

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. ASSETS					
A. Current Assets:					
1	Cash and Cash Equivalents	\$56,459,000	\$54,769,000	(\$1,690,000)	-3%
2	Short Term Investments	\$10,647,000	\$10,187,000	(\$460,000)	-4%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$42,961,000	\$45,169,000	\$2,208,000	5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$4,082,000	\$4,527,000	\$445,000	11%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,436,000	\$1,347,000	(\$89,000)	-6%
8	Prepaid Expenses	\$2,029,000	\$2,156,000	\$127,000	6%
9	Other Current Assets	\$2,852,000	\$3,653,000	\$801,000	28%
	Total Current Assets	\$120,466,000	\$121,808,000	\$1,342,000	1%
B. Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$8,120,000	\$8,207,000	\$87,000	1%
2	Board Designated for Capital Acquisition	\$80,737,000	\$95,568,000	\$14,831,000	18%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$13,547,000	\$15,167,000	\$1,620,000	12%
	Total Noncurrent Assets Whose Use is Limited:	\$102,404,000	\$118,942,000	\$16,538,000	16%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$2,019,000	\$16,627,000	\$14,608,000	724%
7	Other Noncurrent Assets	\$2,995,000	\$2,862,000	(\$133,000)	-4%
C. Net Fixed Assets:					
1	Property, Plant and Equipment	\$411,695,000	\$373,198,000	(\$38,497,000)	-9%
2	Less: Accumulated Depreciation	\$258,275,000	\$208,046,000	(\$50,229,000)	-19%
	Property, Plant and Equipment, Net	\$153,420,000	\$165,152,000	\$11,732,000	8%
3	Construction in Progress	\$21,322,000	\$14,694,000	(\$6,628,000)	-31%
	Total Net Fixed Assets	\$174,742,000	\$179,846,000	\$5,104,000	3%
	Total Assets	\$402,626,000	\$440,085,000	\$37,459,000	9%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$18,782,000	\$19,149,000	\$367,000	2%
2	Salaries, Wages and Payroll Taxes	\$29,606,000	\$32,727,000	\$3,121,000	11%
3	Due To Third Party Payers	\$207,000	\$2,944,000	\$2,737,000	1322%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$3,060,000	\$3,045,000	(\$15,000)	0%
6	Current Portion of Notes Payable	\$63,000	\$1,573,000	\$1,510,000	2397%
7	Other Current Liabilities	\$9,399,000	\$10,211,000	\$812,000	9%
	Total Current Liabilities	\$61,117,000	\$69,649,000	\$8,532,000	14%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$66,442,000	\$63,285,000	(\$3,157,000)	-5%
2	Notes Payable (Net of Current Portion)	\$89,000	\$47,000	(\$42,000)	-47%
	Total Long Term Debt	\$66,531,000	\$63,332,000	(\$3,199,000)	-5%
3	Accrued Pension Liability	\$117,232,000	\$129,719,000	\$12,487,000	11%
4	Other Long Term Liabilities	\$19,674,000	\$16,380,000	(\$3,294,000)	-17%
	Total Long Term Liabilities	\$203,437,000	\$209,431,000	\$5,994,000	3%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$124,933,000	\$144,992,000	\$20,059,000	16%
2	Temporarily Restricted Net Assets	\$6,259,000	\$9,049,000	\$2,790,000	45%
3	Permanently Restricted Net Assets	\$6,880,000	\$6,964,000	\$84,000	1%
	Total Net Assets	\$138,072,000	\$161,005,000	\$22,933,000	17%
	Total Liabilities and Net Assets	\$402,626,000	\$440,085,000	\$37,459,000	9%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,033,672,371	\$1,119,150,279	\$85,477,908	8%
2	Less: Allowances	\$690,702,791	\$763,805,256	\$73,102,465	11%
3	Less: Charity Care	\$6,856,094	\$7,509,399	\$653,305	10%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$336,113,486	\$347,835,624	\$11,722,138	3%
5	Other Operating Revenue	\$9,543,630	\$11,871,399	\$2,327,769	24%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$345,657,116	\$359,707,023	\$14,049,907	4%
B. Operating Expenses:					
1	Salaries and Wages	\$155,568,636	\$161,674,913	\$6,106,277	4%
2	Fringe Benefits	\$42,526,853	\$37,632,053	(\$4,894,800)	-12%
3	Physicians Fees	\$3,005,545	\$3,404,502	\$398,957	13%
4	Supplies and Drugs	\$33,144,537	\$34,609,056	\$1,464,519	4%
5	Depreciation and Amortization	\$21,736,910	\$21,448,732	(\$288,178)	-1%
6	Bad Debts	\$13,570,742	\$12,199,395	(\$1,371,347)	-10%
7	Interest	\$3,242,228	\$3,106,032	(\$136,196)	-4%
8	Malpractice	\$2,640,281	\$1,871,742	(\$768,539)	-29%
9	Other Operating Expenses	\$53,079,916	\$58,590,866	\$5,510,950	10%
	Total Operating Expenses	\$328,515,648	\$334,537,291	\$6,021,643	2%
	Income/(Loss) From Operations	\$17,141,468	\$25,169,732	\$8,028,264	47%
C. Non-Operating Revenue:					
1	Income from Investments	\$4,985,668	\$2,152,953	(\$2,832,715)	-57%
2	Gifts, Contributions and Donations	\$471,844	\$466,901	(\$4,943)	-1%
3	Other Non-Operating Gains/(Losses)	(\$1,079,790)	\$1,284,104	\$2,363,894	-219%
	Total Non-Operating Revenue	\$4,377,722	\$3,903,958	(\$473,764)	-11%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$21,519,190	\$29,073,690	\$7,554,500	35%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$21,519,190	\$29,073,690	\$7,554,500	35%
	Principal Payments	\$3,407,000	\$4,580,000	\$1,173,000	34%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$238,091,717	\$255,096,369	\$17,004,652	7%
2	MEDICARE MANAGED CARE	\$36,648,686	\$44,913,060	\$8,264,374	23%
3	MEDICAID	\$39,980,828	\$60,547,499	\$20,566,671	51%
4	MEDICAID MANAGED CARE	\$15,751,623	\$3,072,544	(\$12,679,079)	-80%
5	CHAMPUS/TRICARE	\$1,167,799	\$1,339,754	\$171,955	15%
6	COMMERCIAL INSURANCE	\$14,410,217	\$11,498,293	(\$2,911,924)	-20%
7	NON-GOVERNMENT MANAGED CARE	\$116,019,193	\$119,386,213	\$3,367,020	3%
8	WORKER'S COMPENSATION	\$5,279,628	\$4,767,740	(\$511,888)	-10%
9	SELF- PAY/UNINSURED	\$6,310,560	\$6,206,111	(\$104,449)	-2%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$473,660,251	\$506,827,583	\$33,167,332	7%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$171,332,425	\$180,423,650	\$9,091,225	5%
2	MEDICARE MANAGED CARE	\$30,890,904	\$39,954,183	\$9,063,279	29%
3	MEDICAID	\$44,321,769	\$82,621,534	\$38,299,765	86%
4	MEDICAID MANAGED CARE	\$37,044,595	\$13,327,363	(\$23,717,232)	-64%
5	CHAMPUS/TRICARE	\$2,219,940	\$2,626,269	\$406,329	18%
6	COMMERCIAL INSURANCE	\$27,579,363	\$28,398,227	\$818,864	3%
7	NON-GOVERNMENT MANAGED CARE	\$223,074,772	\$240,944,501	\$17,869,729	8%
8	WORKER'S COMPENSATION	\$9,642,163	\$10,188,552	\$546,389	6%
9	SELF- PAY/UNINSURED	\$13,906,189	\$13,838,417	(\$67,772)	0%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$560,012,120	\$612,322,696	\$52,310,576	9%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$409,424,142	\$435,520,019	\$26,095,877	6%
2	MEDICARE MANAGED CARE	\$67,539,590	\$84,867,243	\$17,327,653	26%
3	MEDICAID	\$84,302,597	\$143,169,033	\$58,866,436	70%
4	MEDICAID MANAGED CARE	\$52,796,218	\$16,399,907	(\$36,396,311)	-69%
5	CHAMPUS/TRICARE	\$3,387,739	\$3,966,023	\$578,284	17%
6	COMMERCIAL INSURANCE	\$41,989,580	\$39,896,520	(\$2,093,060)	-5%
7	NON-GOVERNMENT MANAGED CARE	\$339,093,965	\$360,330,714	\$21,236,749	6%
8	WORKER'S COMPENSATION	\$14,921,791	\$14,956,292	\$34,501	0%
9	SELF- PAY/UNINSURED	\$20,216,749	\$20,044,528	(\$172,221)	-1%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,033,672,371	\$1,119,150,279	\$85,477,908	8%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$59,007,094	\$61,521,678	\$2,514,584	4%
2	MEDICARE MANAGED CARE	\$9,621,752	\$11,023,954	\$1,402,202	15%
3	MEDICAID	\$8,773,200	\$10,474,311	\$1,701,111	19%
4	MEDICAID MANAGED CARE	\$3,648,451	\$614,073	(\$3,034,378)	-83%
5	CHAMPUS/TRICARE	\$222,060	\$338,550	\$116,490	52%
6	COMMERCIAL INSURANCE	\$5,820,345	\$4,506,227	(\$1,314,118)	-23%
7	NON-GOVERNMENT MANAGED CARE	\$52,225,888	\$51,604,977	(\$620,911)	-1%
8	WORKER'S COMPENSATION	\$3,699,313	\$3,703,096	\$3,783	0%
9	SELF- PAY/UNINSURED	\$4,381,062	\$4,126,794	(\$254,268)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$147,399,165	\$147,913,660	\$514,495	0%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$39,742,768	\$38,217,841	(\$1,524,927)	-4%
2	MEDICARE MANAGED CARE	\$6,012,967	\$8,301,638	\$2,288,671	38%
3	MEDICAID	\$9,069,746	\$15,597,962	\$6,528,216	72%
4	MEDICAID MANAGED CARE	\$10,780,649	\$4,396,449	(\$6,384,200)	-59%
5	CHAMPUS/TRICARE	\$564,855	\$840,268	\$275,413	49%
6	COMMERCIAL INSURANCE	\$11,522,574	\$11,868,478	\$345,904	3%
7	NON-GOVERNMENT MANAGED CARE	\$95,317,842	\$100,917,442	\$5,599,600	6%
8	WORKER'S COMPENSATION	\$6,382,728	\$7,671,201	\$1,288,473	20%
9	SELF- PAY/UNINSURED	\$3,756,191	\$3,652,693	(\$103,498)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$183,150,320	\$191,463,972	\$8,313,652	5%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$98,749,862	\$99,739,519	\$989,657	1%
2	MEDICARE MANAGED CARE	\$15,634,719	\$19,325,592	\$3,690,873	24%
3	MEDICAID	\$17,842,946	\$26,072,273	\$8,229,327	46%
4	MEDICAID MANAGED CARE	\$14,429,100	\$5,010,522	(\$9,418,578)	-65%
5	CHAMPUS/TRICARE	\$786,915	\$1,178,818	\$391,903	50%
6	COMMERCIAL INSURANCE	\$17,342,919	\$16,374,705	(\$968,214)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$147,543,730	\$152,522,419	\$4,978,689	3%
8	WORKER'S COMPENSATION	\$10,082,041	\$11,374,297	\$1,292,256	13%
9	SELF- PAY/UNINSURED	\$8,137,253	\$7,779,487	(\$357,766)	-4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$330,549,485	\$339,377,632	\$8,828,147	3%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	6,446	6,467	21	0%
2	MEDICARE MANAGED CARE	927	1,070	143	15%
3	MEDICAID	1,121	1,978	857	76%
4	MEDICAID MANAGED CARE	907	160	(747)	-82%
5	CHAMPUS/TRICARE	48	62	14	29%
6	COMMERCIAL INSURANCE	391	359	(32)	-8%
7	NON-GOVERNMENT MANAGED CARE	3,735	3,812	77	2%
8	WORKER'S COMPENSATION	79	68	(11)	-14%
9	SELF- PAY/UNINSURED	201	182	(19)	-9%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	13,855	14,158	303	2%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	30,988	30,149	(839)	-3%
2	MEDICARE MANAGED CARE	4,206	4,700	494	12%
3	MEDICAID	6,073	8,618	2,545	42%
4	MEDICAID MANAGED CARE	2,644	479	(2,165)	-82%
5	CHAMPUS/TRICARE	163	163	0	0%
6	COMMERCIAL INSURANCE	1,601	1,211	(390)	-24%
7	NON-GOVERNMENT MANAGED CARE	13,174	13,196	22	0%
8	WORKER'S COMPENSATION	219	198	(21)	-10%
9	SELF- PAY/UNINSURED	867	759	(108)	-12%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	59,935	59,473	(462)	-1%
C.	OUTPATIENT VISITS				

