(\$33,187)	-6%
13	Electrocardiology	\$215,038	\$193,307	(\$21,731)	-10%
14	Electroencephalography	\$125,451	\$189,184	\$63,733	51%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,063,357	\$1,082,620	\$19,263	2%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$5,221,387	\$5,018,896	(\$202,491)	-4%
25	MRI	\$513,348	\$514,684	\$1,336	0%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$642,737	\$640,476	(\$2,261)	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,579,624	\$1,530,288	(\$49,336)	-3%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,594,367	\$3,952,322	\$1,357,955	52%
	Total Special Services	\$26,658,516	\$27,604,243	\$945,727	4%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$6,826,418	\$6,702,480	(\$123,938)	-2%
2	Intensive Care Unit	\$2,246,988	\$2,245,182	(\$1,806)	0%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$0	\$0	\$0	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$550,119	\$491,789	(\$58,330)	-11%
7	Newborn Nursery Unit	\$348,409	\$309,199	(\$39,210)	-11%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$1,130,930	\$1,249,314	\$118,384	10%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$694,052	\$742,013	\$47,961	7%
13	Other Routine Services	\$660,090	\$623,120	(\$36,970)	-6%
	Total Routine Services	\$12,457,006	\$12,363,097	(\$93,909)	-1%
E.	<u>Other Departments:</u>				
1	Miscellaneous Other Departments	\$27,634,939	\$27,696,476	\$61,537	0%
	Total Operating Expenses - All Departments*	\$91,501,818	\$92,639,489	\$1,137,671	1%
	*A. - 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$83,605,148	\$ 86,942,706	\$85,855,448
2	Other Operating Revenue	2,401,877	2,622,664	3,044,239
3	Total Operating Revenue	\$86,007,025	\$89,565,370	\$88,899,687
4	Total Operating Expenses	85,401,157	91,501,818	92,639,489
5	Income/(Loss) From Operations	\$605,868	(\$1,936,448)	(\$3,739,802)
6	Total Non-Operating Revenue	(1,790,872)	273,628	(323,008)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	0.72%	-2.16%	-4.22%
2	Hospital Non Operating Margin	-2.13%	0.30%	-0.36%
3	Hospital Total Margin	-1.41%	-1.85%	-4.59%
4	Income/(Loss) From Operations	\$605,868	(\$1,936,448)	(\$3,739,802)
5	Total Operating Revenue	\$86,007,025	\$89,565,370	\$88,899,687
6	Total Non-Operating Revenue	(\$1,790,872)	\$273,628	(\$323,008)
7	Total Revenue	\$84,216,153	\$89,838,998	\$88,576,679
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	(\$25,502,905)	(\$25,203,815)	(\$35,978,450)
2	Hospital Total Net Assets	(\$20,171,322)	(\$19,935,723)	(\$31,049,573)
3	Hospital Change in Total Net Assets	(\$33,443,309)	\$235,599	(\$11,113,850)
4	Hospital Change in Total Net Assets %	-152.0%	-1.2%	55.7%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.45	0.47	0.46
2	Total Operating Expenses	\$85,401,157	\$91,501,818	\$92,639,489
3	Total Gross Revenue	\$190,183,873	\$193,955,564	\$199,383,125
4	Total Other Operating Revenue	\$0	\$2,622,664	\$3,044,239
5	Private Payment to Cost Ratio	1.02	1.01	1.07
6	Total Non-Government Payments	\$33,973,384	\$34,004,938	\$35,493,561

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
7	Total Uninsured Payments	\$251,059	\$302,544	\$169,214
8	Total Non-Government Charges	\$77,745,972	\$76,539,290	\$76,930,656
9	Total Uninsured Charges	\$4,197,446	\$4,858,520	\$4,692,749
10	<u>Medicare Payment to Cost Ratio</u>	0.98	0.98	0.95
11	Total Medicare Payments	\$33,581,550	\$36,106,801	\$35,809,112
12	Total Medicare Charges	\$75,979,844	\$79,106,934	\$82,259,825
13	<u>Medicaid Payment to Cost Ratio</u>	0.82	0.74	0.61
14	Total Medicaid Payments	\$9,550,095	\$10,787,671	\$10,869,843
15	Total Medicaid Charges	\$26,036,303	\$31,291,584	\$39,143,578
16	<u>Uncompensated Care Cost</u>	\$2,800,025	\$2,938,954	\$2,771,904
17	Charity Care	\$2,094,259	\$2,446,867	\$2,956,537
18	Bad Debts	\$4,141,249	\$3,867,045	\$3,100,374
19	Total Uncompensated Care	\$6,235,508	\$6,313,912	\$6,056,911
20	<u>Uncompensated Care % of Total Expenses</u>	3.3%	3.2%	3.0%
21	Total Operating Expenses	\$85,401,157	\$91,501,818	\$92,639,489
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	2.63	2.10	1.31
2	Total Current Assets	\$24,003,919	\$22,752,848	\$21,775,957
3	Total Current Liabilities	\$9,128,012	\$10,810,042	\$16,617,232
4	<u>Days Cash on Hand</u>	15	14	10
5	Cash and Cash Equivalents	\$3,357,508	\$3,314,081	\$2,502,682
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$3,357,508	\$3,314,081	\$2,502,682
8	Total Operating Expenses	\$85,401,157	\$91,501,818	\$92,639,489
9	Depreciation Expense	\$4,418,804	\$4,522,902	\$4,545,850
10	Operating Expenses less Depreciation Expense	\$80,982,353	\$86,978,916	\$88,093,639
11	<u>Days Revenue in Patient Accounts Receivable</u>	62.76	65.81	62.96

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
12	Net Patient Accounts Receivable	\$ 13,116,037	\$ 14,090,656	\$ 14,881,466
13	Due From Third Party Payers	\$1,258,523	\$1,585,717	\$0
14	Due To Third Party Payers	\$0	\$0	\$71,283
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 14,374,560	\$ 15,676,373	\$ 14,810,183
16	Total Net Patient Revenue	\$83,605,148	\$ 86,942,706	\$ 85,855,448
17	<u>Average Payment Period</u>	41.14	45.36	68.85
18	Total Current Liabilities	\$9,128,012	\$10,810,042	\$16,617,232
19	Total Operating Expenses	\$85,401,157	\$91,501,818	\$92,639,489
20	Depreciation Expense	\$4,418,804	\$4,522,902	\$4,545,850
21	Total Operating Expenses less Depreciation Expense	\$80,982,353	\$86,978,916	\$88,093,639
F. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	(28.9)	(29.4)	(46.8)
2	Total Net Assets	(\$20,171,322)	(\$19,935,723)	(\$31,049,573)
3	Total Assets	\$69,708,385	\$67,833,577	\$66,369,494
4	<u>Cash Flow to Total Debt Ratio</u>	11.2	9.5	1.3
5	Excess/(Deficiency) of Revenues Over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
6	Depreciation Expense	\$4,418,804	\$4,522,902	\$4,545,850
7	Excess of Revenues Over Expenses and Depreciation Expense	\$3,233,800	\$2,860,082	\$483,040
8	Total Current Liabilities	\$9,128,012	\$10,810,042	\$16,617,232
9	Total Long Term Debt	\$19,698,257	\$19,435,038	\$19,388,119
10	Total Current Liabilities and Total Long Term Debt	\$28,826,269	\$30,245,080	\$36,005,351
11	<u>Long Term Debt to Capitalization Ratio</u>	(4,164.0)	(3,881.7)	(166.3)
12	Total Long Term Debt	\$19,698,257	\$19,435,038	\$19,388,119
13	Total Net Assets	(\$20,171,322)	(\$19,935,723)	(\$31,049,573)
14	Total Long Term Debt and Total Net Assets	(\$473,065)	(\$500,685)	(\$11,661,454)
15	<u>Debt Service Coverage Ratio</u>	1.5	1.8	0.1
16	Excess Revenues over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
17	Interest Expense	\$1,483,430	\$1,557,105	\$1,476,666
18	Depreciation and Amortization Expense	\$4,418,804	\$4,522,902	\$4,545,850

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
19	Principal Payments	\$1,681,042	\$886,449	\$19,866,618
G. Other Financial Ratios				
20	Average Age of Plant	13.1	13.8	14.7
21	Accumulated Depreciation	\$57,981,855	\$62,488,848	\$66,982,063
22	Depreciation and Amortization Expense	\$4,418,804	\$4,522,902	\$4,545,850
H. Utilization Measures Summary				
1	Patient Days	20,696	20,850	19,996
2	Discharges	5,343	5,100	4,701
3	ALOS	3.9	4.1	4.3
4	Staffed Beds	87	87	87
5	Available Beds	-	144	144
6	Licensed Beds	144	144	144
6	Occupancy of Staffed Beds	65.2%	65.7%	63.0%
7	Occupancy of Available Beds	39.4%	39.7%	38.0%
8	Full Time Equivalent Employees	608.0	603.4	607.5
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	38.7%	37.0%	36.2%
2	Medicare Gross Revenue Payer Mix Percentage	40.0%	40.8%	41.3%
3	Medicaid Gross Revenue Payer Mix Percentage	13.7%	16.1%	19.6%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	5.2%	3.3%	0.2%
5	Uninsured Gross Revenue Payer Mix Percentage	2.2%	2.5%	2.4%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.3%	0.3%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$73,548,526	\$71,680,770	\$72,237,907
9	Medicare Gross Revenue (Charges)	\$75,979,844	\$79,106,934	\$82,259,825
10	Medicaid Gross Revenue (Charges)	\$26,036,303	\$31,291,584	\$39,143,578
11	Other Medical Assistance Gross Revenue (Charges)	\$9,832,803	\$6,408,291	\$494,058
12	Uninsured Gross Revenue (Charges)	\$4,197,446	\$4,858,520	\$4,692,749
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$588,951	\$609,465	\$555,008
14	Total Gross Revenue (Charges)	\$190,183,873	\$193,955,564	\$199,383,125
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	42.7%	40.9%	42.8%