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	223,677	217,449	(6,228)	-3%
2	MEDICARE MANAGED CARE	34,939	41,049	6,110	17%
3	MEDICAID	52,504	85,825	33,321	63%
4	MEDICAID MANAGED CARE	47,486	14,485	(33,001)	-69%
5	CHAMPUS/TRICARE	2,382	2,501	119	5%
6	COMMERCIAL INSURANCE	27,338	25,974	(1,364)	-5%
7	NON-GOVERNMENT MANAGED CARE	226,788	223,614	(3,174)	-1%
8	WORKER'S COMPENSATION	17,782	17,542	(240)	-1%
9	SELF- PAY/UNINSURED	14,357	13,644	(713)	-5%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	647,253	642,083	(5,170)	-1%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$53,141,470	\$62,273,745	\$9,132,275	17%
2	MEDICARE MANAGED CARE	\$8,823,662	\$12,266,601	\$3,442,939	39%
3	MEDICAID	\$20,069,359	\$41,914,936	\$21,845,577	109%
4	MEDICAID MANAGED CARE	\$15,496,960	\$4,101,458	(\$11,395,502)	-74%
5	CHAMPUS/TRICARE	\$1,037,415	\$1,223,219	\$185,804	18%
6	COMMERCIAL INSURANCE	\$7,361,463	\$7,771,216	\$409,753	6%
7	NON-GOVERNMENT MANAGED CARE	\$68,511,656	\$76,547,983	\$8,036,327	12%
8	WORKER'S COMPENSATION	\$2,480,464	\$2,915,638	\$435,174	18%
9	SELF- PAY/UNINSURED	\$9,522,620	\$7,757,608	(\$1,765,012)	-19%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$186,445,069	\$216,772,404	\$30,327,335	16%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$7,649,984	\$9,062,102	\$1,412,118	18%
2	MEDICARE MANAGED CARE	\$1,293,700	\$2,111,222	\$817,522	63%
3	MEDICAID	\$3,878,072	\$7,786,480	\$3,908,408	101%
4	MEDICAID MANAGED CARE	\$3,869,779	\$1,054,676	(\$2,815,103)	-73%
5	CHAMPUS/TRICARE	\$235,290	\$259,008	\$23,718	10%
6	COMMERCIAL INSURANCE	\$2,075,124	\$2,458,044	\$382,920	18%
7	NON-GOVERNMENT MANAGED CARE	\$30,575,860	\$35,619,667	\$5,043,807	16%
8	WORKER'S COMPENSATION	\$1,395,125	\$2,282,120	\$886,995	64%
9	SELF- PAY/UNINSURED	\$314,768	\$398,093	\$83,325	26%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$51,287,702	\$61,031,412	\$9,743,710	19%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	16,343	16,660	317	2%
2	MEDICARE MANAGED CARE	2,663	3,129	466	17%
3	MEDICAID	8,760	18,006	9,246	106%
4	MEDICAID MANAGED CARE	11,165	2,645	(8,520)	-76%
5	CHAMPUS/TRICARE	739	732	(7)	-1%
6	COMMERCIAL INSURANCE	3,712	3,193	(519)	-14%
7	NON-GOVERNMENT MANAGED CARE	35,247	33,573	(1,674)	-5%
8	WORKER'S COMPENSATION	2,174	2,127	(47)	-2%
9	SELF- PAY/UNINSURED	6,003	5,017	(986)	-16%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	86,806	85,082	(1,724)	-2%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$46,575,871	\$47,712,048	\$1,136,177	2%
2	Physician Salaries	\$25,136,796	\$26,601,785	\$1,464,989	6%
3	Non-Nursing, Non-Physician Salaries	\$83,855,969	\$87,361,080	\$3,505,111	4%
	Total Salaries & Wages	\$155,568,636	\$161,674,913	\$6,106,277	4%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$12,732,163	\$11,105,634	(\$1,626,529)	-13%
2	Physician Fringe Benefits	\$6,871,493	\$6,191,930	(\$679,563)	-10%
3	Non-Nursing, Non-Physician Fringe Benefits	\$22,923,197	\$20,334,489	(\$2,588,708)	-11%
	Total Fringe Benefits	\$42,526,853	\$37,632,053	(\$4,894,800)	-12%
C. Contractual Labor Fees:					
1	Nursing Fees	\$496,836	\$625,759	\$128,923	26%
2	Physician Fees	\$3,005,545	\$3,404,502	\$398,957	13%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$3,502,381	\$4,030,261	\$527,880	15%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$24,201,366	\$25,188,379	\$987,013	4%
2	Pharmaceutical Costs	\$8,943,171	\$9,420,677	\$477,506	5%
	Total Medical Supplies and Pharmaceutical Cost	\$33,144,537	\$34,609,056	\$1,464,519	4%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$9,985,642	\$10,302,808	\$317,166	3%
2	Depreciation-Equipment	\$11,628,728	\$11,168,788	(\$459,940)	-4%
3	Amortization	\$122,540	(\$22,864)	(\$145,404)	-119%
	Total Depreciation and Amortization	\$21,736,910	\$21,448,732	(\$288,178)	-1%
F. Bad Debts:					
1	Bad Debts	\$13,570,742	\$12,199,395	(\$1,371,347)	-10%
G. Interest Expense:					
1	Interest Expense	\$3,242,228	\$3,106,032	(\$136,196)	-4%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$2,640,281	\$1,871,742	(\$768,539)	-29%
I. Utilities:					
1	Water	\$257,495	\$490,212	\$232,717	90%
2	Natural Gas	\$111,425	\$120,697	\$9,272	8%
3	Oil	\$972,621	\$977,604	\$4,983	1%
4	Electricity	\$3,032,617	\$3,340,721	\$308,104	10%
5	Telephone	\$1,316,527	\$1,378,849	\$62,322	5%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$5,690,685	\$6,308,083	\$617,398	11%
J. Business Expenses:					
1	Accounting Fees	\$291,332	\$172,414	(\$118,918)	-41%
2	Legal Fees	\$900,863	\$605,719	(\$295,144)	-33%
3	Consulting Fees	\$1,528,376	\$3,016,460	\$1,488,084	97%
4	Dues and Membership	\$646,127	\$596,009	(\$50,118)	-8%
5	Equipment Leases	\$1,772,912	\$1,815,761	\$42,849	2%
6	Building Leases	\$3,543,439	\$3,623,954	\$80,515	2%
7	Repairs and Maintenance	\$2,245,956	\$2,002,922	(\$243,034)	-11%
8	Insurance	\$536,468	\$206,063	(\$330,405)	-62%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$1,262,702	\$1,146,988	(\$115,714)	-9%
10	Conferences	\$105,191	\$89,383	(\$15,808)	-15%
11	Property Tax	\$3,609,461	\$4,232,049	\$622,588	17%
12	General Supplies	\$1,989,707	\$1,869,428	(\$120,279)	-6%
13	Licenses and Subscriptions	\$394,248	\$442,118	\$47,870	12%
14	Postage and Shipping	\$283,215	\$270,230	(\$12,985)	-5%
15	Advertising	\$1,107,303	\$503,403	(\$603,900)	-55%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$2,986,474	\$2,986,474	0%
18	Computer hardware & small equipment	\$0	\$439,907	\$439,907	0%
19	Dietary / Food Services	\$0	\$1,547,613	\$1,547,613	0%
20	Lab Fees / Red Cross charges	\$0	\$2,049,815	\$2,049,815	0%
21	Billing & Collection / Bank Fees	\$0	\$394,363	\$394,363	0%
22	Recruiting / Employee Education & Recognition	\$0	\$1,049,979	\$1,049,979	0%
23	Laundry / Linen	\$0	\$505,722	\$505,722	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$381,888	\$381,888	0%
26	Purchased Services - Medical	\$0	\$1,465,757	\$1,465,757	0%
27	Purchased Services - Non Medical	\$0	\$18,293,521	\$18,293,521	0%
28	Other Business Expenses	\$6,099,876	\$1,949,084	(\$4,150,792)	-68%
	Total Business Expenses	\$26,317,176	\$51,657,024	\$25,339,848	96%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$20,575,219	\$0	(\$20,575,219)	-100%
	Total Operating Expenses - All Expense Categories*	\$328,515,648	\$334,537,291	\$6,021,643	2%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$28,796,988	\$33,005,268	\$4,208,280	15%
2	General Accounting	\$1,069,244	\$1,158,142	\$88,898	8%
3	Patient Billing & Collection	\$18,249,320	\$17,220,390	(\$1,028,930)	-6%
4	Admitting / Registration Office	\$2,698,382	\$2,747,251	\$48,869	2%
5	Data Processing	\$14,404,449	\$14,071,330	(\$333,119)	-2%
6	Communications	\$1,887,914	\$1,836,437	(\$51,477)	-3%
7	Personnel	\$45,008,800	\$39,888,625	(\$5,120,175)	-11%
8	Public Relations	\$1,821,031	\$2,209,250	\$388,219	21%
9	Purchasing	\$1,677,223	\$1,646,576	(\$30,647)	-2%
10	Dietary and Cafeteria	\$3,946,399	\$3,980,607	\$34,208	1%
11	Housekeeping	\$2,842,159	\$2,922,360	\$80,201	3%
12	Laundry & Linen	\$846,666	\$840,682	(\$5,984)	-1%
13	Operation of Plant	\$14,457,610	\$13,743,529	(\$714,081)	-5%
14	Security	\$1,609,472	\$1,842,743	\$233,271	14%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$3,122,141	\$3,371,740	\$249,599	8%
17	Pharmacy Department	\$11,132,587	\$12,217,756	\$1,085,169	10%
18	Other General Services	\$768,464	\$853,923	\$85,459	11%
	Total General Services	\$154,338,849	\$153,556,609	(\$782,240)	-1%
B.	Professional Services:				
1	Medical Care Administration	\$5,947,323	\$5,961,434	\$14,111	0%
2	Residency Program	\$4,149,050	\$4,236,730	\$87,680	2%
3	Nursing Services Administration	\$3,027,207	\$3,133,785	\$106,578	4%
4	Medical Records	\$4,086,031	\$4,112,456	\$26,425	1%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT**