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
2	Medicare Net Revenue Payer Mix Percentage	42.5%	43.8%	43.4%
3	Medicaid Net Revenue Payer Mix Percentage	12.1%	13.1%	13.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	2.1%	1.6%	0.2%
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	0.4%	0.2%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.3%	0.3%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$33,722,325	\$33,702,394	\$35,324,347
9	Medicare Net Revenue (Payments)	\$33,581,550	\$36,106,801	\$35,809,112
10	Medicaid Net Revenue (Payments)	\$9,550,095	\$10,787,671	\$10,869,843
11	Other Medical Assistance Net Revenue (Payments)	\$1,634,585	\$1,361,046	\$146,864
12	Uninsured Net Revenue (Payments)	\$251,059	\$302,544	\$169,214
13	CHAMPUS / TRICARE Net Revenue Payments)	\$229,128	\$227,611	\$187,666
14	Total Net Revenue (Payments)	\$78,968,742	\$82,488,067	\$82,507,046
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	1,601	1,381	1,256
2	Medicare	2,534	2,517	2,372
3	Medical Assistance	1,195	1,188	1,055
4	Medicaid	961	1,061	1,035
5	Other Medical Assistance	234	127	20
6	CHAMPUS / TRICARE	13	14	18
7	Uninsured (Included In Non-Government)	87	106	66
8	Total	5,343	5,100	4,701
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	0.942000	0.926300	0.962000
2	Medicare	1.183200	1.179900	1.272800
3	Medical Assistance	0.779513	0.862090	0.892720
4	Medicaid	0.748900	0.816400	0.896700
5	Other Medical Assistance	0.905240	1.243800	0.686770
6	CHAMPUS / TRICARE	0.955000	0.991300	0.588500
7	Uninsured (Included In Non-Government)	0.836000	0.727000	1.056700
8	Total Case Mix Index	1.020083	1.036680	1.101843
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	3,721	3,665	3,378
2	Emergency Room - Treated and Discharged	26,293	28,697	30,744
3	Total Emergency Room Visits	30,014	32,362	34,122

**WINDHAM COMMUNITY MEMORIAL 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
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$242,370	\$75,288	(\$167,082)	-69%
2	Inpatient Payments	\$162,233	\$46,816	(\$115,417)	-71%
3	Outpatient Charges	\$43,570	\$55,779	\$12,209	28%
4	Outpatient Payments	\$10,696	\$16,340	\$5,644	53%
5	Discharges	12	5	(7)	-58%
6	Patient Days	88	34	(54)	-61%
7	Outpatient Visits (Excludes ED Visits)	75	96	21	28%
8	Emergency Department Outpatient Visits	9	1	(8)	-89%
9	Emergency Department Inpatient Admissions	8	4	(4)	-50%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$285,940	\$131,067	(\$154,873)	-54%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$172,929	\$63,156	(\$109,773)	-63%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$730,696	\$1,955,197	\$1,224,501	168%
2	Inpatient Payments	\$479,117	\$1,201,980	\$722,863	151%
3	Outpatient Charges	\$1,279,414	\$2,259,415	\$980,001	77%
4	Outpatient Payments	\$336,582	\$552,093	\$215,511	64%
5	Discharges	52	123	71	137%
6	Patient Days	220	540	320	145%
7	Outpatient Visits (Excludes ED Visits)	1,636	2,404	768	47%
8	Emergency Department Outpatient Visits	84	179	95	113%
9	Emergency Department Inpatient Admissions	32	104	72	225%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,010,110	\$4,214,612	\$2,204,502	110%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$815,699	\$1,754,073	\$938,374	115%

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

(1) LINE	(2) DESCRIPTION	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$2,324,660	\$410,618	(\$1,914,042)	-82%
2	Inpatient Payments	\$1,275,079	\$255,659	(\$1,019,420)	-80%
3	Outpatient Charges	\$2,142,255	\$469,614	(\$1,672,641)	-78%
4	Outpatient Payments	\$619,431	\$109,712	(\$509,719)	-82%
5	Discharges	125	28	(97)	-78%
6	Patient Days	650	144	(506)	-78%
7	Outpatient Visits (Excludes ED Visits)	2,405	704	(1,701)	-71%
8	Emergency Department Outpatient Visits	174	38	(136)	-78%
9	Emergency Department Inpatient Admissions	69	22	(47)	-68%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,466,915	\$880,232	(\$3,586,683)	-80%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,894,510	\$365,371	(\$1,529,139)	-81%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$140,508	\$1,126,835	\$986,327	702%
2	Inpatient Payments	\$84,581	\$511,104	\$426,523	504%
3	Outpatient Charges	\$457,540	\$929,579	\$472,039	103%
4	Outpatient Payments	\$121,578	\$217,510	\$95,932	79%
5	Discharges	14	58	44	314%
6	Patient Days	39	330	291	746%
7	Outpatient Visits (Excludes ED Visits)	551	931	380	69%
8	Emergency Department Outpatient Visits	69	99	30	43%
9	Emergency Department Inpatient Admissions	8	48	40	500%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$598,048	\$2,056,414	\$1,458,366	244%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$206,159	\$728,614	\$522,455	253%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**WINDHAM COMMUNITY MEMORIAL 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
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
I. AETNA					
1	Inpatient Charges	\$75,200	\$74,028	(\$1,172)	-2%
2	Inpatient Payments	\$46,233	\$38,648	(\$7,585)	-16%
3	Outpatient Charges	\$95,724	\$155,778	\$60,054	63%
4	Outpatient Payments	\$25,025	\$79,040	\$54,015	216%
5	Discharges	4	4	0	0%
6	Patient Days	23	28	5	22%
7	Outpatient Visits (Excludes ED Visits)	181	157	(24)	-13%
8	Emergency Department Outpatient Visits	10	5	(5)	-50%
9	Emergency Department Inpatient Admissions	4	3	(1)	-25%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$170,924	\$229,806	\$58,882	34%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$71,258	\$117,688	\$46,430	65%

**WINDHAM COMMUNITY MEMORIAL 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
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$19,141	\$6,872	(\$12,269)	-64%
4	Outpatient Payments	\$4,252	\$1,684	(\$2,568)	-60%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	19	10	(9)	-47%
8	Emergency Department Outpatient Visits	4	2	(2)	-50%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$19,141	\$6,872	(\$12,269)	-64%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,252	\$1,684	(\$2,568)	-60%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$530,558	\$530,558	0%
2	Inpatient Payments	\$0	\$241,279	\$241,279	0%
3	Outpatient Charges	\$0	\$415,962	\$415,962	0%
4	Outpatient Payments	\$0	\$111,763	\$111,763	0%
5	Discharges	0	25	25	0%
6	Patient Days	0	132	132	0%
7	Outpatient Visits (Excludes ED Visits)	0	376	376	0%
8	Emergency Department Outpatient Visits	0	36	36	0%
9	Emergency Department Inpatient Admissions	0	23	23	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$946,520	\$946,520	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$353,042	\$353,042	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**WINDHAM COMMUNITY MEMORIAL 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
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$1,169,285	\$1,295,126	\$125,841	11%
2	Inpatient Payments	\$484,593	\$636,651	\$152,058	31%
3	Outpatient Charges	\$919,397	\$1,594,235	\$674,838	73%
4	Outpatient Payments	\$223,500	\$378,586	\$155,086	69%
5	Discharges	54	72	18	33%
6	Patient Days	280	417	137	49%
7	Outpatient Visits (Excludes ED Visits)	1,148	2,366	1,218	106%
8	Emergency Department Outpatient Visits	154	183	29	19%
9	Emergency Department Inpatient Admissions	33	69	36	109%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,088,682	\$2,889,361	\$800,679	38%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$708,093	\$1,015,237	\$307,144	43%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$4,682,719	\$5,467,650	\$784,931	17%
	TOTAL INPATIENT PAYMENTS	\$2,531,836	\$2,932,137	\$400,301	16%
	TOTAL OUTPATIENT CHARGES	\$4,957,041	\$5,887,234	\$930,193	19%
	TOTAL OUTPATIENT PAYMENTS	\$1,341,064	\$1,466,728	\$125,664	9%
	TOTAL DISCHARGES	261	315	54	21%
	TOTAL PATIENT DAYS	1,300	1,625	325	25%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	6,015	7,044	1,029	17%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	504	543	39	8%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	154	273	119	77%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,639,760	\$11,354,884	\$1,715,124	18%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,872,900	\$4,398,865	\$525,965	14%

**WINDHAM COMMUNITY MEMORIAL 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
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$1,203	\$0	(\$1,203)	-100%
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	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$1,203	\$0	(\$1,203)	-100%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$2,824,552	\$2,429,181	(\$395,371)	-14%
2	Inpatient Payments	\$1,472,503	\$1,047,461	(\$425,042)	-29%
3	Outpatient Charges	\$9,145,109	\$8,808,475	(\$336,634)	-4%
4	Outpatient Payments	\$2,833,589	\$2,412,472	(\$421,117)	-15%
5	Discharges	402	323	(79)	-20%
6	Patient Days	1,000	803	(197)	-20%
7	Outpatient Visits (Excludes ED Visits)	7,595	6,917	(678)	-9%
8	Emergency Department Outpatient Visits	4,902	5,246	344	7%
9	Emergency Department Inpatient Admissions	113	100	(13)	-12%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$11,969,661	\$11,237,656	(\$732,005)	-6%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$4,306,092	\$3,459,933	(\$846,159)	-20%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$443	\$0	(\$443)	-100%
4	Outpatient Payments	\$69	\$0	(\$69)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	2	0	(2)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$443	\$0	(\$443)	-100%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$69	\$0	(\$69)	-100%

**WINDHAM COMMUNITY MEMORIAL 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
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

**WINDHAM COMMUNITY MEMORIAL 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%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	G. UNITED HEALTHCARE				
1	Inpatient Charges	\$744,455	\$506,145	(\$238,310)	-32%
2	Inpatient Payments	\$384,941	\$256,744	(\$128,197)	-33%
3	Outpatient Charges	\$1,545,435	\$1,577,030	\$31,595	2%
4	Outpatient Payments	\$452,294	\$406,627	(\$45,667)	-10%
5	Discharges	110	77	(33)	-30%
6	Patient Days	264	197	(67)	-25%
7	Outpatient Visits (Excludes ED Visits)	1,298	1,490	192	15%
8	Emergency Department Outpatient Visits	1,050	1,001	(49)	-5%
9	Emergency Department Inpatient Admissions	18	17	(1)	-6%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,289,890	\$2,083,175	(\$206,715)	-9%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$837,235	\$663,371	(\$173,864)	-21%
	H. AETNA				
1	Inpatient Charges	\$1,049,845	\$743,713	(\$306,132)	-29%
2	Inpatient Payments	\$494,475	\$349,159	(\$145,316)	-29%
3	Outpatient Charges	\$2,169,479	\$2,213,411	\$43,932	2%
4	Outpatient Payments	\$584,069	\$496,880	(\$87,189)	-15%
5	Discharges	121	106	(15)	-12%
6	Patient Days	362	274	(88)	-24%
7	Outpatient Visits (Excludes ED Visits)	1,593	1,733	140	9%
8	Emergency Department Outpatient Visits	1,232	1,356	124	10%
9	Emergency Department Inpatient Admissions	30	22	(8)	-27%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,219,324	\$2,957,124	(\$262,200)	-8%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,078,544	\$846,039	(\$232,505)	-22%
	II. TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$4,618,852	\$3,679,039	(\$939,813)	-20%
	TOTAL INPATIENT PAYMENTS	\$2,351,919	\$1,653,364	(\$698,555)	-30%
	TOTAL OUTPATIENT CHARGES	\$12,861,669	\$12,598,916	(\$262,753)	-2%
	TOTAL OUTPATIENT PAYMENTS	\$3,870,021	\$3,315,979	(\$554,042)	-14%
	TOTAL DISCHARGES	633	506	(127)	-20%
	TOTAL PATIENT DAYS	1,626	1,274	(352)	-22%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	10,488	10,140	(348)	-3%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	7,185	7,603	418	6%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	161	139	(22)	-14%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$17,480,521	\$16,277,955	(\$1,202,566)	-7%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,221,940	\$4,969,343	(\$1,252,597)	-20%

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

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

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	<u>ASSETS</u>				
A.	<u>Current Assets:</u>				
1	Cash and Cash Equivalents	\$3,314,081	\$2,502,682	(\$811,399)	-24%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$14,090,656	\$14,881,466	\$790,810	6%
4	Current Assets Whose Use is Limited for Current Liabilities	\$677,311	\$762,364	\$85,053	13%
5	Due From Affiliates	\$105,104	\$170,422	\$65,318	62%
6	Due From Third Party Payers	\$1,585,717	\$0	(\$1,585,717)	-100%
7	Inventories of Supplies	\$1,175,285	\$1,113,332	(\$61,953)	-5%
8	Prepaid Expenses	\$280,392	\$839,664	\$559,272	199%
9	Other Current Assets	\$1,524,302	\$1,506,027	(\$18,275)	-1%
	Total Current Assets	\$22,752,848	\$21,775,957	(\$976,891)	-4%
B.	<u>Noncurrent Assets Whose Use is Limited:</u>				
1	Held by Trustee	\$2,607,805	\$2,505,394	(\$102,411)	-4%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$1,673,374	\$1,439,934	(\$233,440)	-14%
4	Other Noncurrent Assets Whose Use is Limited	\$1,885,179	\$1,477,742	(\$407,437)	-22%
	Total Noncurrent Assets Whose Use is Limited:	\$6,166,358	\$5,423,070	(\$743,288)	-12%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$347,049	\$325,966	(\$21,083)	-6%
7	Other Noncurrent Assets	\$2,339,911	\$2,036,739	(\$303,172)	-13%
C.	<u>Net Fixed Assets:</u>				
1	Property, Plant and Equipment	\$98,445,867	\$101,775,114	\$3,329,247	3%
2	Less: Accumulated Depreciation	\$62,488,848	\$66,982,063	\$4,493,215	\$0
	Property, Plant and Equipment, Net	\$35,957,019	\$34,793,051	(\$1,163,968)	-3%
3	Construction in Progress	\$270,392	\$2,014,711	\$1,744,319	645%
	Total Net Fixed Assets	\$36,227,411	\$36,807,762	\$580,351	2%
	Total Assets	\$67,833,577	\$66,369,494	(\$1,464,083)	-2%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$3,465,207	\$5,823,590	\$2,358,383	68%
2	Salaries, Wages and Payroll Taxes	\$840,849	\$813,367	(\$27,482)	-3%
3	Due To Third Party Payers	\$0	\$71,283	\$71,283	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$263,466	\$3,406,605	\$3,143,139	1193%
6	Current Portion of Notes Payable	\$440,019	\$367,375	(\$72,644)	-17%
7	Other Current Liabilities	\$5,800,501	\$6,135,012	\$334,511	6%
	Total Current Liabilities	\$10,810,042	\$16,617,232	\$5,807,190	54%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$19,435,038	\$19,388,119	(\$46,919)	0%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$19,435,038	\$19,388,119	(\$46,919)	0%
3	Accrued Pension Liability	\$53,726,319	\$56,931,181	\$3,204,862	6%
4	Other Long Term Liabilities	\$3,797,901	\$4,482,535	\$684,634	18%
	Total Long Term Liabilities	\$76,959,258	\$80,801,835	\$3,842,577	5%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	(\$25,203,815)	(\$35,978,450)	(\$10,774,635)	43%
2	Temporarily Restricted Net Assets	\$1,538,289	\$1,318,536	(\$219,753)	-14%
3	Permanently Restricted Net Assets	\$3,729,803	\$3,610,341	(\$119,462)	-3%
	Total Net Assets	(\$19,935,723)	(\$31,049,573)	(\$11,113,850)	56%
	Total Liabilities and Net Assets	\$67,833,577	\$66,369,494	(\$1,464,083)	-2%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$193,955,564	\$199,383,125	\$5,427,561	3%
2	Less: Allowances	\$104,466,765	\$110,493,786	\$6,027,021	6%
3	Less: Charity Care	\$2,546,093	\$3,033,891	\$487,798	19%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$86,942,706	\$85,855,448	(\$1,087,258)	-1%
5	Other Operating Revenue	\$2,622,664	\$3,044,239	\$421,575	16%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$89,565,370	\$88,899,687	(\$665,683)	-1%
B. Operating Expenses:					
1	Salaries and Wages	\$39,301,133	\$41,345,796	\$2,044,663	5%
2	Fringe Benefits	\$14,575,223	\$16,084,939	\$1,509,716	10%
3	Physicians Fees	\$932,425	\$693,799	(\$238,626)	-26%
4	Supplies and Drugs	\$7,995,028	\$7,777,841	(\$217,187)	-3%
5	Depreciation and Amortization	\$4,522,902	\$4,545,850	\$22,948	1%
6	Bad Debts	\$5,459,445	\$3,365,182	(\$2,094,263)	-38%
7	Interest	\$1,557,105	\$1,476,666	(\$80,439)	-5%
8	Malpractice	\$635,157	\$609,350	(\$25,807)	-4%
9	Other Operating Expenses	\$16,523,400	\$16,740,066	\$216,666	1%
	Total Operating Expenses	\$91,501,818	\$92,639,489	\$1,137,671	1%
	Income/(Loss) From Operations	(\$1,936,448)	(\$3,739,802)	(\$1,803,354)	93%
C. Non-Operating Revenue:					
1	Income from Investments	\$96,303	(\$16,806)	(\$113,109)	-117%
2	Gifts, Contributions and Donations	\$252,482	\$265,347	\$12,865	5%
3	Other Non-Operating Gains/(Losses)	(\$95,417)	(\$561,377)	(\$465,960)	488%
	Total Non-Operating Revenue	\$253,368	(\$312,836)	(\$566,204)	-223%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	(\$1,683,080)	(\$4,052,638)	(\$2,369,558)	141%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$20,260	(\$10,172)	(\$30,432)	-150%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$20,260	(\$10,172)	(\$30,432)	-150%
	Excess/(Deficiency) of Revenue Over Expenses	(\$1,662,820)	(\$4,062,810)	(\$2,399,990)	144%

WINDHAM COMMUNITY MEMORIAL HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2011

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$83,605,148	\$86,942,706	\$85,855,448
2	Other Operating Revenue	2,401,877	2,622,664	3,044,239
3	Total Operating Revenue	\$86,007,025	\$89,565,370	\$88,899,687
4	Total Operating Expenses	85,401,157	91,501,818	92,639,489
5	Income/(Loss) From Operations	\$605,868	(\$1,936,448)	(\$3,739,802)
6	Total Non-Operating Revenue	(1,790,872)	273,628	(323,008)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	0.72%	-2.16%	-4.22%
2	Parent Corporation Non-Operating Margin	-2.13%	0.30%	-0.36%
3	Parent Corporation Total Margin	-1.41%	-1.85%	-4.59%
4	Income/(Loss) From Operations	\$605,868	(\$1,936,448)	(\$3,739,802)
5	Total Operating Revenue	\$86,007,025	\$89,565,370	\$88,899,687
6	Total Non-Operating Revenue	(\$1,790,872)	\$273,628	(\$323,008)
7	Total Revenue	\$84,216,153	\$89,838,998	\$88,576,679
8	Excess/(Deficiency) of Revenue Over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	(\$25,502,905)	(\$25,203,815)	-\$35,978,450
2	Parent Corporation Total Net Assets	(\$20,171,322)	(\$19,935,723)	(\$31,049,573)
3	Parent Corporation Change in Total Net Assets	(\$33,443,309)	\$235,599	(\$11,113,850)
4	Parent Corporation Change in Total Net Assets %	-152.0%	-1.2%	55.7%