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$321,333	\$326,855	\$5,522	2%
6	Other Professional Services	\$551,986	\$640,058	\$88,072	16%
	Total Professional Services	\$18,082,930	\$18,411,318	\$328,388	2%
C.	<u>Special Services:</u>				
1	Operating Room	\$18,786,824	\$20,461,682	\$1,674,858	9%
2	Recovery Room	\$2,392,402	\$2,361,187	(\$31,215)	-1%
3	Anesthesiology	\$857,812	\$1,058,413	\$200,601	23%
4	Delivery Room	\$0	\$176	\$176	0%
5	Diagnostic Radiology	\$9,154,307	\$9,263,621	\$109,314	1%
6	Diagnostic Ultrasound	\$1,627,347	\$1,650,360	\$23,013	1%
7	Radiation Therapy	\$2,616,109	\$3,056,235	\$440,126	17%
8	Radioisotopes	\$782,038	\$798,018	\$15,980	2%
9	CT Scan	\$2,870,201	\$2,598,154	(\$272,047)	-9%
10	Laboratory	\$13,473,285	\$13,630,115	\$156,830	1%
11	Blood Storing/Processing	\$2,036,522	\$1,928,767	(\$107,755)	-5%
12	Cardiology	\$753,439	\$711,408	(\$42,031)	-6%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$548,132	\$560,175	\$12,043	2%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$154,804	\$150,881	(\$3,923)	-3%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,157,876	\$1,157,874	(\$2)	0%
19	Pulmonary Function	\$75,006	\$66,127	(\$8,879)	-12%
20	Intravenous Therapy	\$740,214	\$749,102	\$8,888	1%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$7,533,430	\$8,449,452	\$916,022	12%
23	Renal Dialysis	\$191,747	\$164,539	(\$27,208)	-14%
24	Emergency Room	\$21,029,455	\$21,818,365	\$788,910	4%
25	MRI	\$1,835,378	\$1,923,125	\$87,747	5%
26	PET Scan	\$424,482	\$366,793	(\$57,689)	-14%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$662,649	\$698,317	\$35,668	5%
29	Sleep Center	\$655,045	\$700,946	\$45,901	7%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$869,053	\$944,547	\$75,494	9%
32	Occupational Therapy / Physical Therapy	\$2,922,476	\$3,112,617	\$190,141	7%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$3,617,500	\$3,799,006	\$181,506	5%
	Total Special Services	\$97,767,533	\$102,180,002	\$4,412,469	5%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$22,842,940	\$23,992,820	\$1,149,880	5%
2	Intensive Care Unit	\$6,858,075	\$7,180,584	\$322,509	5%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,539,198	\$2,564,474	\$25,276	1%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,254,559	\$4,502,208	\$247,649	6%
7	Newborn Nursery Unit	\$1,044,260	\$1,037,117	(\$7,143)	-1%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$1,093,985	\$1,218,834	\$124,849	11%
11	Home Care	\$11,175,906	\$11,126,124	(\$49,782)	0%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$325,072,710	\$ 336,113,486	\$347,835,624
2	Other Operating Revenue	9,611,535	9,543,630	11,871,399
3	Total Operating Revenue	\$334,684,245	\$345,657,116	\$359,707,023
4	Total Operating Expenses	312,521,510	328,515,648	334,537,291
5	Income/(Loss) From Operations	\$22,162,735	\$17,141,468	\$25,169,732
6	Total Non-Operating Revenue	2,779,040	4,377,722	3,903,958
7	Excess/(Deficiency) of Revenue Over Expenses	\$24,941,775	\$21,519,190	\$29,073,690
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	6.57%	4.90%	6.92%
2	Hospital Non Operating Margin	0.82%	1.25%	1.07%
3	Hospital Total Margin	7.39%	6.15%	8.00%
4	Income/(Loss) From Operations	\$22,162,735	\$17,141,468	\$25,169,732
5	Total Operating Revenue	\$334,684,245	\$345,657,116	\$359,707,023
6	Total Non-Operating Revenue	\$2,779,040	\$4,377,722	\$3,903,958
7	Total Revenue	\$337,463,285	\$350,034,838	\$363,610,981
8	Excess/(Deficiency) of Revenue Over Expenses	\$24,941,775	\$21,519,190	\$29,073,690
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$131,224,000	\$124,933,000	\$144,992,000
2	Hospital Total Net Assets	\$144,810,000	\$138,072,000	\$161,005,000
3	Hospital Change in Total Net Assets	\$6,700,000	(\$6,738,000)	\$22,933,000
4	Hospital Change in Total Net Assets %	104.9%	-4.7%	16.6%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.33	0.31	0.30
2	Total Operating Expenses	\$312,521,510	\$328,515,648	\$334,537,291
3	Total Gross Revenue	\$938,143,113	\$1,033,672,371	\$1,119,150,279
4	Total Other Operating Revenue	\$8,002,619	\$9,543,630	\$11,871,399
5	Private Payment to Cost Ratio	1.39	1.40	1.47
6	Total Non-Government Payments	\$181,501,628	\$183,105,943	\$188,050,908

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
7	Total Uninsured Payments	\$6,557,339	\$8,137,253	\$7,779,487
8	Total Non-Government Charges	\$401,833,456	\$416,222,085	\$435,228,054
9	Total Uninsured Charges	\$21,265,632	\$20,216,749	\$20,044,528
10	<u>Medicare Payment to Cost Ratio</u>	0.82	0.76	0.77
11	Total Medicare Payments	\$112,560,921	\$114,384,581	\$119,065,111
12	Total Medicare Charges	\$417,265,072	\$476,963,732	\$520,387,262
13	<u>Medicaid Payment to Cost Ratio</u>	0.84	0.75	0.66
14	Total Medicaid Payments	\$27,521,859	\$32,272,046	\$31,082,795
15	Total Medicaid Charges	\$98,984,727	\$137,098,815	\$159,568,940
16	<u>Uncompensated Care Cost</u>	\$7,061,633	\$6,432,546	\$5,829,532
17	Charity Care	\$9,520,361	\$6,856,094	\$7,509,399
18	Bad Debts	\$11,858,436	\$13,570,742	\$12,199,395
19	Total Uncompensated Care	\$21,378,797	\$20,426,836	\$19,708,794
20	<u>Uncompensated Care % of Total Expenses</u>	2.3%	2.0%	1.7%
21	Total Operating Expenses	\$312,521,510	\$328,515,648	\$334,537,291
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	2.21	1.97	1.75
2	Total Current Assets	\$124,338,000	\$120,466,000	\$121,808,000
3	Total Current Liabilities	\$56,147,000	\$61,117,000	\$69,649,000
4	<u>Days Cash on Hand</u>	97	80	76
5	Cash and Cash Equivalents	\$50,099,000	\$56,459,000	\$54,769,000
6	Short Term Investments	27,573,000	10,647,000	10,187,000
7	Total Cash and Short Term Investments	\$77,672,000	\$67,106,000	\$64,956,000
8	Total Operating Expenses	\$312,521,510	\$328,515,648	\$334,537,291
9	Depreciation Expense	\$21,231,661	\$21,736,910	\$21,448,732
10	Operating Expenses less Depreciation Expense	\$291,289,849	\$306,778,738	\$313,088,559
11	<u>Days Revenue in Patient Accounts Receivable</u>	43.32	46.43	44.31

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
12	Net Patient Accounts Receivable	\$ 38,248,000	\$ 42,961,000	\$ 45,169,000
13	Due From Third Party Payers	\$334,000	\$0	\$0
14	Due To Third Party Payers	\$0	\$207,000	\$2,944,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 38,582,000	\$ 42,754,000	\$ 42,225,000
16	Total Net Patient Revenue	\$325,072,710	\$ 336,113,486	\$ 347,835,624
17	<u>Average Payment Period</u>	70.35	72.72	81.20
18	Total Current Liabilities	\$56,147,000	\$61,117,000	\$69,649,000
19	Total Operating Expenses	\$312,521,510	\$328,515,648	\$334,537,291
20	Depreciation Expense	\$21,231,661	\$21,736,910	\$21,448,732
21	Total Operating Expenses less Depreciation Expense	\$291,289,849	\$306,778,738	\$313,088,559
F. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	36.9	34.3	36.6
2	Total Net Assets	\$144,810,000	\$138,072,000	\$161,005,000
3	Total Assets	\$392,308,000	\$402,626,000	\$440,085,000
4	<u>Cash Flow to Total Debt Ratio</u>	36.9	33.9	38.0
5	Excess/(Deficiency) of Revenues Over Expenses	\$24,941,775	\$21,519,190	\$29,073,690
6	Depreciation Expense	\$21,231,661	\$21,736,910	\$21,448,732
7	Excess of Revenues Over Expenses and Depreciation Expense	\$46,173,436	\$43,256,100	\$50,522,422
8	Total Current Liabilities	\$56,147,000	\$61,117,000	\$69,649,000
9	Total Long Term Debt	\$69,102,000	\$66,531,000	\$63,332,000
10	Total Current Liabilities and Total Long Term Debt	\$125,249,000	\$127,648,000	\$132,981,000
11	<u>Long Term Debt to Capitalization Ratio</u>	32.3	32.5	28.2
12	Total Long Term Debt	\$69,102,000	\$66,531,000	\$63,332,000
13	Total Net Assets	\$144,810,000	\$138,072,000	\$161,005,000
14	Total Long Term Debt and Total Net Assets	\$213,912,000	\$204,603,000	\$224,337,000
15	<u>Debt Service Coverage Ratio</u>	4.7	7.0	7.0
16	Excess Revenues over Expenses	\$24,941,775	\$21,519,190	\$29,073,690
17	Interest Expense	\$3,718,716	\$3,242,228	\$3,106,032
18	Depreciation and Amortization Expense	\$21,231,661	\$21,736,910	\$21,448,732

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
19	Principal Payments	\$6,907,000	\$3,407,000	\$4,580,000
G. <u>Other Financial Ratios</u>				
20	Average Age of Plant	11.2	11.9	9.7
21	Accumulated Depreciation	\$236,911,000	\$258,275,000	\$208,046,000
22	Depreciation and Amortization Expense	\$21,231,661	\$21,736,910	\$21,448,732
H. <u>Utilization Measures Summary</u>				
1	Patient Days	57,829	59,935	59,473
2	Discharges	13,918	13,855	14,158
3	ALOS	4.2	4.3	4.2
4	Staffed Beds	178	183	183
5	Available Beds	-	248	260
6	Licensed Beds	297	297	297
6	Occupancy of Staffed Beds	89.0%	89.7%	89.0%
7	Occupancy of Available Beds	74.0%	66.2%	62.7%
8	Full Time Equivalent Employees	2,021.0	2,056.6	2,080.0
I. <u>Hospital Gross Revenue Payer Mix Percentage</u>				
1	Non-Government Gross Revenue Payer Mix Percentage	40.6%	38.3%	37.1%
2	Medicare Gross Revenue Payer Mix Percentage	44.5%	46.1%	46.5%
3	Medicaid Gross Revenue Payer Mix Percentage	10.6%	13.3%	14.3%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	1.8%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.3%	2.0%	1.8%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.3%	0.4%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$380,567,824	\$396,005,336	\$415,183,526
9	Medicare Gross Revenue (Charges)	\$417,265,072	\$476,963,732	\$520,387,262
10	Medicaid Gross Revenue (Charges)	\$98,984,727	\$137,098,815	\$159,568,940
11	Other Medical Assistance Gross Revenue (Charges)	\$17,224,925	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$21,265,632	\$20,216,749	\$20,044,528
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$2,834,933	\$3,387,739	\$3,966,023
14	Total Gross Revenue (Charges)	\$938,143,113	\$1,033,672,371	\$1,119,150,279
J. <u>Hospital Net Revenue Payer Mix Percentage</u>				
1	Non-Government Net Revenue Payer Mix Percentage	54.3%	52.9%	53.1%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
2	Medicare Net Revenue Payer Mix Percentage	34.9%	34.6%	35.1%
3	Medicaid Net Revenue Payer Mix Percentage	8.5%	9.8%	9.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	2.0%	2.5%	2.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.2%	0.3%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$174,944,289	\$174,968,690	\$180,271,421
9	Medicare Net Revenue (Payments)	\$112,560,921	\$114,384,581	\$119,065,111
10	Medicaid Net Revenue (Payments)	\$27,521,859	\$32,272,046	\$31,082,795
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$6,557,339	\$8,137,253	\$7,779,487
13	CHAMPUS / TRICARE Net Revenue Payments)	\$633,653	\$786,915	\$1,178,818
14	Total Net Revenue (Payments)	\$322,218,061	\$330,549,485	\$339,377,632
K. Discharges				
1	Non-Government (Including Self Pay / Uninsured)	4,717	4,406	4,421
2	Medicare	7,204	7,373	7,537
3	Medical Assistance	1,954	2,028	2,138
4	Medicaid	1,665	2,028	2,138
5	Other Medical Assistance	289	-	-
6	CHAMPUS / TRICARE	43	48	62
7	Uninsured (Included In Non-Government)	242	201	182
8	Total	13,918	13,855	14,158
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.068190	1.126000	1.110100
2	Medicare	1.346810	1.336000	1.386560
3	Medical Assistance	0.870552	0.966000	0.955910
4	Medicaid	0.830890	0.966000	0.955910
5	Other Medical Assistance	1.099060	0.000000	0.000000
6	CHAMPUS / TRICARE	0.816880	0.876000	0.796750
7	Uninsured (Included In Non-Government)	1.054380	1.080000	1.033210
8	Total Case Mix Index	1.183881	1.213466	1.232616
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	8,487	8,487	8,809
2	Emergency Room - Treated and Discharged	85,981	86,806	85,082
3	Total Emergency Room Visits	94,468	95,293	93,891