WINDHAM COMMUNITY MEMORIAL HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2011

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
D. Liquidity Measures Summary				
1	Current Ratio	2.63	2.10	1.31
2	Total Current Assets	\$24,003,919	\$22,752,848	\$21,775,957
3	Total Current Liabilities	\$9,128,012	\$10,810,042	\$16,617,232
4	Days Cash on Hand	15	14	10
5	Cash and Cash Equivalents	\$3,357,508	\$3,314,081	\$2,502,682
6	Short Term Investments	0	0	0
7	Total Cash and Short Term Investments	\$3,357,508	\$3,314,081	\$2,502,682
8	Total Operating Expenses	\$85,401,157	\$91,501,818	\$92,639,489
9	Depreciation Expense	\$4,418,804	\$4,522,902	\$4,545,850
10	Operating Expenses less Depreciation Expense	\$80,982,353	\$86,978,916	\$88,093,639
11	Days Revenue in Patient Accounts Receivable	63	66	63
12	Net Patient Accounts Receivable	\$ 13,116,037	\$ 14,090,656	\$ 14,881,466
13	Due From Third Party Payers	\$1,258,523	\$1,585,717	\$0
14	Due To Third Party Payers	\$0	\$0	\$71,283
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 14,374,560	\$ 15,676,373	\$ 14,810,183
16	Total Net Patient Revenue	\$83,605,148	\$86,942,706	\$85,855,448
17	Average Payment Period	41	45	69
18	Total Current Liabilities	\$9,128,012	\$10,810,042	\$16,617,232
19	Total Operating Expenses	\$85,401,157	\$91,501,818	\$92,639,489
20	Depreciation Expense	\$4,418,804	\$4,522,902	\$4,545,850
21	Total Operating Expenses less Depreciation Expense	\$80,982,353	\$86,978,916	\$88,093,639

WINDHAM COMMUNITY MEMORIAL HOSPITAL

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2011

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	(28.9)	(29.4)	(46.8)
2	Total Net Assets	(\$20,171,322)	(\$19,935,723)	(\$31,049,573)
3	Total Assets	\$69,708,385	\$67,833,577	\$66,369,494
4	<u>Cash Flow to Total Debt Ratio</u>	11.2	9.5	1.3
5	Excess/(Deficiency) of Revenues Over Expenses	(\$1,185,004)	(\$1,662,820)	(\$4,062,810)
6	Depreciation Expense	\$4,418,804	\$4,522,902	\$4,545,850
7	Excess of Revenues Over Expenses and Depreciation Expense	\$3,233,800	\$2,860,082	\$483,040
8	Total Current Liabilities	\$9,128,012	\$10,810,042	\$16,617,232
9	Total Long Term Debt	\$19,698,257	\$19,435,038	\$19,388,119
10	Total Current Liabilities and Total Long Term Debt	\$28,826,269	\$30,245,080	\$36,005,351
11	<u>Long Term Debt to Capitalization Ratio</u>	(4,164.0)	(3,881.7)	(166.3)
12	Total Long Term Debt	\$19,698,257	\$19,435,038	\$19,388,119
13	Total Net Assets	(\$20,171,322)	(\$19,935,723)	(\$31,049,573)
14	Total Long Term Debt and Total Net Assets	(\$473,065)	(\$500,685)	(\$11,661,454)

WINDHAM COMMUNITY MEMORIAL 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
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	15,674	3,833	3,838	53	104	81.0%	41.3%
2	ICU/CCU (Excludes Neonatal ICU)	2,359	584	0	12	12	53.9%	53.9%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0	0	0	0	0	0.0%	0.0%
	TOTAL PSYCHIATRIC	0	0	0	0	0	0.0%	0.0%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	1,086	481	495	14	14	21.3%	21.3%
7	Newborn	877	387	391	8	14	30.0%	17.2%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	0	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	19,119	4,314	4,333	79	130	66.3%	40.3%
	TOTAL INPATIENT BED UTILIZATION	19,996	4,701	4,724	87	144	63.0%	38.0%
	TOTAL INPATIENT REPORTED YEAR	19,996	4,701	4,724	87	144	63.0%	38.0%
	TOTAL INPATIENT PRIOR YEAR	20,850	0	0	87	144	65.7%	39.7%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-854	4,701	4,724	0	0	-2.7%	-1.6%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-4%	0%	0%	0%	0%	-4%	-4%
	Total Licensed Beds and Bassinets	144						
(A) This number may not exceed the number of available beds for each department or in total.								

WINDHAM COMMUNITY MEMORIAL 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
A. CT Scans (A)					
1	Inpatient Scans	3,523	2,825	-698	-20%
2	Outpatient Scans (Excluding Emergency Department Scans)	4,463	3,503	-960	-22%
3	Emergency Department Scans	5,071	4,417	-654	-13%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	13,057	10,745	-2,312	-18%
B. MRI Scans (A)					
1	Inpatient Scans	572	518	-54	-9%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,806	3,823	17	0%
3	Emergency Department Scans	59	74	15	25%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	4,437	4,415	-22	0%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	7	7	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	104	119	15	14%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	111	126	15	14%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	1,249	1,284	35	3%
2	Outpatient Surgical Procedures	6,058	5,200	-858	-14%
	Total Surgical Procedures	7,307	6,484	-823	-11%
J. Endoscopy Procedures					

WINDHAM COMMUNITY MEMORIAL 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
1	Inpatient Endoscopy Procedures	1,213	1,187	-26	-2%
2	Outpatient Endoscopy Procedures	3,302	3,200	-102	-3%
	Total Endoscopy Procedures	4,515	4,387	-128	-3%
	K. Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	3,665	3,378	-287	-8%
2	Emergency Room Visits: Treated and Discharged	28,697	30,744	2,047	7%
	Total Emergency Room Visits	32,362	34,122	1,760	5%
	L. Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	2,998	2,866	-132	-4%
	Total Hospital Clinic Visits	2,998	2,866	-132	-4%
	M. Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	15,550	17,964	2,414	16%
2	Cardiology	1,665	1,743	78	5%
3	Chemotherapy	156	214	58	37%
4	Gastroenterology	0	2	2	0%
5	Other Outpatient Visits	103,765	104,374	609	1%
	Total Other Hospital Outpatient Visits	121,136	124,297	3,161	3%
	N. Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	215.4	208.6	-6.8	-3%
2	Total Physician FTEs	4.5	9.3	4.8	107%
3	Total Non-Nursing and Non-Physician FTEs	383.5	389.6	6.1	2%
	Total Hospital Full Time Equivalent Employees	603.4	607.5	4.1	1%

WINDHAM COMMUNITY MEMORIAL 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
A. Outpatient Surgical Procedures					
1	Windham Hospital	6,058	5,200	-858	-14%
	Total Outpatient Surgical Procedures(A)	6,058	5,200	-858	-14%
B. Outpatient Endoscopy Procedures					
1	Windham Hospital	3,302	3,200	-102	-3%
	Total Outpatient Endoscopy Procedures(B)	3,302	3,200	-102	-3%
C. Outpatient Hospital Emergency Room Visits					
1	Windham Hospital	28,697	30,744	2,047	7%
	Total Outpatient Hospital Emergency Room Visits(C)	28,697	30,744	2,047	7%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

WINDHAM COMMUNITY MEMORIAL 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
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$43,401,649	\$43,834,404	\$432,755	1%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$26,608,521	\$26,334,949	(\$273,572)	-1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	61.31%	60.08%	-1.23%	-2%
4	DISCHARGES	2,517	2,372	(145)	-6%
5	CASE MIX INDEX (CMI)	1.17990	1.27280	0.09290	8%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,969,80830	3,019,08160	49,27330	2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,959.68	\$8,722.83	(\$236.84)	-3%
8	PATIENT DAYS	12,340	12,400	60	0%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,156.28	\$2,123.79	(\$32.50)	-2%
10	AVERAGE LENGTH OF STAY	4.9	5.2	0.3	7%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$35,705,285	\$38,425,421	\$2,720,136	8%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$9,498,280	\$9,474,163	(\$24,117)	0%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.60%	24.66%	-1.95%	-7%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	82.27%	87.66%	5.39%	7%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,070.66331	2,079.30507	8.64176	0%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,587.07	\$4,556.41	(\$30.66)	-1%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$79,106,934	\$82,259,825	\$3,152,891	4%
18	TOTAL ACCRUED PAYMENTS	\$36,106,801	\$35,809,112	(\$297,689)	-1%
19	TOTAL ALLOWANCES	\$43,000,133	\$46,450,713	\$3,450,580	8%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$17,841,128	\$16,693,012	(\$1,148,116)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$8,997,337	\$9,413,815	\$416,478	5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	50.43%	56.39%	5.96%	12%
4	DISCHARGES	1,381	1,256	(125)	-9%
5	CASE MIX INDEX (CMI)	0.92630	0.96200	0.03570	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,279.22030	1,208.27200	(70.94830)	-6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,033.45	\$7,791.14	\$757.69	11%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	\$1,926.22	\$931.70	(\$994.53)	-52%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,464,063	\$1,125,742	(\$1,338,321)	-54%
10	PATIENT DAYS	4,491	3,966	(525)	-12%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,003.42	\$2,373.63	\$370.21	18%
12	AVERAGE LENGTH OF STAY	3.3	3.2	(0.1)	-3%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$58,698,162	\$60,237,644	\$1,539,482	3%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$25,007,601	\$26,079,746	\$1,072,145	4%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	42.60%	43.29%	0.69%	2%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	329.00%	360.86%	31.85%	10%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,543.55586	4,532.34448	(11.21138)	0%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,503.97	\$5,754.14	\$250.17	5%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$916.90)	(\$1,197.73)	(\$280.83)	31%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$4,165,987)	(\$5,428,534)	(\$1,262,547)	30%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$76,539,290	\$76,930,656	\$391,366	1%
22	TOTAL ACCRUED PAYMENTS	\$34,004,938	\$35,493,561	\$1,488,623	4%
23	TOTAL ALLOWANCES	\$42,534,352	\$41,437,095	(\$1,097,257)	-3%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,701,924)	(\$4,302,792)	(\$2,600,868)	153%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$67,897,196	\$70,584,617	\$2,687,421	4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$33,702,394	\$35,324,347	\$1,621,953	5%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,194,802	\$35,260,270	\$1,065,468	3%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	50.36%	49.95%	-0.41%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$1,567,998	\$952,163	(\$615,835)	-39%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$147,158	\$46,750	(\$100,408)	-68%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	9.39%	4.91%	-4.48%	-48%
4	DISCHARGES	106	66	(40)	-38%
5	CASE MIX INDEX (CMI)	0.72700	1.05670	0.32970	45%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	77.06200	69.74220	(7.31980)	-9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$1,909.61	\$670.33	(\$1,239.28)	-65%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$5,123.85	\$7,120.81	\$1,996.96	39%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$7,050.07	\$8,052.51	\$1,002.44	14%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$543,293	\$561,600	\$18,307	3%
11	PATIENT DAYS	398	220	(178)	-45%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$369.74	\$212.50	(\$157.24)	-43%
13	AVERAGE LENGTH OF STAY	3.8	3.3	(0.4)	-11%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$3,290,522	\$3,740,586	\$450,064	14%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$155,386	\$122,464	(\$32,922)	-21%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	4.72%	3.27%	-1.45%	-31%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	209.85%	392.85%	183.00%	87%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	222.44629	259.28195	36.83566	17%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$698.53	\$472.32	(\$226.21)	-32%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$4,805.44	\$5,281.82	\$476.38	10%
21	MEDICARE - UNINSURED OP PMT / OPED	\$3,888.54	\$4,084.09	\$195.55	5%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$864,991	\$1,058,930	\$193,939	22%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$4,858,520	\$4,692,749	(\$165,771)	-3%
24	TOTAL ACCRUED PAYMENTS	\$302,544	\$169,214	(\$133,330)	-44%
25	TOTAL ALLOWANCES	\$4,555,976	\$4,523,535	(\$32,441)	-1%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,408,284	\$1,620,530	\$212,247	15%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$10,036,189	\$11,264,038	\$1,227,849	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,043,975	\$4,163,615	(\$880,360)	-17%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	50.26%	36.96%	-13.29%	-26%
4	DISCHARGES	1,061	1,035	(26)	-2%
5	CASE MIX INDEX (CMI)	0.81640	0.89670	0.08030	10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	866.20040	928.08450	61.88410	7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,823.10	\$4,486.25	(\$1,336.86)	-23%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$1,210.35	\$3,304.89	\$2,094.54	173%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,136.57	\$4,236.59	\$1,100.02	35%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,716,900	\$3,931,912	\$1,215,012	45%
11	PATIENT DAYS	3,359	3,525	166	5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,501.63	\$1,181.17	(\$320.46)	-21%
13	AVERAGE LENGTH OF STAY	3.2	3.4	0.2	8%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$21,255,395	\$27,879,540	\$6,624,145	31%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$5,743,696	\$6,706,228	\$962,532	17%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.02%	24.05%	-2.97%	-11%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	211.79%	247.51%	35.72%	17%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,247,06550	2,561,72111	314,65560	14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,556.09	\$2,617.86	\$61.77	2%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$2,947.88	\$3,136.28	\$188.40	6%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,030.98	\$1,938.55	(\$92.44)	-5%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,563,753	\$4,966,019	\$402,266	9%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$31,291,584	\$39,143,578	\$7,851,994	25%
24	TOTAL ACCRUED PAYMENTS	\$10,787,671	\$10,869,843	\$82,172	1%
25	TOTAL ALLOWANCES	\$20,503,913	\$28,273,735	\$7,769,822	38%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,280,654	\$8,897,932	\$1,617,278	22%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$2,069,554	\$313,592	(\$1,755,962)	-85%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$646,001	\$118,590	(\$527,411)	-82%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.21%	37.82%	6.60%	21%
4	DISCHARGES	127	20	(107)	-84%
5	CASE MIX INDEX (CMI)	1.24380	0.68677	(0.55703)	-45%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	157.96260	13.73540	(144.22720)	-91%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,089.58	\$8,633.89	\$4,544.31	111%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$2,943.87	(\$842.76)	(\$3,786.63)	-129%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$4,870.09	\$88.94	(\$4,781.15)	-98%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$769,293	\$1,222	(\$768,071)	-100%
11	PATIENT DAYS	622	70	(552)	-89%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,038.59	\$1,694.14	\$655.56	63%
13	AVERAGE LENGTH OF STAY	4.9	3.5	(1.4)	-29%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$4,338,737	\$180,466	(\$4,158,271)	-96%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$715,045	\$28,274	(\$686,771)	-96%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.48%	15.67%	-0.81%	-5%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	209.65%	57.55%	-152.10%	-73%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	266.25041	11.50960	(254.74080)	-96%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,685.61	\$2,456.56	(\$229.05)	-9%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$2,818.36	\$3,297.58	\$479.22	17%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$1,901.46	\$2,099.85	\$198.39	10%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$506,265	\$24,168	(\$482,096)	-95%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$6,408,291	\$494,058	(\$5,914,233)	-92%
24	TOTAL ACCRUED PAYMENTS	\$1,361,046	\$146,864	(\$1,214,182)	-89%
25	TOTAL ALLOWANCES	\$5,047,245	\$347,194	(\$4,700,051)	-93%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$1,275,557	\$25,390	(\$1,250,167)	-98%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$12,105,743	\$11,577,630	(\$528,113)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$5,689,976	\$4,282,205	(\$1,407,771)	-25%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	47.00%	36.99%	-10.02%	-21%
4	DISCHARGES	1,188	1,055	(133)	-11%
5	CASE MIX INDEX (CMI)	0.86209	0.89272	0.03063	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,024.16300	941.81990	(82.34310)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,555.73	\$4,546.73	(\$1,009.00)	-18%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,477.72	\$3,244.40	\$1,766.68	120%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,403.94	\$4,176.10	\$772.16	23%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,486,193	\$3,933,134	\$446,941	13%
11	PATIENT DAYS	3,981	3,595	(386)	-10%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,429.28	\$1,191.16	(\$238.13)	-17%
13	AVERAGE LENGTH OF STAY	3.4	3.4	0.1	2%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$25,594,132	\$28,060,006	\$2,465,874	10%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$6,458,741	\$6,734,502	\$275,761	4%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.24%	24.00%	-1.23%	-5%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	211.42%	242.36%	30.94%	15%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,513.31591	2,573.23071	59.91480	2%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,569.81	\$2,617.14	\$47.33	2%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,934.16	\$3,137.00	\$202.84	7%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,017.26	\$1,939.27	(\$77.99)	-4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,070,018	\$4,990,188	(\$79,830)	-2%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$37,699,875	\$39,637,636	\$1,937,761	5%
24	TOTAL ACCRUED PAYMENTS	\$12,148,717	\$11,016,707	(\$1,132,010)	-9%
25	TOTAL ALLOWANCES	\$25,551,158	\$28,620,929	\$3,069,771	12%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$136,260	\$117,471	(\$18,789)	-14%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$57,058	\$53,482	(\$3,576)	-6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.87%	45.53%	3.65%	9%
4	DISCHARGES	14	18	4	29%
5	CASE MIX INDEX (CMI)	0.99130	0.58850	(0.40280)	-41%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	13.87820	10.59300	(3.28520)	-24%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,111.34	\$5,048.81	\$937.47	23%
8	PATIENT DAYS	38	35	(3)	-8%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,501.53	\$1,528.06	\$26.53	2%
10	AVERAGE LENGTH OF STAY	2.7	1.9	(0.8)	-28%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$473,205	\$437,537	(\$35,668)	-8%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$170,553	\$134,184	(\$36,369)	-21%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$609,465	\$555,008	(\$54,457)	-9%
14	TOTAL ACCRUED PAYMENTS	\$227,611	\$187,666	(\$39,945)	-18%
15	TOTAL ALLOWANCES	\$381,854	\$367,342	(\$14,512)	-4%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$2,622,664	\$3,044,239	\$421,575	16%
2	TOTAL OPERATING EXPENSES	\$91,501,818	\$92,639,489	\$1,137,671	1%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$587,594	\$0	(\$587,594)	-100%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$2,446,867	\$2,956,537	\$509,670	21%
5	BAD DEBTS (CHARGES)	\$3,867,045	\$3,100,374	(\$766,671)	-20%
6	UNCOMPENSATED CARE (CHARGES)	\$6,313,912	\$6,056,911	(\$257,001)	-4%
7	COST OF UNCOMPENSATED CARE	\$2,715,770	\$2,508,770	(\$207,000)	-8%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$37,699,875	\$39,637,636	\$1,937,761	5%
9	TOTAL ACCRUED PAYMENTS	\$12,148,717	\$11,016,707	(\$1,132,010)	-9%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$16,215,649	\$16,417,891	\$202,242	1%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$4,066,932	\$5,401,184	\$1,334,252	33%