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE 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%
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	\$0	\$4,954,853	\$4,954,853	0%
2	Inpatient Payments	\$0	\$1,216,173	\$1,216,173	0%
3	Outpatient Charges	\$0	\$5,479,545	\$5,479,545	0%
4	Outpatient Payments	\$0	\$1,138,534	\$1,138,534	0%
5	Discharges	0	120	120	0%
6	Patient Days	0	455	455	0%
7	Outpatient Visits (Excludes ED Visits)	0	5,201	5,201	0%
8	Emergency Department Outpatient Visits	0	429	429	0%
9	Emergency Department Inpatient Admissions	0	100	100	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$10,434,398	\$10,434,398	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$2,354,707	\$2,354,707	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$6,505,253	\$0	(\$6,505,253)	-100%
2	Inpatient Payments	\$1,707,890	\$0	(\$1,707,890)	-100%
3	Outpatient Charges	\$5,380,032	\$0	(\$5,380,032)	-100%
4	Outpatient Payments	\$1,047,232	\$0	(\$1,047,232)	-100%
5	Discharges	134	0	(134)	-100%
6	Patient Days	679	0	(679)	-100%
7	Outpatient Visits (Excludes ED Visits)	5,621	0	(5,621)	-100%
8	Emergency Department Outpatient Visits	464	0	(464)	-100%
9	Emergency Department Inpatient Admissions	104	0	(104)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,885,285	\$0	(\$11,885,285)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,755,122	\$0	(\$2,755,122)	-100%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$30,143,433	\$39,958,207	\$9,814,774	33%
2	Inpatient Payments	\$7,913,862	\$9,807,781	\$1,893,919	24%
3	Outpatient Charges	\$25,510,872	\$34,474,638	\$8,963,766	35%
4	Outpatient Payments	\$4,965,735	\$7,163,104	\$2,197,369	44%
5	Discharges	793	950	157	20%
6	Patient Days	3,527	4,245	718	20%
7	Outpatient Visits (Excludes ED Visits)	26,655	32,719	6,064	23%
8	Emergency Department Outpatient Visits	2,199	2,700	501	23%
9	Emergency Department Inpatient Admissions	665	810	145	22%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$55,654,305	\$74,432,845	\$18,778,540	34%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,879,597	\$16,970,885	\$4,091,288	32%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 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	\$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%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 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	\$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%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$36,648,686	\$44,913,060	\$8,264,374	23%
	TOTAL INPATIENT PAYMENTS	\$9,621,752	\$11,023,954	\$1,402,202	15%
	TOTAL OUTPATIENT CHARGES	\$30,890,904	\$39,954,183	\$9,063,279	29%
	TOTAL OUTPATIENT PAYMENTS	\$6,012,967	\$8,301,638	\$2,288,671	38%
	TOTAL DISCHARGES	927	1,070	143	15%
	TOTAL PATIENT DAYS	4,206	4,700	494	12%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	32,276	37,920	5,644	17%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	2,663	3,129	466	17%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	769	910	141	18%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$67,539,590	\$84,867,243	\$17,327,653	26%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$15,634,719	\$19,325,592	\$3,690,873	24%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 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	\$297,998	\$0	(\$297,998)	-100%
4	Outpatient Payments	\$86,723	\$0	(\$86,723)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	292	0	(292)	-100%
8	Emergency Department Outpatient Visits	90	0	(90)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$297,998	\$0	(\$297,998)	-100%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$86,723	\$0	(\$86,723)	-100%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$9,312,583	\$1,901,665	(\$7,410,918)	-80%
2	Inpatient Payments	\$2,157,016	\$380,063	(\$1,776,953)	-82%
3	Outpatient Charges	\$20,646,888	\$6,636,381	(\$14,010,507)	-68%
4	Outpatient Payments	\$6,008,619	\$2,189,219	(\$3,819,400)	-64%
5	Discharges	531	104	(427)	-80%
6	Patient Days	1,423	281	(1,142)	-80%
7	Outpatient Visits (Excludes ED Visits)	20,244	5,896	(14,348)	-71%
8	Emergency Department Outpatient Visits	6,223	1,730	(4,493)	-72%
9	Emergency Department Inpatient Admissions	105	21	(84)	-80%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$29,959,471	\$8,538,046	(\$21,421,425)	-72%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$8,165,635	\$2,569,282	(\$5,596,353)	-69%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
TOTAL INPATIENT & OUTPATIENT CHARGES		\$0	\$0	\$0	0%
TOTAL INPATIENT & OUTPATIENT PAYMENTS		\$0	\$0	\$0	0%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$1,267,328	\$215,951	(\$1,051,377)	-83%
2	Inpatient Payments	\$293,543	\$43,160	(\$250,383)	-85%
3	Outpatient Charges	\$5,300,801	\$3,393,426	(\$1,907,375)	-36%
4	Outpatient Payments	\$1,542,629	\$1,119,428	(\$423,201)	-27%
5	Discharges	56	11	(45)	-80%
6	Patient Days	353	63	(290)	-82%
7	Outpatient Visits (Excludes ED Visits)	5,197	3,015	(2,182)	-42%
8	Emergency Department Outpatient Visits	1,598	0	(1,598)	-100%
9	Emergency Department Inpatient Admissions	55	11	(44)	-80%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,568,129	\$3,609,377	(\$2,958,752)	-45%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,836,172	\$1,162,588	(\$673,584)	-37%
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%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 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	\$1,367,022	\$244,225	(\$1,122,797)	-82%
2	Inpatient Payments	\$316,635	\$48,810	(\$267,825)	-85%
3	Outpatient Charges	\$2,664,888	\$864,602	(\$1,800,286)	-68%
4	Outpatient Payments	\$775,531	\$285,216	(\$490,315)	-63%
5	Discharges	95	11	(84)	-88%
6	Patient Days	255	28	(227)	-89%
7	Outpatient Visits (Excludes ED Visits)	2,613	768	(1,845)	-71%
8	Emergency Department Outpatient Visits	803	247	(556)	-69%
9	Emergency Department Inpatient Admissions	7	2	(5)	-71%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,031,910	\$1,108,827	(\$2,923,083)	-72%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,092,166	\$334,026	(\$758,140)	-69%
	H. AETNA				
1	Inpatient Charges	\$3,804,690	\$710,703	(\$3,093,987)	-81%
2	Inpatient Payments	\$881,257	\$142,040	(\$739,217)	-84%
3	Outpatient Charges	\$8,134,020	\$2,432,954	(\$5,701,066)	-70%
4	Outpatient Payments	\$2,367,147	\$802,586	(\$1,564,561)	-66%
5	Discharges	225	34	(191)	-85%
6	Patient Days	613	107	(506)	-83%
7	Outpatient Visits (Excludes ED Visits)	7,975	2,161	(5,814)	-73%
8	Emergency Department Outpatient Visits	2,451	668	(1,783)	-73%
9	Emergency Department Inpatient Admissions	27	4	(23)	-85%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$11,938,710	\$3,143,657	(\$8,795,053)	-74%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,248,404	\$944,626	(\$2,303,778)	-71%
	II. TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$15,751,623	\$3,072,544	(\$12,679,079)	-80%
	TOTAL INPATIENT PAYMENTS	\$3,648,451	\$614,073	(\$3,034,378)	-83%
	TOTAL OUTPATIENT CHARGES	\$37,044,595	\$13,327,363	(\$23,717,232)	-64%
	TOTAL OUTPATIENT PAYMENTS	\$10,780,649	\$4,396,449	(\$6,384,200)	-59%
	TOTAL DISCHARGES	907	160	(747)	-82%
	TOTAL PATIENT DAYS	2,644	479	(2,165)	-82%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	36,321	11,840	(24,481)	-67%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	11,165	2,645	(8,520)	-76%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	194	38	(156)	-80%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$52,796,218	\$16,399,907	(\$36,396,311)	-69%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$14,429,100	\$5,010,522	(\$9,418,578)	-65%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. ASSETS					
A. Current Assets:					
1	Cash and Cash Equivalents	\$59,543,000	\$58,568,000	(\$975,000)	-2%
2	Short Term Investments	\$10,647,000	\$10,187,000	(\$460,000)	-4%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$43,838,000	\$45,951,000	\$2,113,000	5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$4,188,000	\$4,613,000	\$425,000	10%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$1,436,000	\$1,347,000	(\$89,000)	-6%
8	Prepaid Expenses	\$2,309,000	\$2,425,000	\$116,000	5%
9	Other Current Assets	\$2,867,000	\$3,716,000	\$849,000	30%
	Total Current Assets	\$124,828,000	\$126,807,000	\$1,979,000	2%
B. Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$8,120,000	\$8,207,000	\$87,000	1%
2	Board Designated for Capital Acquisition	\$80,737,000	\$95,568,000	\$14,831,000	18%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$13,591,000	\$15,313,000	\$1,722,000	13%
	Total Noncurrent Assets Whose Use is Limited:	\$102,448,000	\$119,088,000	\$16,640,000	16%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$2,019,000	\$16,627,000	\$14,608,000	724%
7	Other Noncurrent Assets	\$3,011,000	\$2,879,000	(\$132,000)	-4%
C. Net Fixed Assets:					
1	Property, Plant and Equipment	\$428,470,000	\$390,097,000	(\$38,373,000)	-9%
2	Less: Accumulated Depreciation	\$265,372,000	\$215,805,000	(\$49,567,000)	(\$0)
	Property, Plant and Equipment, Net	\$163,098,000	\$174,292,000	\$11,194,000	7%
3	Construction in Progress	\$21,322,000	\$14,694,000	(\$6,628,000)	-31%
	Total Net Fixed Assets	\$184,420,000	\$188,986,000	\$4,566,000	2%
	Total Assets	\$416,726,000	\$454,387,000	\$37,661,000	9%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$19,224,000	\$19,616,000	\$392,000	2%
2	Salaries, Wages and Payroll Taxes	\$30,639,000	\$33,912,000	\$3,273,000	11%
3	Due To Third Party Payers	\$207,000	\$2,944,000	\$2,737,000	1322%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$3,330,000	\$3,300,000	(\$30,000)	-1%
6	Current Portion of Notes Payable	\$292,000	\$1,615,000	\$1,323,000	453%
7	Other Current Liabilities	\$9,563,000	\$10,485,000	\$922,000	10%
	Total Current Liabilities	\$63,255,000	\$71,872,000	\$8,617,000	14%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$71,808,000	\$68,388,000	(\$3,420,000)	-5%
2	Notes Payable (Net of Current Portion)	\$926,000	\$995,000	\$69,000	7%
	Total Long Term Debt	\$72,734,000	\$69,383,000	(\$3,351,000)	-5%
3	Accrued Pension Liability	\$117,232,000	\$129,719,000	\$12,487,000	11%
4	Other Long Term Liabilities	\$19,960,000	\$16,603,000	(\$3,357,000)	-17%
	Total Long Term Liabilities	\$209,926,000	\$215,705,000	\$5,779,000	3%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$130,362,000	\$150,651,000	\$20,289,000	16%
2	Temporarily Restricted Net Assets	\$6,303,000	\$9,195,000	\$2,892,000	46%
3	Permanently Restricted Net Assets	\$6,880,000	\$6,964,000	\$84,000	1%
	Total Net Assets	\$143,545,000	\$166,810,000	\$23,265,000	16%
	Total Liabilities and Net Assets	\$416,726,000	\$454,387,000	\$37,661,000	9%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,053,422,000	\$1,140,027,000	\$86,605,000	8%
2	Less: Allowances	\$701,534,000	\$771,052,000	\$69,518,000	10%
3	Less: Charity Care	\$6,856,000	\$7,509,000	\$653,000	10%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$345,032,000	\$361,466,000	\$16,434,000	5%
5	Other Operating Revenue	\$14,403,000	\$12,534,000	(\$1,869,000)	-13%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$359,435,000	\$374,000,000	\$14,565,000	4%
B. Operating Expenses:					
1	Salaries and Wages	\$165,100,000	\$171,970,000	\$6,870,000	4%
2	Fringe Benefits	\$44,396,000	\$39,621,000	(\$4,775,000)	-11%
3	Physicians Fees	\$3,006,000	\$3,405,000	\$399,000	13%
4	Supplies and Drugs	\$33,893,000	\$35,376,000	\$1,483,000	4%
5	Depreciation and Amortization	\$22,454,000	\$22,115,000	(\$339,000)	-2%
6	Bad Debts	\$13,720,000	\$12,256,000	(\$1,464,000)	-11%
7	Interest	\$3,614,000	\$3,405,000	(\$209,000)	-6%
8	Malpractice	\$2,859,000	\$2,078,000	(\$781,000)	-27%
9	Other Operating Expenses	\$55,581,000	\$61,431,000	\$5,850,000	11%
	Total Operating Expenses	\$344,623,000	\$351,657,000	\$7,034,000	2%
	Income/(Loss) From Operations	\$14,812,000	\$22,343,000	\$7,531,000	51%
C. Non-Operating Revenue:					
1	Income from Investments	\$5,968,000	\$2,161,000	(\$3,807,000)	-64%
2	Gifts, Contributions and Donations	\$471,000	\$467,000	(\$4,000)	-1%
3	Other Non-Operating Gains/(Losses)	(\$1,288,000)	\$1,278,000	\$2,566,000	-199%
	Total Non-Operating Revenue	\$5,151,000	\$3,906,000	(\$1,245,000)	-24%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$19,963,000	\$26,249,000	\$6,286,000	31%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$19,963,000	\$26,249,000	\$6,286,000	31%

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010</u>	<u>FY 2011</u>	<u>FY 2012</u>
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$337,751,000	\$345,032,000	\$361,466,000
2	Other Operating Revenue	9,955,000	14,403,000	12,534,000
3	Total Operating Revenue	\$347,706,000	\$359,435,000	\$374,000,000
4	Total Operating Expenses	328,329,000	344,623,000	351,657,000
5	Income/(Loss) From Operations	\$19,377,000	\$14,812,000	\$22,343,000
6	Total Non-Operating Revenue	2,815,000	5,151,000	3,906,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$22,192,000	\$19,963,000	\$26,249,000
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	5.53%	4.06%	5.91%
2	Parent Corporation Non-Operating Margin	0.80%	1.41%	1.03%
3	Parent Corporation Total Margin	6.33%	5.48%	6.95%
4	Income/(Loss) From Operations	\$19,377,000	\$14,812,000	\$22,343,000
5	Total Operating Revenue	\$347,706,000	\$359,435,000	\$374,000,000
6	Total Non-Operating Revenue	\$2,815,000	\$5,151,000	\$3,906,000
7	Total Revenue	\$350,521,000	\$364,586,000	\$377,906,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$22,192,000	\$19,963,000	\$26,249,000
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$134,810,000	\$130,362,000	\$150,651,000
2	Parent Corporation Total Net Assets	\$148,452,000	\$143,545,000	\$166,810,000
3	Parent Corporation Change in Total Net Assets	\$6,471,000	(\$4,907,000)	\$23,265,000
4	Parent Corporation Change in Total Net Assets %	104.6%	-3.3%	16.2%

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
D. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	2.21	1.97	1.76
2	Total Current Assets	\$128,395,000	\$124,828,000	\$126,807,000
3	Total Current Liabilities	\$58,221,000	\$63,255,000	\$71,872,000
4	<u>Days Cash on Hand</u>	96	80	76
5	Cash and Cash Equivalents	\$52,873,000	\$59,543,000	\$58,568,000
6	Short Term Investments	27,573,000	10,647,000	10,187,000
7	Total Cash and Short Term Investments	\$80,446,000	\$70,190,000	\$68,755,000
8	Total Operating Expenses	\$328,329,000	\$344,623,000	\$351,657,000
9	Depreciation Expense	\$21,932,000	\$22,454,000	\$22,115,000
10	Operating Expenses less Depreciation Expense	\$306,397,000	\$322,169,000	\$329,542,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	43	46	43
12	Net Patient Accounts Receivable	\$ 39,170,000	\$ 43,838,000	\$ 45,951,000
13	Due From Third Party Payers	\$334,000	\$0	\$0
14	Due To Third Party Payers	\$0	\$207,000	\$2,944,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 39,504,000	\$ 43,631,000	\$ 43,007,000
16	Total Net Patient Revenue	\$337,751,000	\$345,032,000	\$361,466,000
17	<u>Average Payment Period</u>	69	72	80
18	Total Current Liabilities	\$58,221,000	\$63,255,000	\$71,872,000
19	Total Operating Expenses	\$328,329,000	\$344,623,000	\$351,657,000
20	Depreciation Expense	\$21,932,000	\$22,454,000	\$22,115,000
21	Total Operating Expenses less Depreciation Expense	\$306,397,000	\$322,169,000	\$329,542,000

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	36.6	34.4	36.7
2	Total Net Assets	\$148,452,000	\$143,545,000	\$166,810,000
3	Total Assets	\$405,958,000	\$416,726,000	\$454,387,000
4	<u>Cash Flow to Total Debt Ratio</u>	32.8	31.2	34.2
5	Excess/(Deficiency) of Revenues Over Expenses	\$22,192,000	\$19,963,000	\$26,249,000
6	Depreciation Expense	\$21,932,000	\$22,454,000	\$22,115,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$44,124,000	\$42,417,000	\$48,364,000
8	Total Current Liabilities	\$58,221,000	\$63,255,000	\$71,872,000
9	Total Long Term Debt	\$76,214,000	\$72,734,000	\$69,383,000
10	Total Current Liabilities and Total Long Term Debt	\$134,435,000	\$135,989,000	\$141,255,000
11	<u>Long Term Debt to Capitalization Ratio</u>	33.9	33.6	29.4
12	Total Long Term Debt	\$76,214,000	\$72,734,000	\$69,383,000
13	Total Net Assets	\$148,452,000	\$143,545,000	\$166,810,000
14	Total Long Term Debt and Total Net Assets	\$224,666,000	\$216,279,000	\$236,193,000

MIDDLESEX HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2012								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
		PATIENT	DISCHARGES	ADMISSIONS	STAFFED	AVAILABLE	OCCUPANCY	OCCUPANCY
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	OF STAFFED	OF AVAILABLE
							BEDS (A)	BEDS
1	Adult Medical/Surgical	40,086	11,093	11,112	119	168	92.3%	65.4%
2	ICU/CCU (Excludes Neonatal ICU)	6,789	750	0	26	26	71.5%	71.5%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	6,208	789	789	18	20	94.5%	85.0%
	TOTAL PSYCHIATRIC	6,208	789	789	18	20	94.5%	85.0%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	3,028	1,136	1,138	10	23	83.0%	36.1%
7	Newborn	3,362	1,140	1,142	10	23	92.1%	40.0%
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	56,111	13,018	13,039	173	237	88.9%	64.9%
	TOTAL INPATIENT BED UTILIZATION	59,473	14,158	14,181	183	260	89.0%	62.7%
	TOTAL INPATIENT REPORTED YEAR	59,473	14,158	14,181	183	260	89.0%	62.7%
	TOTAL INPATIENT PRIOR YEAR	59,935	13,855	13,800	183	248	89.7%	66.2%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-462	303	381	0	12	-0.7%	-3.5%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-1%	2%	3%	0%	5%	-1%	-5%
	Total Licensed Beds and Bassinets	297						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	7,256	7,073	-183	-3%
2	Outpatient Scans (Excluding Emergency Department Scans)	11,270	10,392	-878	-8%
3	Emergency Department Scans	11,427	11,314	-113	-1%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	29,953	28,779	-1,174	-4%
B. MRI Scans (A)					
1	Inpatient Scans	1,446	1,663	217	15%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,068	9,098	30	0%
3	Emergency Department Scans	65	98	33	51%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	10,579	10,859	280	3%
C. PET Scans (A)					
1	Inpatient Scans	0	1	1	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	7	8	1	14%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	7	9	2	29%
D. PET/CT Scans (A)					
1	Inpatient Scans	8	3	-5	-63%
2	Outpatient Scans (Excluding Emergency Department Scans)	479	495	16	3%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	487	498	11	2%
(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	183	225	42	23%
2	Outpatient Procedures	10,431	12,272	1,841	18%
	Total Linear Accelerator Procedures	10,614	12,497	1,883	18%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	115	110	-5	-4%
2	Outpatient Procedures	219	202	-17	-8%
	Total Cardiac Catheterization Procedures	334	312	-22	-7%
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	3,110	2,859	-251	-8%
2	Outpatient Surgical Procedures	4,934	4,807	-127	-3%
	Total Surgical Procedures	8,044	7,666	-378	-5%
J. Endoscopy Procedures					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Endoscopy Procedures	782	885	103	13%
2	Outpatient Endoscopy Procedures	1,851	1,926	75	4%
	Total Endoscopy Procedures	2,633	2,811	178	7%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	8,487	8,809	322	4%
2	Emergency Room Visits: Treated and Discharged	86,806	85,082	-1,724	-2%
	Total Emergency Room Visits	95,293	93,891	-1,402	-1%
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	29,833	35,449	5,616	19%
4	Medical Clinic Visits	53,691	55,697	2,006	4%
5	Specialty Clinic Visits	7,454	6,891	-563	-8%
	Total Hospital Clinic Visits	90,978	98,037	7,059	8%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	44,360	46,677	2,317	5%
2	Cardiology	3,620	3,489	-131	-4%
3	Chemotherapy	459	730	271	59%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	412,543	399,259	-13,284	-3%
	Total Other Hospital Outpatient Visits	460,982	450,155	-10,827	-2%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	497.2	522.0	24.8	5%
2	Total Physician FTEs	130.3	134.0	3.7	3%
3	Total Non-Nursing and Non-Physician FTEs	1,429.1	1,424.0	-5.1	0%
	Total Hospital Full Time Equivalent Employees	2,056.6	2,080.0	23.4	1%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	MH OP Center Saybrook Road	1,184	1,440	256	22%
2	Middlesex Hospital	3,750	3,367	-383	-10%
	Total Outpatient Surgical Procedures(A)	4,934	4,807	-127	-3%
B. Outpatient Endoscopy Procedures					
1	MH Shoreline Oscopy Room	0	0	0	0%
2	Middlesex Hospital	1,851	1,926	75	4%
	Total Outpatient Endoscopy Procedures(B)	1,851	1,926	75	4%
C. Outpatient Hospital Emergency Room Visits					
1	MH Marlborough ED	24,175	23,096	-1,079	-4%
2	MH Shoreline ED	21,592	20,601	-991	-5%
3	Middlesex Hospital ED	41,039	41,385	346	1%
	Total Outpatient Hospital Emergency Room Visits(C)	86,806	85,082	-1,724	-2%
(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.					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$274,740,403	\$300,009,429	\$25,269,026	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$68,628,846	\$72,545,632	\$3,916,786	6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.98%	24.18%	-0.80%	-3%
4	DISCHARGES	7,373	7,537	164	2%
5	CASE MIX INDEX (CMI)	1.33600	1.38656	0.05056	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	9,850.32800	10,450.50272	600.17472	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,967.16	\$6,941.83	(\$25.33)	0%
8	PATIENT DAYS	35,194	34,849	(345)	-1%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,950.02	\$2,081.71	\$131.70	7%
10	AVERAGE LENGTH OF STAY	4.8	4.6	(0.1)	-3%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$202,223,329	\$220,377,833	\$18,154,504	9%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$45,755,735	\$46,519,479	\$763,744	2%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	22.63%	21.11%	-1.52%	-7%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	73.61%	73.46%	-0.15%	0%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,426.91424	5,536.45175	109.53751	2%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,431.26	\$8,402.40	(\$28.86)	0%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$476,963,732	\$520,387,262	\$43,423,530	9%
18	TOTAL ACCRUED PAYMENTS	\$114,384,581	\$119,065,111	\$4,680,530	4%
19	TOTAL ALLOWANCES	\$362,579,151	\$401,322,151	\$38,743,000	11%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$142,019,598	\$141,858,357	(\$161,241)	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$66,126,608	\$63,941,094	(\$2,185,514)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	46.56%	45.07%	-1.49%	-3%
4	DISCHARGES	4,406	4,421	15	0%
5	CASE MIX INDEX (CMI)	1.12600	1.11010	(0.01590)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,961.15600	4,907.75210	(53.40390)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$13,328.87	\$13,028.59	(\$300.28)	-2%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$6,361.71)	(\$6,086.76)	\$274.95	-4%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$31,561,423)	(\$29,872,304)	\$1,689,118	-5%
10	PATIENT DAYS	15,861	15,364	(497)	-3%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,169.13	\$4,161.75	(\$7.38)	0%
12	AVERAGE LENGTH OF STAY	3.6	3.5	(0.1)	-3%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$274,202,487	\$293,369,697	\$19,167,210	7%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$116,979,335	\$124,109,814	\$7,130,479	6%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	42.66%	42.30%	-0.36%	-1%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	193.07%	206.80%	13.73%	7%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	8,506.82705	9,142.83415	636.00710	7%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$13,751.23	\$13,574.55	(\$176.68)	-1%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$5,319.97)	(\$5,172.15)	\$147.82	-3%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$45,256,049)	(\$47,288,070)	(\$2,032,021)	4%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$416,222,085	\$435,228,054	\$19,005,969	5%
22	TOTAL ACCRUED PAYMENTS	\$183,105,943	\$188,050,908	\$4,944,965	3%
23	TOTAL ALLOWANCES	\$233,116,142	\$247,177,146	\$14,061,004	6%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$76,817,471)	(\$77,160,374)	(\$342,903)	0%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$377,720,253	\$396,628,859	\$18,908,606	5%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$184,841,366	\$187,614,053	\$2,772,687	2%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$192,878,887	\$209,014,806	\$16,135,919	8%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.06%	52.70%	1.63%	