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LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$73,484,780	\$72,222,517	(\$1,262,263)	-2%
2	TOTAL INPATIENT PAYMENTS	\$41,352,892	\$40,084,451	(\$1,268,441)	-3%
3	TOTAL INPATIENT PAYMENTS / CHARGES	56.27%	55.50%	-0.77%	-1%
4	TOTAL DISCHARGES	5,100	4,701	(399)	-8%
5	TOTAL CASE MIX INDEX	1.03668	1.10184	0.06516	6%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	5,287,06980	5,179,76650	(107,30330)	-2%
7	TOTAL OUTPATIENT CHARGES	\$120,470,784	\$127,160,608	\$6,689,824	6%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	163.94%	176.07%	12.13%	7%
9	TOTAL OUTPATIENT PAYMENTS	\$41,135,175	\$42,422,595	\$1,287,420	3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	34.15%	33.36%	-0.78%	-2%
11	TOTAL CHARGES	\$193,955,564	\$199,383,125	\$5,427,561	3%
12	TOTAL PAYMENTS	\$82,488,067	\$82,507,046	\$18,979	0%
13	TOTAL PAYMENTS / TOTAL CHARGES	42.53%	41.38%	-1.15%	-3%
14	PATIENT DAYS	20,850	19,996	(854)	-4%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$55,643,652	\$55,529,505	(\$114,147)	0%
2	INPATIENT PAYMENTS	\$32,355,555	\$30,670,636	(\$1,684,919)	-5%
3	GOVT. INPATIENT PAYMENTS / CHARGES	58.15%	55.23%	-2.91%	-5%
4	DISCHARGES	3,719	3,445	(274)	-7%
5	CASE MIX INDEX	1.07767	1.15283	0.07516	7%
6	CASE MIX ADJUSTED DISCHARGES	4,007.84950	3,971.49450	(36.35500)	-1%
7	OUTPATIENT CHARGES	\$61,772,622	\$66,922,964	\$5,150,342	8%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	111.01%	120.52%	9.50%	9%
9	OUTPATIENT PAYMENTS	\$16,127,574	\$16,342,849	\$215,275	1%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.11%	24.42%	-1.69%	-6%
11	TOTAL CHARGES	\$117,416,274	\$122,452,469	\$5,036,195	4%
12	TOTAL PAYMENTS	\$48,483,129	\$47,013,485	(\$1,469,644)	-3%
13	TOTAL PAYMENTS / CHARGES	41.29%	38.39%	-2.90%	-7%
14	PATIENT DAYS	16,359	16,030	(329)	-2%
15	TOTAL GOVERNMENT DEDUCTIONS	\$68,933,145	\$75,438,984	\$6,505,839	9%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.9	5.2	0.3	7%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.2	(0.1)	-3%
3	UNINSURED	3.8	3.3	(0.4)	-11%
4	MEDICAID	3.2	3.4	0.2	8%
5	OTHER MEDICAL ASSISTANCE	4.9	3.5	(1.4)	-29%
6	CHAMPUS / TRICARE	2.7	1.9	(0.8)	-28%
7	TOTAL AVERAGE LENGTH OF STAY	4.1	4.3	0.2	4%

WINDHAM COMMUNITY MEMORIAL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
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
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$193,955,564	\$199,383,125	\$5,427,561	3%
2	TOTAL GOVERNMENT DEDUCTIONS	\$68,933,145	\$75,438,984	\$6,505,839	9%
3	UNCOMPENSATED CARE	\$6,313,912	\$6,056,911	(\$257,001)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,194,802	\$35,260,270	\$1,065,468	3%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,676,212	\$42,560	(\$1,633,652)	-97%
6	TOTAL ADJUSTMENTS	\$111,118,071	\$116,798,725	\$5,680,654	5%
7	TOTAL ACCRUED PAYMENTS	\$82,837,493	\$82,584,400	(\$253,093)	0%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$587,594	\$0	(\$587,594)	-100%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$83,425,087	\$82,584,400	(\$840,687)	-1%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4301247424	0.4141995467	(0.0159251957)	-4%
11	COST OF UNCOMPENSATED CARE	\$2,715,770	\$2,508,770	(\$207,000)	-8%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$4,066,932	\$5,401,184	\$1,334,252	33%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$6,782,702	\$7,909,954	\$1,127,252	17%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$4,563,753	\$4,966,019	\$402,266	9%
2	OTHER MEDICAL ASSISTANCE	\$1,275,557	\$25,390	(\$1,250,167)	-98%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,408,284	\$1,620,530	\$212,247	15%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,247,594	\$6,611,940	(\$635,655)	-9%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,173,244	\$79,148	(\$3,094,096)	-97.51%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$3,867,045	\$3,348,402	(\$518,643)	-13.41%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$86,942,706	\$85,855,448	(\$1,087,258)	-1.25%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$193,955,564	\$199,383,125	\$5,427,561	2.80%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$1,691,625	\$342,162	(\$1,349,463)	-79.77%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$8,005,538	\$6,399,073	(\$1,606,465)	-20.07%

WINDHAM COMMUNITY MEMORIAL 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
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$17,841,128	\$16,693,012	(\$1,148,116)
2	MEDICARE	\$43,401,649	43,834,404	\$432,755
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,105,743	11,577,630	(\$528,113)
4	MEDICAID	\$10,036,189	11,264,038	\$1,227,849
5	OTHER MEDICAL ASSISTANCE	\$2,069,554	313,592	(\$1,755,962)
6	CHAMPUS / TRICARE	\$136,260	117,471	(\$18,789)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,567,998	952,163	(\$615,835)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$55,643,652	\$55,529,505	(\$114,147)
	TOTAL INPATIENT CHARGES	\$73,484,780	\$72,222,517	(\$1,262,263)
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$58,698,162	\$60,237,644	\$1,539,482
2	MEDICARE	\$35,705,285	38,425,421	\$2,720,136
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$25,594,132	28,060,006	\$2,465,874
4	MEDICAID	\$21,255,395	27,879,540	\$6,624,145
5	OTHER MEDICAL ASSISTANCE	\$4,338,737	180,466	(\$4,158,271)
6	CHAMPUS / TRICARE	\$473,205	437,537	(\$35,668)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,290,522	3,740,586	\$450,064
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$61,772,622	\$66,922,964	\$5,150,342
	TOTAL OUTPATIENT CHARGES	\$120,470,784	\$127,160,608	\$6,689,824
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$76,539,290	\$76,930,656	\$391,366
2	TOTAL MEDICARE	\$79,106,934	\$82,259,825	\$3,152,891
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$37,699,875	\$39,637,636	\$1,937,761
4	TOTAL MEDICAID	\$31,291,584	\$39,143,578	\$7,851,994
5	TOTAL OTHER MEDICAL ASSISTANCE	\$6,408,291	\$494,058	(\$5,914,233)
6	TOTAL CHAMPUS / TRICARE	\$609,465	\$555,008	(\$54,457)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,858,520	\$4,692,749	(\$165,771)
	TOTAL GOVERNMENT CHARGES	\$117,416,274	\$122,452,469	\$5,036,195
	TOTAL CHARGES	\$193,955,564	\$199,383,125	\$5,427,561
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$8,997,337	\$9,413,815	\$416,478
2	MEDICARE	\$26,608,521	26,334,949	(\$273,572)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,689,976	4,282,205	(\$1,407,771)
4	MEDICAID	\$5,043,975	4,163,615	(\$880,360)
5	OTHER MEDICAL ASSISTANCE	\$646,001	118,590	(\$527,411)
6	CHAMPUS / TRICARE	\$57,058	53,482	(\$3,576)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$147,158	46,750	(\$100,408)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$32,355,555	\$30,670,636	(\$1,684,919)
	TOTAL INPATIENT PAYMENTS	\$41,352,892	\$40,084,451	(\$1,268,441)
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$25,007,601	\$26,079,746	\$1,072,145
2	MEDICARE	\$9,498,280	9,474,163	(\$24,117)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,458,741	6,734,502	\$275,761
4	MEDICAID	\$5,743,696	6,706,228	\$962,532
5	OTHER MEDICAL ASSISTANCE	\$715,045	28,274	(\$686,771)
6	CHAMPUS / TRICARE	\$170,553	134,184	(\$36,369)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$155,386	122,464	(\$32,922)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$16,127,574	\$16,342,849	\$215,275
	TOTAL OUTPATIENT PAYMENTS	\$41,135,175	\$42,422,595	\$1,287,420
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$34,004,938	\$35,493,561	\$1,488,623
2	TOTAL MEDICARE	\$36,106,801	\$35,809,112	(\$297,689)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,148,717	\$11,016,707	(\$1,132,010)
4	TOTAL MEDICAID	\$10,787,671	\$10,869,843	\$82,172
5	TOTAL OTHER MEDICAL ASSISTANCE	\$1,361,046	\$146,864	(\$1,214,182)
6	TOTAL CHAMPUS / TRICARE	\$227,611	\$187,666	(\$39,945)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$302,544	\$169,214	(\$133,330)
	TOTAL GOVERNMENT PAYMENTS	\$48,483,129	\$47,013,485	(\$1,469,644)
	TOTAL PAYMENTS	\$82,488,067	\$82,507,046	\$18,979

WINDHAM COMMUNITY MEMORIAL 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
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9.20%	8.37%	-0.83%
2	MEDICARE	22.38%	21.99%	-0.39%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.24%	5.81%	-0.43%
4	MEDICAID	5.17%	5.65%	0.47%
5	OTHER MEDICAL ASSISTANCE	1.07%	0.16%	-0.91%
6	CHAMPUS / TRICARE	0.07%	0.06%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.81%	0.48%	-0.33%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	28.69%	27.85%	-0.84%
	TOTAL INPATIENT PAYER MIX	37.89%	36.22%	-1.66%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.26%	30.21%	-0.05%
2	MEDICARE	18.41%	19.27%	0.86%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13.20%	14.07%	0.88%
4	MEDICAID	10.96%	13.98%	3.02%
5	OTHER MEDICAL ASSISTANCE	2.24%	0.09%	-2.15%
6	CHAMPUS / TRICARE	0.24%	0.22%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.70%	1.88%	0.18%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	31.85%	33.57%	1.72%
	TOTAL OUTPATIENT PAYER MIX	62.11%	63.78%	1.66%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.91%	11.41%	0.50%
2	MEDICARE	32.26%	31.92%	-0.34%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.90%	5.19%	-1.71%
4	MEDICAID	6.11%	5.05%	-1.07%
5	OTHER MEDICAL ASSISTANCE	0.78%	0.14%	-0.64%
6	CHAMPUS / TRICARE	0.07%	0.06%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.18%	0.06%	-0.12%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	39.22%	37.17%	-2.05%
	TOTAL INPATIENT PAYER MIX	50.13%	48.58%	-1.55%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	30.32%	31.61%	1.29%
2	MEDICARE	11.51%	11.48%	-0.03%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.83%	8.16%	0.33%
4	MEDICAID	6.96%	8.13%	1.17%
5	OTHER MEDICAL ASSISTANCE	0.87%	0.03%	-0.83%
6	CHAMPUS / TRICARE	0.21%	0.16%	-0.04%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.19%	0.15%	-0.04%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.55%	19.81%	0.26%
	TOTAL OUTPATIENT PAYER MIX	49.87%	51.42%	1.55%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