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	<u>UNINSURED</u>				
	<u>UNINSURED INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$6,310,560	\$6,206,111	(\$104,449)	-2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,381,062	\$4,126,794	(\$254,268)	-6%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	69.42%	66.50%	-2.93%	-4%
4	DISCHARGES	201	182	(19)	-9%
5	CASE MIX INDEX (CMI)	1.08000	1.03321	(0.04679)	-4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	217.08000	188.04422	(29.03578)	-13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$20,181.79	\$21,945.87	\$1,764.08	9%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	(\$6,852.91)	(\$8,917.28)	(\$2,064.36)	30%
9	MEDICARE - UNINSURED IP PMT / CMAD	(\$13,214.62)	(\$15,004.04)	(\$1,789.42)	14%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,868,630)	(\$2,821,423)	\$47,207	-2%
11	PATIENT DAYS	867	759	(108)	-12%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$5,053.13	\$5,437.15	\$384.02	8%
13	AVERAGE LENGTH OF STAY	4.3	4.2	(0.1)	-3%
	<u>UNINSURED OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$13,906,189	\$13,838,417	(\$67,772)	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,756,191	\$3,652,693	(\$103,498)	-3%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.01%	26.40%	-0.62%	-2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	220.36%	222.98%	2.62%	1%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	442.93121	405.82450	(37.10671)	-8%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,480.30	\$9,000.67	\$520.37	6%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$5,270.93	\$4,573.87	(\$697.05)	-13%
21	MEDICARE - UNINSURED OP PMT / OPED	(\$49.04)	(\$598.27)	(\$549.23)	1120%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$21,722)	(\$242,793)	(\$221,071)	1018%
	<u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$20,216,749	\$20,044,528	(\$172,221)	-1%
24	TOTAL ACCRUED PAYMENTS	\$8,137,253	\$7,779,487	(\$357,766)	-4%
25	TOTAL ALLOWANCES	\$12,079,496	\$12,265,041	\$185,545	2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,890,352)	(\$3,064,216)	(\$173,864)	6%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$55,732,451	\$63,620,043	\$7,887,592	14%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,421,651	\$11,088,384	(\$1,333,267)	-11%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.29%	17.43%	-4.86%	-22%
4	DISCHARGES	2,028	2,138	110	5%
5	CASE MIX INDEX (CMI)	0.96600	0.95591	(0.01009)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,959.04800	2,043.73558	84.68758	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,340.66	\$5,425.55	(\$915.11)	-14%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,988.21	\$7,603.04	\$614.83	9%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$626.51	\$1,516.28	\$889.78	142%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,227,357	\$3,098,885	\$1,871,528	152%
11	PATIENT DAYS	8,717	9,097	380	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,424.99	\$1,218.91	(\$206.09)	-14%
13	AVERAGE LENGTH OF STAY	4.3	4.3	(0.0)	-1%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$81,366,364	\$95,948,897	\$14,582,533	18%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,850,395	\$19,994,411	\$144,016	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.40%	20.84%	-3.56%	-15%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	145.99%	150.82%	4.82%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,960.77031	3,224.43576	263.66545	9%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,704.47	\$6,200.90	(\$503.57)	-8%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,046.76	\$7,373.64	\$326.88	5%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,726.79	\$2,201.50	\$474.71	27%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,112,635	\$7,098,586	\$1,985,951	39%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$137,098,815	\$159,568,940	\$22,470,125	16%
24	TOTAL ACCRUED PAYMENTS	\$32,272,046	\$31,082,795	(\$1,189,251)	-4%
25	TOTAL ALLOWANCES	\$104,826,769	\$128,486,145	\$23,659,376	23%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,339,992	\$10,197,471	\$3,857,479	61%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$13,328.87	\$13,028.59	(\$300.28)	-2%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,967.16	\$6,941.83	(\$25.33)	0%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$13,751.23	\$13,574.55	(\$176.68)	-1%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$8,431.26	\$8,402.40	(\$28.86)	0%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$55,732,451	\$63,620,043	\$7,887,592	14%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,421,651	\$11,088,384	(\$1,333,267)	-11%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.29%	17.43%	-4.86%	-22%
4	DISCHARGES	2,028	2,138	110	5%
5	CASE MIX INDEX (CMI)	0.96600	0.95591	(0.01009)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,959.04800	2,043.73558	84.68758	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,340.66	\$5,425.55	(\$915.11)	-14%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,988.21	\$7,603.04	\$614.83	9%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$626.51	\$1,516.28	\$889.78	142%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,227,357	\$3,098,885	\$1,871,528	152%
11	PATIENT DAYS	8,717	9,097	380	4%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,424.99	\$1,218.91	(\$206.09)	-14%
13	AVERAGE LENGTH OF STAY	4.3	4.3	(0.0)	-1%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$81,366,364	\$95,948,897	\$14,582,533	18%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,850,395	\$19,994,411	\$144,016	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.40%	20.84%	-3.56%	-15%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	145.99%	150.82%	4.82%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,960.77031	3,224.43576	263.66545	9%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,704.47	\$6,200.90	(\$503.57)	-8%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,046.76	\$7,373.64	\$326.88	5%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,726.79	\$2,201.50	\$474.71	27%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$5,112,635	\$7,098,586	\$1,985,951	39%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$137,098,815	\$159,568,940	\$22,470,125	16%
24	TOTAL ACCRUED PAYMENTS	\$32,272,046	\$31,082,795	(\$1,189,251)	-4%
25	TOTAL ALLOWANCES	\$104,826,769	\$128,486,145	\$23,659,376	23%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$1,167,799	\$1,339,754	\$171,955	15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$222,060	\$338,550	\$116,490	52%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	19.02%	25.27%	6.25%	33%
4	DISCHARGES	48	62	14	29%
5	CASE MIX INDEX (CMI)	0.87600	0.79675	(0.07925)	-9%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	42.04800	49.39850	7.35050	17%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,281.11	\$6,853.45	\$1,572.34	30%
8	PATIENT DAYS	163	163	0	0%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,362.33	\$2,076.99	\$714.66	52%
10	AVERAGE LENGTH OF STAY	3.4	2.6	(0.8)	-23%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,219,940	\$2,626,269	\$406,329	18%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$564,855	\$840,268	\$275,413	49%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$3,387,739	\$3,966,023	\$578,284	17%
14	TOTAL ACCRUED PAYMENTS	\$786,915	\$1,178,818	\$391,903	50%
15	TOTAL ALLOWANCES	\$2,600,824	\$2,787,205	\$186,381	7%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$9,543,630	\$11,871,399	\$2,327,769	24%
2	TOTAL OPERATING EXPENSES	\$328,515,648	\$334,537,291	\$6,021,643	2%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$6,856,094	\$7,509,399	\$653,305	10%
5	BAD DEBTS (CHARGES)	\$13,570,742	\$12,199,395	(\$1,371,347)	-10%
6	UNCOMPENSATED CARE (CHARGES)	\$20,426,836	\$19,708,794	(\$718,042)	-4%
7	COST OF UNCOMPENSATED CARE	\$6,594,775	\$6,004,919	(\$589,856)	-9%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$137,098,815	\$159,568,940	\$22,470,125	16%
9	TOTAL ACCRUED PAYMENTS	\$32,272,046	\$31,082,795	(\$1,189,251)	-4%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$44,262,159	\$48,617,821	\$4,355,662	10%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$11,990,113	\$17,535,026	\$5,544,913	46%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$473,660,251	\$506,827,583	\$33,167,332	7%
2	TOTAL INPATIENT PAYMENTS	\$147,399,165	\$147,913,660	\$514,495	0%
3	TOTAL INPATIENT PAYMENTS / CHARGES	31.12%	29.18%	-1.93%	-6%
4	TOTAL DISCHARGES	13,855	14,158	303	2%
5	TOTAL CASE MIX INDEX	1.21347	1.23262	0.01915	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	16,812.58000	17,451.38890	638.80890	4%
7	TOTAL OUTPATIENT CHARGES	\$560,012,120	\$612,322,696	\$52,310,576	9%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	118.23%	120.81%	2.58%	2%
9	TOTAL OUTPATIENT PAYMENTS	\$183,150,320	\$191,463,972	\$8,313,652	5%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	32.70%	31.27%	-1.44%	-4%
11	TOTAL CHARGES	\$1,033,672,371	\$1,119,150,279	\$85,477,908	8%
12	TOTAL PAYMENTS	\$330,549,485	\$339,377,632	\$8,828,147	3%
13	TOTAL PAYMENTS / TOTAL CHARGES	31.98%	30.32%	-1.65%	-5%
14	PATIENT DAYS	59,935	59,473	(462)	-1%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$331,640,653	\$364,969,226	\$33,328,573	10%
2	INPATIENT PAYMENTS	\$81,272,557	\$83,972,566	\$2,700,009	3%
3	GOVT. INPATIENT PAYMENTS / CHARGES	24.51%	23.01%	-1.50%	-6%
4	DISCHARGES	9,449	9,737	288	3%
5	CASE MIX INDEX	1.25425	1.28824	0.03399	3%
6	CASE MIX ADJUSTED DISCHARGES	11,851.42400	12,543.63680	692.21280	6%
7	OUTPATIENT CHARGES	\$285,809,633	\$318,952,999	\$33,143,366	12%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	86.18%	87.39%	1.21%	1%
9	OUTPATIENT PAYMENTS	\$66,170,985	\$67,354,158	\$1,183,173	2%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.15%	21.12%	-2.03%	-9%
11	TOTAL CHARGES	\$617,450,286	\$683,922,225	\$66,471,939	11%
12	TOTAL PAYMENTS	\$147,443,542	\$151,326,724	\$3,883,182	3%
13	TOTAL PAYMENTS / CHARGES	23.88%	22.13%	-1.75%	-7%
14	PATIENT DAYS	44,074	44,109	35	0%
15	TOTAL GOVERNMENT DEDUCTIONS	\$470,006,744	\$532,595,501	\$62,588,757	13%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.8	4.6	(0.1)	-3%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.5	(0.1)	-3%
3	UNINSURED	4.3	4.2	(0.1)	-3%
4	MEDICAID	4.3	4.3	(0.0)	-1%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	3.4	2.6	(0.8)	-23%
7	TOTAL AVERAGE LENGTH OF STAY	4.3	4.2	(0.1)	-3%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,033,672,371	\$1,119,150,279	\$85,477,908	8%
2	TOTAL GOVERNMENT DEDUCTIONS	\$470,006,744	\$532,595,501	\$62,588,757	13%
3	UNCOMPENSATED CARE	\$20,426,836	\$19,708,794	(\$718,042)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$192,878,887	\$209,014,806	\$16,135,919	8%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,640,238	\$16,845,972	\$205,734	1%
6	TOTAL ADJUSTMENTS	\$699,952,705	\$778,165,073	\$78,212,368	11%
7	TOTAL ACCRUED PAYMENTS	\$333,719,666	\$340,985,206	\$7,265,540	2%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$333,719,666	\$340,985,206	\$7,265,540	2%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3228485885	0.3046822329	(0.0181663556)	-6%
11	COST OF UNCOMPENSATED CARE	\$6,594,775	\$6,004,919	(\$589,856)	-9%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$11,990,113	\$17,535,026	\$5,544,913	46%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$18,584,888	\$23,539,945	\$4,955,057	27%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$5,112,635	\$7,098,586	\$1,985,951	39%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$2,890,352)	(\$3,064,216)	(\$173,864)	6%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$2,222,283	\$4,034,370	\$1,812,087	82%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,580,041	\$23,313,424	(\$266,617)	-1.13%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$5,563,767	\$8,457,989	\$2,894,222	52.02%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$336,113,214	\$347,835,624	\$11,722,410	3.49%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$1,033,672,371	\$1,119,150,279	\$85,477,908	8.27%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$20,426,836	\$19,708,794	(\$718,042)	-3.52%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$142,019,598	\$141,858,357	(\$161,241)
2	MEDICARE	\$274,740,403	300,009,429	\$25,269,026
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$55,732,451	63,620,043	\$7,887,592
4	MEDICAID	\$55,732,451	63,620,043	\$7,887,592
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$1,167,799	1,339,754	\$171,955
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,310,560	6,206,111	(\$104,449)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$331,640,653	\$364,969,226	\$33,328,573
	TOTAL INPATIENT CHARGES	\$473,660,251	\$506,827,583	\$33,167,332
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$274,202,487	\$293,369,697	\$19,167,210
2	MEDICARE	\$202,223,329	220,377,833	\$18,154,504
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$81,366,364	95,948,897	\$14,582,533
4	MEDICAID	\$81,366,364	95,948,897	\$14,582,533
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$2,219,940	2,626,269	\$406,329
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$13,906,189	13,838,417	(\$67,772)
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$285,809,633	\$318,952,999	\$33,143,366
	TOTAL OUTPATIENT CHARGES	\$560,012,120	\$612,322,696	\$52,310,576
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$416,222,085	\$435,228,054	\$19,005,969
2	TOTAL MEDICARE	\$476,963,732	\$520,387,262	\$43,423,530
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$137,098,815	\$159,568,940	\$22,470,125
4	TOTAL MEDICAID	\$137,098,815	\$159,568,940	\$22,470,125
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$3,387,739	\$3,966,023	\$578,284
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$20,216,749	\$20,044,528	(\$172,221)
	TOTAL GOVERNMENT CHARGES	\$617,450,286	\$683,922,225	\$66,471,939
	TOTAL CHARGES	\$1,033,672,371	\$1,119,150,279	\$85,477,908
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$66,126,608	\$63,941,094	(\$2,185,514)
2	MEDICARE	\$68,628,846	72,545,632	\$3,916,786
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$12,421,651	11,088,384	(\$1,333,267)
4	MEDICAID	\$12,421,651	11,088,384	(\$1,333,267)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$222,060	338,550	\$116,490
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,381,062	4,126,794	(\$254,268)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$81,272,557	\$83,972,566	\$2,700,009
	TOTAL INPATIENT PAYMENTS	\$147,399,165	\$147,913,660	\$514,495
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$116,979,335	\$124,109,814	\$7,130,479
2	MEDICARE	\$45,755,735	46,519,479	\$763,744
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,850,395	19,994,411	\$144,016
4	MEDICAID	\$19,850,395	19,994,411	\$144,016
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$564,855	840,268	\$275,413
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,756,191	3,652,693	(\$103,498)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$66,170,985	\$67,354,158	\$1,183,173
	TOTAL OUTPATIENT PAYMENTS	\$183,150,320	\$191,463,972	\$8,313,652
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$183,105,943	\$188,050,908	\$4,944,965
2	TOTAL MEDICARE	\$114,384,581	\$119,065,111	\$4,680,530
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$32,272,046	\$31,082,795	(\$1,189,251)
4	TOTAL MEDICAID	\$32,272,046	\$31,082,795	(\$1,189,251)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$786,915	\$1,178,818	\$391,903
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,137,253	\$7,779,487	(\$357,766)
	TOTAL GOVERNMENT PAYMENTS	\$147,443,542	\$151,326,724	\$3,883,182
	TOTAL PAYMENTS	\$330,549,485	\$339,377,632	\$8,828,147