WINDHAM COMMUNITY MEMORIAL 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
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,381	1,256	(125)
2	MEDICARE	2,517	2,372	(145)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,188	1,055	(133)
4	MEDICAID	1,061	1,035	(26)
5	OTHER MEDICAL ASSISTANCE	127	20	(107)
6	CHAMPUS / TRICARE	14	18	4
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	106	66	(40)
	TOTAL GOVERNMENT DISCHARGES	3,719	3,445	(274)
	TOTAL DISCHARGES	5,100	4,701	(399)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,491	3,966	(525)
2	MEDICARE	12,340	12,400	60
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,981	3,595	(386)
4	MEDICAID	3,359	3,525	166
5	OTHER MEDICAL ASSISTANCE	622	70	(552)
6	CHAMPUS / TRICARE	38	35	(3)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	398	220	(178)
	TOTAL GOVERNMENT PATIENT DAYS	16,359	16,030	(329)
	TOTAL PATIENT DAYS	20,850	19,996	(854)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.3	3.2	(0.1)
2	MEDICARE	4.9	5.2	0.3
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.4	3.4	0.1
4	MEDICAID	3.2	3.4	0.2
5	OTHER MEDICAL ASSISTANCE	4.9	3.5	(1.4)
6	CHAMPUS / TRICARE	2.7	1.9	(0.8)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.8	3.3	(0.4)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.4	4.7	0.3
	TOTAL AVERAGE LENGTH OF STAY	4.1	4.3	0.2
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.92630	0.96200	0.03570
2	MEDICARE	1.17990	1.27280	0.09290
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.86209	0.89272	0.03063
4	MEDICAID	0.81640	0.89670	0.08030
5	OTHER MEDICAL ASSISTANCE	1.24380	0.68677	(0.55703)
6	CHAMPUS / TRICARE	0.99130	0.58850	(0.40280)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.72700	1.05670	0.32970
	TOTAL GOVERNMENT CASE MIX INDEX	1.07767	1.15283	0.07516
	TOTAL CASE MIX INDEX	1.03668	1.10184	0.06516
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$67,897,196	\$70,584,617	\$2,687,421
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$33,702,394	\$35,324,347	\$1,621,953
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,194,802	\$35,260,270	\$1,065,468
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	50.36%	49.95%	-0.41%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,173,244	\$79,148	(\$3,094,096)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,676,212	\$42,560	(\$1,633,652)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$587,594	\$0	(\$587,594)
8	CHARITY CARE	\$2,446,867	\$2,956,537	\$509,670
9	BAD DEBTS	\$3,867,045	\$3,100,374	(\$766,671)
10	TOTAL UNCOMPENSATED CARE	\$6,313,912	\$6,056,911	(\$257,001)
11	TOTAL OTHER OPERATING REVENUE	\$67,897,196	\$70,584,617	\$2,687,421
12	TOTAL OPERATING EXPENSES	\$91,501,818	\$92,639,489	\$1,137,671

WINDHAM COMMUNITY MEMORIAL 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
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,279.22030	1,208.27200	(70.94830)
2	MEDICARE	2,969.80830	3,019.08160	49.27330
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,024.16300	941.81990	(82.34310)
4	MEDICAID	866.20040	928.08450	61.88410
5	OTHER MEDICAL ASSISTANCE	157.96260	13.73540	(144.22720)
6	CHAMPUS / TRICARE	13.87820	10.59300	(3.28520)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	77.06200	69.74220	(7.31980)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	4,007.84950	3,971.49450	(36.35500)
	TOTAL CASE MIX ADJUSTED DISCHARGES	5,287.06980	5,179.76650	(107.30330)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,543.55586	4,532.34448	-11.21138
2	MEDICARE	2,070.66331	2,079.30507	8.64176
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,513.31591	2,573.23071	59.91480
4	MEDICAID	2,247.06550	2,561.72111	314.65560
5	OTHER MEDICAL ASSISTANCE	266.25041	11.50960	-254.74080
6	CHAMPUS / TRICARE	48.61933	67.04349	18.42416
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	222.44629	259.28195	36.83566
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	4,632.59856	4,719.57928	86.98072
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	9,176.15442	9,251.92376	75.76934
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,033.45	\$7,791.14	\$757.69
2	MEDICARE	\$8,959.68	\$8,722.83	(\$236.84)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,555.73	\$4,546.73	(\$1,009.00)
4	MEDICAID	\$5,823.10	\$4,486.25	(\$1,336.86)
5	OTHER MEDICAL ASSISTANCE	\$4,089.58	\$8,633.89	\$4,544.31
6	CHAMPUS / TRICARE	\$4,111.34	\$5,048.81	\$937.47
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,909.61	\$670.33	(\$1,239.28)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,073.05	\$7,722.69	(\$350.35)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,821.51	\$7,738.66	(\$82.85)
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,503.97	\$5,754.14	\$250.17
2	MEDICARE	\$4,587.07	\$4,556.41	(\$30.66)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$2,569.81	\$2,617.14	\$47.33
4	MEDICAID	\$2,556.09	\$2,617.86	\$61.77
5	OTHER MEDICAL ASSISTANCE	\$2,685.61	\$2,456.56	(\$229.05)
6	CHAMPUS / TRICARE	\$3,507.93	\$2,001.45	(\$1,506.48)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$698.53	\$472.32	(\$226.21)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$3,481.32	\$3,462.78	(\$18.55)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,482.83	\$4,585.27	\$102.44

WINDHAM COMMUNITY MEMORIAL 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
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$4,563,753	\$4,966,019	\$402,266
2	OTHER MEDICAL ASSISTANCE	\$1,275,557	\$25,390	(\$1,250,167)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,408,284	\$1,620,530	\$212,247
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,247,594	\$6,611,940	(\$635,655)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$193,955,564	\$199,383,125	\$5,427,561
2	TOTAL GOVERNMENT DEDUCTIONS	\$68,933,145	\$75,438,984	\$6,505,839
3	UNCOMPENSATED CARE	\$6,313,912	\$6,056,911	(\$257,001)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,194,802	\$35,260,270	\$1,065,468
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,676,212	\$42,560	(\$1,633,652)
6	TOTAL ADJUSTMENTS	\$111,118,071	\$116,798,725	\$5,680,654
7	TOTAL ACCRUED PAYMENTS	\$82,837,493	\$82,584,400	(\$253,093)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$587,594	\$0	(\$587,594)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$83,425,087	\$82,584,400	(\$840,687)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4301247424	0.4141995467	(0.0159251957)
11	COST OF UNCOMPENSATED CARE	\$2,715,770	\$2,508,770	(\$207,000)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$4,066,932	\$5,401,184	\$1,334,252
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$6,782,702	\$7,909,954	\$1,127,252
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	50.43%	56.39%	5.96%
2	MEDICARE	61.31%	60.08%	-1.23%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	47.00%	36.99%	-10.02%
4	MEDICAID	50.26%	36.96%	-13.29%
5	OTHER MEDICAL ASSISTANCE	31.21%	37.82%	6.60%
6	CHAMPUS / TRICARE	41.87%	45.53%	3.65%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	9.39%	4.91%	-4.48%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	58.15%	55.23%	-2.91%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	56.27%	55.50%	-0.77%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	42.60%	43.29%	0.69%
2	MEDICARE	26.60%	24.66%	-1.95%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.24%	24.00%	-1.23%
4	MEDICAID	27.02%	24.05%	-2.97%
5	OTHER MEDICAL ASSISTANCE	16.48%	15.67%	-0.81%
6	CHAMPUS / TRICARE	36.04%	30.67%	-5.37%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.72%	3.27%	-1.45%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	26.11%	24.42%	-1.69%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	34.15%	33.36%	-0.78%

WINDHAM COMMUNITY MEMORIAL 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
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$82,488,067	\$82,507,046	\$18,979
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$587,594	\$0	(\$587,594)
	OHCA DEFINED NET REVENUE	\$83,075,661	\$82,507,046	(\$568,615)
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,867,045	\$3,348,402	(\$518,643)
4	CALCULATED NET REVENUE	\$86,942,706	\$85,855,448	(\$1,087,258)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$86,942,706	\$85,855,448	(\$1,087,258)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$193,955,564	\$199,383,125	\$5,427,561
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$193,955,564	\$199,383,125	\$5,427,561
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$193,955,564	\$199,383,125	\$5,427,561
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,313,912	\$6,056,911	(\$257,001)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$1,691,625	\$342,162	(\$1,349,463)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$8,005,537	\$6,399,073	(\$1,606,464)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$8,005,538	\$6,399,073	(\$1,606,465)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$1)	\$0	\$1

WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$16,693,012
2	MEDICARE	43,834,404
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,577,630
4	MEDICAID	11,264,038
5	OTHER MEDICAL ASSISTANCE	313,592
6	CHAMPUS / TRICARE	117,471
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	952,163
	TOTAL INPATIENT GOVERNMENT CHARGES	\$55,529,505
	TOTAL INPATIENT CHARGES	\$72,222,517
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$60,237,644
2	MEDICARE	38,425,421
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28,060,006
4	MEDICAID	27,879,540
5	OTHER MEDICAL ASSISTANCE	180,466
6	CHAMPUS / TRICARE	437,537
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,740,586
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$66,922,964
	TOTAL OUTPATIENT CHARGES	\$127,160,608
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$76,930,656
2	TOTAL GOVERNMENT ACCRUED CHARGES	122,452,469
	TOTAL ACCRUED CHARGES	\$199,383,125
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,413,815
2	MEDICARE	26,334,949
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,282,205
4	MEDICAID	4,163,615
5	OTHER MEDICAL ASSISTANCE	118,590
6	CHAMPUS / TRICARE	53,482
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	46,750
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$30,670,636
	TOTAL INPATIENT PAYMENTS	\$40,084,451
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$26,079,746
2	MEDICARE	9,474,163
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,734,502
4	MEDICAID	6,706,228
5	OTHER MEDICAL ASSISTANCE	28,274
6	CHAMPUS / TRICARE	134,184
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	122,464
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$16,342,849
	TOTAL OUTPATIENT PAYMENTS	\$42,422,595
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$35,493,561
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	47,013,485
	TOTAL ACCRUED PAYMENTS	\$82,507,046

WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,256
2	MEDICARE	2,372
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,055
4	MEDICAID	1,035
5	OTHER MEDICAL ASSISTANCE	20
6	CHAMPUS / TRICARE	18
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	66
	TOTAL GOVERNMENT DISCHARGES	3,445
	TOTAL DISCHARGES	4,701
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96200
2	MEDICARE	1.27280
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.89272
4	MEDICAID	0.89670
5	OTHER MEDICAL ASSISTANCE	0.68677
6	CHAMPUS / TRICARE	0.58850
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.05670
	TOTAL GOVERNMENT CASE MIX INDEX	1.15283
	TOTAL CASE MIX INDEX	1.10184
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$70,584,617
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$35,324,347
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,260,270
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.95%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$79,148
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$42,560
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$2,956,537
9	BAD DEBTS	\$3,100,374
10	TOTAL UNCOMPENSATED CARE	\$6,056,911
11	TOTAL OTHER OPERATING REVENUE	\$3,044,239
12	TOTAL OPERATING EXPENSES	\$92,639,489

WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$82,507,046
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$82,507,046
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$3,348,402
	CALCULATED NET REVENUE	\$85,855,448
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$85,855,448
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$199,383,125
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$199,383,125
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$199,383,125
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,056,911
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$342,162
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$6,399,073
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$6,399,073
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

WINDHAM COMMUNITY MEMORIAL 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
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	1,112	1,334	222	20%
2	Number of Approved Applicants	1,044	1,201	157	15%
3	Total Charges (A)	\$2,446,867	\$2,956,537	\$509,670	21%
4	Average Charges	\$2,344	\$2,462	\$118	5%
5	Ratio of Cost to Charges (RCC)	0.449045	0.465473	0.016428	4%
6	Total Cost	\$1,098,753	\$1,376,188	\$277,435	25%
7	Average Cost	\$1,052	\$1,146	\$93	9%
8	Charity Care - Inpatient Charges	\$760,720	\$756,840	(\$3,880)	-1%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	849,666	1,089,823	240,157	28%
10	Charity Care - Emergency Department Charges	836,481	1,109,874	273,393	33%
11	Total Charges (A)	\$2,446,867	\$2,956,537	\$509,670	21%
12	Charity Care - Number of Patient Days	212	197	(15)	-7%
13	Charity Care - Number of Discharges	57	67	10	18%
14	Charity Care - Number of Outpatient ED Visits	655	903	248	38%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,715	1,641	(74)	-4%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$758,451	\$468,666	(\$289,785)	-38%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	1,002,945	773,530	(229,415)	-23%
3	Bad Debts - Emergency Department	2,105,649	1,858,178	(247,471)	-12%
4	Total Bad Debts (A)	\$3,867,045	\$3,100,374	(\$766,671)	-20%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$2,446,867	\$2,956,537	\$509,670	21%
2	Bad Debts (A)	3,867,045	3,100,374	(766,671)	-20%
3	Total Uncompensated Care (A)	\$6,313,912	\$6,056,911	(\$257,001)	-4%
4	Uncompensated Care - Inpatient Services	\$1,519,171	\$1,225,506	(\$293,665)	-19%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	1,852,611	1,863,353	10,742	1%
6	Uncompensated Care - Emergency Department	2,942,130	2,968,052	25,922	1%
7	Total Uncompensated Care (A)	\$6,313,912	\$6,056,911	(\$257,001)	-4%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

WINDHAM COMMUNITY MEMORIAL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2010	(4) FY 2011	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$67,897,196	\$70,584,617	\$2,687,421	4%
2	Total Contractual Allowances	\$34,194,802	\$35,260,270	\$1,065,468	3%
	Total Accrued Payments (A)	\$33,702,394	\$35,324,347	\$1,621,953	5%
	Total Discount Percentage	50.36%	49.95%	-0.41%	-1%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$72,446,212	\$73,484,780	\$72,222,517
2	Outpatient Gross Revenue	\$117,737,661	\$120,470,784	\$127,160,608
3	Total Gross Patient Revenue	\$190,183,873	\$193,955,564	\$199,383,125
4	Net Patient Revenue	\$83,605,148	\$86,942,706	\$85,855,448
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$85,401,157	\$91,501,818	\$92,639,489
C. <u>Utilization Statistics</u>				
1	Patient Days	20,696	20,850	19,996
2	Discharges	5,343	5,100	4,701
3	Average Length of Stay	3.9	4.1	4.3
4	Equivalent (Adjusted) Patient Days (EPD)	54,331	55,031	55,203
0	Equivalent (Adjusted) Discharges (ED)	14,026	13,461	12,978
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.02008	1.03668	1.10184
2	Case Mix Adjusted Patient Days (CMAPD)	21,112	21,615	22,032
3	Case Mix Adjusted Discharges (CMAD)	5,450	5,287	5,180
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	55,422	57,050	60,825
5	Case Mix Adjusted Equivalent Discharges (CMAED)	14,308	13,955	14,300
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$9,189	\$9,302	\$9,971
2	Total Gross Revenue per Discharge	\$35,595	\$38,031	\$42,413
3	Total Gross Revenue per EPD	\$3,500	\$3,524	\$3,612
4	Total Gross Revenue per ED	\$13,559	\$14,409	\$15,363
5	Total Gross Revenue per CMAEPD	\$3,432	\$3,400	\$3,278
6	Total Gross Revenue per CMAED	\$13,292	\$13,899	\$13,943
7	Inpatient Gross Revenue per EPD	\$1,333	\$1,335	\$1,308
8	Inpatient Gross Revenue per ED	\$5,165	\$5,459	\$5,565

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$4,040	\$4,170	\$4,294
2	Net Patient Revenue per Discharge	\$15,648	\$17,048	\$18,263
3	Net Patient Revenue per EPD	\$1,539	\$1,580	\$1,555
4	Net Patient Revenue per ED	\$5,961	\$6,459	\$6,615
5	Net Patient Revenue per CMAEPD	\$1,509	\$1,524	\$1,412
6	Net Patient Revenue per CMAED	\$5,843	\$6,230	\$6,004
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$4,126	\$4,389	\$4,633
2	Total Operating Expense per Discharge	\$15,984	\$17,942	\$19,706
3	Total Operating Expense per EPD	\$1,572	\$1,663	\$1,678
4	Total Operating Expense per ED	\$6,089	\$6,798	\$7,138
5	Total Operating Expense per CMAEPD	\$1,541	\$1,604	\$1,523
6	Total Operating Expense per CMAED	\$5,969	\$6,557	\$6,478
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$15,137,005	\$12,409,863	\$12,572,579
2	Nursing Fringe Benefits Expense	\$5,158,691	\$4,602,323	\$4,891,166
3	Total Nursing Salary and Fringe Benefits Expense	\$20,295,696	\$17,012,186	\$17,463,745
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$127,711	\$887,642	\$2,054,798
2	Physician Fringe Benefits Expense	\$43,524	\$329,191	\$799,387
3	Total Physician Salary and Fringe Benefits Expense	\$171,235	\$1,216,833	\$2,854,185
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$21,833,969	\$26,003,628	\$26,718,419
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$7,444,319	\$9,643,709	\$10,394,386
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$29,278,288	\$35,647,337	\$37,112,805
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$37,098,685	\$39,301,133	\$41,345,796
2	Total Fringe Benefits Expense	\$12,646,534	\$14,575,223	\$16,084,939
3	Total Salary and Fringe Benefits Expense	\$49,745,219	\$53,876,356	\$57,430,735

WINDHAM COMMUNITY MEMORIAL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	219.0	215.4	208.6
2	Total Physician FTEs	1.1	4.5	9.3
3	Total Non-Nursing, Non-Physician FTEs	387.9	383.5	389.6
4	Total Full Time Equivalent Employees (FTEs)	608.0	603.4	607.5
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$69,119	\$57,613	\$60,271
2	Nursing Fringe Benefits Expense per FTE	\$23,556	\$21,366	\$23,448
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$92,674	\$78,980	\$83,719
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$116,101	\$197,254	\$220,946
2	Physician Fringe Benefits Expense per FTE	\$39,567	\$73,154	\$85,956
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$155,668	\$270,407	\$306,902
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$56,288	\$67,806	\$68,579
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$19,191	\$25,147	\$26,680
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$75,479	\$92,953	\$95,259
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$61,018	\$65,133	\$68,059
2	Total Fringe Benefits Expense per FTE	\$20,800	\$24,155	\$26,477
3	Total Salary and Fringe Benefits Expense per FTE	\$81,818	\$89,288	\$94,536
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,404	\$2,584	\$2,872
2	Total Salary and Fringe Benefits Expense per Discharge	\$9,310	\$10,564	\$12,217
3	Total Salary and Fringe Benefits Expense per EPD	\$916	\$979	\$1,040
4	Total Salary and Fringe Benefits Expense per ED	\$3,547	\$4,002	\$4,425
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$898	\$944	\$944
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,477	\$3,861	\$4,016