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	13.74%	12.68%	-1.06%
2	MEDICARE	26.58%	26.81%	0.23%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.39%	5.68%	0.29%
4	MEDICAID	5.39%	5.68%	0.29%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.11%	0.12%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.61%	0.55%	-0.06%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.08%	32.61%	0.53%
	TOTAL INPATIENT PAYER MIX	45.82%	45.29%	-0.54%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.53%	26.21%	-0.31%
2	MEDICARE	19.56%	19.69%	0.13%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.87%	8.57%	0.70%
4	MEDICAID	7.87%	8.57%	0.70%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.21%	0.23%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.35%	1.24%	-0.11%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	27.65%	28.50%	0.85%
	TOTAL OUTPATIENT PAYER MIX	54.18%	54.71%	0.54%
	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)	20.01%	18.84%	-1.16%
2	MEDICARE	20.76%	21.38%	0.61%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.76%	3.27%	-0.49%
4	MEDICAID	3.76%	3.27%	-0.49%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.07%	0.10%	0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.33%	1.22%	-0.11%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	24.59%	24.74%	0.16%
	TOTAL INPATIENT PAYER MIX	44.59%	43.58%	-1.01%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.39%	36.57%	1.18%
2	MEDICARE	13.84%	13.71%	-0.14%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.01%	5.89%	-0.11%
4	MEDICAID	6.01%	5.89%	-0.11%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.17%	0.25%	0.08%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.14%	1.08%	-0.06%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	20.02%	19.85%	-0.17%
	TOTAL OUTPATIENT PAYER MIX	55.41%	56.42%	1.01%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,406	4,421	15
2	MEDICARE	7,373	7,537	164
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,028	2,138	110
4	MEDICAID	2,028	2,138	110
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	48	62	14
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	201	182	(19)
	TOTAL GOVERNMENT DISCHARGES	9,449	9,737	288
	TOTAL DISCHARGES	13,855	14,158	303
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,861	15,364	(497)
2	MEDICARE	35,194	34,849	(345)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8,717	9,097	380
4	MEDICAID	8,717	9,097	380
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	163	163	-
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	867	759	(108)
	TOTAL GOVERNMENT PATIENT DAYS	44,074	44,109	35
	TOTAL PATIENT DAYS	59,935	59,473	(462)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.6	3.5	(0.1)
2	MEDICARE	4.8	4.6	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.3	4.3	(0.0)
4	MEDICAID	4.3	4.3	(0.0)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	3.4	2.6	(0.8)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.3	4.2	(0.1)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.7	4.5	(0.1)
	TOTAL AVERAGE LENGTH OF STAY	4.3	4.2	(0.1)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.12600	1.11010	(0.01590)
2	MEDICARE	1.33600	1.38656	0.05056
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.96600	0.95591	(0.01009)
4	MEDICAID	0.96600	0.95591	(0.01009)
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.87600	0.79675	(0.07925)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.08000	1.03321	(0.04679)
	TOTAL GOVERNMENT CASE MIX INDEX	1.25425	1.28824	0.03399
	TOTAL CASE MIX INDEX	1.21347	1.23262	0.01915
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$377,720,253	\$396,628,859	\$18,908,606
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$184,841,366	\$187,614,053	\$2,772,687
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$192,878,887	\$209,014,806	\$16,135,919
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	51.06%	52.70%	1.63%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,580,041	\$23,313,424	(\$266,617)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,640,238	\$16,845,972	\$205,734
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$6,856,094	\$7,509,399	\$653,305
9	BAD DEBTS	\$13,570,742	\$12,199,395	(\$1,371,347)
10	TOTAL UNCOMPENSATED CARE	\$20,426,836	\$19,708,794	(\$718,042)
11	TOTAL OTHER OPERATING REVENUE	\$377,720,253	\$396,628,859	\$18,908,606
12	TOTAL OPERATING EXPENSES	\$328,515,648	\$334,537,291	\$6,021,643

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,961.15600	4,907.75210	(53.40390)
2	MEDICARE	9,850.32800	10,450.50272	600.17472
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,959.04800	2,043.73558	84.68758
4	MEDICAID	1,959.04800	2,043.73558	84.68758
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	42.04800	49.39850	7.35050
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	217.08000	188.04422	(29.03578)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	11,851.42400	12,543.63680	692.21280
	TOTAL CASE MIX ADJUSTED DISCHARGES	16,812.58000	17,451.38890	638.80890
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,506.82705	9,142.83415	636.00710
2	MEDICARE	5,426.91424	5,536.45175	109.53751
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,960.77031	3,224.43576	263.66545
4	MEDICAID	2,960.77031	3,224.43576	263.66545
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	91.24611	121.53625	30.29014
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	442.93121	405.82450	-37.10671
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	8,478.93066	8,882.42376	403.49310
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	16,985.75771	18,025.25791	1,039.50020
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,328.87	\$13,028.59	(\$300.28)
2	MEDICARE	\$6,967.16	\$6,941.83	(\$25.33)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,340.66	\$5,425.55	(\$915.11)
4	MEDICAID	\$6,340.66	\$5,425.55	(\$915.11)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,281.11	\$6,853.45	\$1,572.34
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$20,181.79	\$21,945.87	\$1,764.08
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,857.62	\$6,694.44	(\$163.18)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,767.19	\$8,475.75	(\$291.44)
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,751.23	\$13,574.55	(\$176.68)
2	MEDICARE	\$8,431.26	\$8,402.40	(\$28.86)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,704.47	\$6,200.90	(\$503.57)
4	MEDICAID	\$6,704.47	\$6,200.90	(\$503.57)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$6,190.46	\$6,913.72	\$723.27
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,480.30	\$9,000.67	\$520.37
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,804.17	\$7,582.86	(\$221.31)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$10,782.58	\$10,621.98	(\$160.60)

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE DESCRIPTION		ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$5,112,635	\$7,098,586	\$1,985,951
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$2,890,352)	(\$3,064,216)	(\$173,864)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$2,222,283	\$4,034,370	\$1,812,087
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,033,672,371	\$1,119,150,279	\$85,477,908
2	TOTAL GOVERNMENT DEDUCTIONS	\$470,006,744	\$532,595,501	\$62,588,757
3	UNCOMPENSATED CARE	\$20,426,836	\$19,708,794	(\$718,042)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$192,878,887	\$209,014,806	\$16,135,919
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,640,238	\$16,845,972	\$205,734
6	TOTAL ADJUSTMENTS	\$699,952,705	\$778,165,073	\$78,212,368
7	TOTAL ACCRUED PAYMENTS	\$333,719,666	\$340,985,206	\$7,265,540
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$333,719,666	\$340,985,206	\$7,265,540
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3228485885	0.3046822329	(0.0181663556)
11	COST OF UNCOMPENSATED CARE	\$6,594,775	\$6,004,919	(\$589,856)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$11,990,113	\$17,535,026	\$5,544,913
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$18,584,888	\$23,539,945	\$4,955,057
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	46.56%	45.07%	-1.49%
2	MEDICARE	24.98%	24.18%	-0.80%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	22.29%	17.43%	-4.86%
4	MEDICAID	22.29%	17.43%	-4.86%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	19.02%	25.27%	6.25%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	69.42%	66.50%	-2.93%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	24.51%	23.01%	-1.50%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	31.12%	29.18%	-1.93%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	42.66%	42.30%	-0.36%
2	MEDICARE	22.63%	21.11%	-1.52%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24.40%	20.84%	-3.56%
4	MEDICAID	24.40%	20.84%	-3.56%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	25.44%	31.99%	6.55%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	27.01%	26.40%	-0.62%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	23.15%	21.12%	-2.03%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	32.70%	31.27%	-1.44%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	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	\$330,549,485	\$339,377,632	\$8,828,147
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$330,549,485	\$339,377,632	\$8,828,147
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$5,563,767	\$8,457,989	\$2,894,222
4	CALCULATED NET REVENUE	\$336,113,252	\$347,835,621	\$11,722,369
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$336,113,214	\$347,835,624	\$11,722,410
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$38	(\$3)	(\$41)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,033,672,371	\$1,119,150,279	\$85,477,908
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,033,672,371	\$1,119,150,279	\$85,477,908
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,033,672,371	\$1,119,150,279	\$85,477,908
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)	\$20,426,836	\$19,708,794	(\$718,042)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$20,426,836	\$19,708,794	(\$718,042)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$20,426,836	\$19,708,794	(\$718,042)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$141,858,357
2	MEDICARE	300,009,429
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	63,620,043
4	MEDICAID	63,620,043
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,339,754
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	6,206,111
	TOTAL INPATIENT GOVERNMENT CHARGES	\$364,969,226
	TOTAL INPATIENT CHARGES	\$506,827,583
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$293,369,697
2	MEDICARE	220,377,833
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	95,948,897
4	MEDICAID	95,948,897
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	2,626,269
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	13,838,417
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$318,952,999
	TOTAL OUTPATIENT CHARGES	\$612,322,696
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$435,228,054
2	TOTAL GOVERNMENT ACCRUED CHARGES	683,922,225
	TOTAL ACCRUED CHARGES	\$1,119,150,279
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$63,941,094
2	MEDICARE	72,545,632
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11,088,384
4	MEDICAID	11,088,384
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	338,550
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4,126,794
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$83,972,566
	TOTAL INPATIENT PAYMENTS	\$147,913,660
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$124,109,814
2	MEDICARE	46,519,479
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,994,411
4	MEDICAID	19,994,411
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	840,268
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,652,693
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$67,354,158
	TOTAL OUTPATIENT PAYMENTS	\$191,463,972
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$188,050,908
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	151,326,724
	TOTAL ACCRUED PAYMENTS	\$339,377,632

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,421
2	MEDICARE	7,537
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,138
4	MEDICAID	2,138
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	62
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	182
	TOTAL GOVERNMENT DISCHARGES	9,737
	TOTAL DISCHARGES	14,158
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.11010
2	MEDICARE	1.38656
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.95591
4	MEDICAID	0.95591
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.79675
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.03321
	TOTAL GOVERNMENT CASE MIX INDEX	1.28824
	TOTAL CASE MIX INDEX	1.23262
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$396,628,859
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$187,614,053
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$209,014,806
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.70%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,313,424
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,845,972
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$7,509,399
9	BAD DEBTS	\$12,199,395
10	TOTAL UNCOMPENSATED CARE	\$19,708,794
11	TOTAL OTHER OPERATING REVENUE	\$11,871,399
12	TOTAL OPERATING EXPENSES	\$334,537,291

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
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	\$339,377,632
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$339,377,632
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$8,457,989
	CALCULATED NET REVENUE	\$347,835,621
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$347,835,624
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$3)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$1,119,150,279
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,119,150,279
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,119,150,279
	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)	\$19,708,794
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$19,708,794
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$19,708,794
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	3,302	3,679	377	11%
2	Number of Approved Applicants	1,679	2,603	924	55%
3	Total Charges (A)	\$6,856,094	\$7,509,399	\$653,305	10%
4	Average Charges	\$4,083	\$2,885	(\$1,199)	-29%
5	Ratio of Cost to Charges (RCC)	0.330310	0.314907	(0.015403)	-5%
6	Total Cost	\$2,264,636	\$2,364,762	\$100,126	4%
7	Average Cost	\$1,349	\$908	(\$440)	-33%
8	Charity Care - Inpatient Charges	\$1,923,667	\$1,121,518	(\$802,149)	-42%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,328,923	2,669,833	340,910	15%
10	Charity Care - Emergency Department Charges	2,603,504	3,718,048	1,114,544	43%
11	Total Charges (A)	\$6,856,094	\$7,509,399	\$653,305	10%
12	Charity Care - Number of Patient Days	268	137	(131)	-49%
13	Charity Care - Number of Discharges	60	33	(27)	-45%
14	Charity Care - Number of Outpatient ED Visits	1,010	1,061	51	5%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,068	1,360	292	27%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$2,543,065	\$3,072,553	\$529,488	21%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	3,384,396	2,534,540	(849,856)	-25%
3	Bad Debts - Emergency Department	7,643,281	6,592,302	(1,050,979)	-14%
4	Total Bad Debts (A)	\$13,570,742	\$12,199,395	(\$1,371,347)	-10%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$6,856,094	\$7,509,399	\$653,305	10%
2	Bad Debts (A)	13,570,742	12,199,395	(1,371,347)	-10%
3	Total Uncompensated Care (A)	\$20,426,836	\$19,708,794	(\$718,042)	-4%
4	Uncompensated Care - Inpatient Services	\$4,466,732	\$4,194,071	(\$272,661)	-6%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	5,713,319	5,204,373	(508,946)	-9%
6	Uncompensated Care - Emergency Department	10,246,785	10,310,350	63,565	1%
7	Total Uncompensated Care (A)	\$20,426,836	\$19,708,794	(\$718,042)	-4%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$412,297,385	\$473,660,251	\$506,827,583
2	Outpatient Gross Revenue	\$525,845,728	\$560,012,120	\$612,322,696
3	Total Gross Patient Revenue	\$938,143,113	\$1,033,672,371	\$1,119,150,279
4	Net Patient Revenue	\$325,072,710	\$336,113,486	\$347,835,624
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$312,521,510	\$328,515,648	\$334,537,291
C. <u>Utilization Statistics</u>				
1	Patient Days	57,829	59,935	59,473
2	Discharges	13,918	13,855	14,158
3	Average Length of Stay	4.2	4.3	4.2
4	Equivalent (Adjusted) Patient Days (EPD)	131,584	130,797	131,325
0	Equivalent (Adjusted) Discharges (ED)	31,669	30,236	31,263
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.18388	1.21347	1.23262
2	Case Mix Adjusted Patient Days (CMAPD)	68,463	72,729	73,307
3	Case Mix Adjusted Discharges (CMAD)	16,477	16,813	17,451
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	155,780	158,717	161,874
5	Case Mix Adjusted Equivalent Discharges (CMAED)	37,492	36,690	38,535
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$16,223	\$17,247	\$18,818
2	Total Gross Revenue per Discharge	\$67,405	\$74,606	\$79,047
3	Total Gross Revenue per EPD	\$7,130	\$7,903	\$8,522
4	Total Gross Revenue per ED	\$29,623	\$34,187	\$35,798
5	Total Gross Revenue per CMAEPD	\$6,022	\$6,513	\$6,914
6	Total Gross Revenue per CMAED	\$25,022	\$28,173	\$29,042
7	Inpatient Gross Revenue per EPD	\$3,133	\$3,621	\$3,859
8	Inpatient Gross Revenue per ED	\$13,019	\$15,666	\$16,212

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$5,621	\$5,608	\$5,849
2	Net Patient Revenue per Discharge	\$23,356	\$24,259	\$24,568
3	Net Patient Revenue per EPD	\$2,470	\$2,570	\$2,649
4	Net Patient Revenue per ED	\$10,265	\$11,116	\$11,126
5	Net Patient Revenue per CMAEPD	\$2,087	\$2,118	\$2,149
6	Net Patient Revenue per CMAED	\$8,670	\$9,161	\$9,026
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$5,404	\$5,481	\$5,625
2	Total Operating Expense per Discharge	\$22,454	\$23,711	\$23,629
3	Total Operating Expense per EPD	\$2,375	\$2,512	\$2,547
4	Total Operating Expense per ED	\$9,868	\$10,865	\$10,701
5	Total Operating Expense per CMAEPD	\$2,006	\$2,070	\$2,067
6	Total Operating Expense per CMAED	\$8,336	\$8,954	\$8,681
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$45,300,265	\$46,575,871	\$47,712,048
2	Nursing Fringe Benefits Expense	\$11,000,436	\$12,732,163	\$11,105,634
3	Total Nursing Salary and Fringe Benefits Expense	\$56,300,701	\$59,308,034	\$58,817,682
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$22,986,362	\$25,136,796	\$26,601,785
2	Physician Fringe Benefits Expense	\$5,581,866	\$6,871,493	\$6,191,930
3	Total Physician Salary and Fringe Benefits Expense	\$28,568,228	\$32,008,289	\$32,793,715
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$81,688,566	\$83,855,969	\$87,361,080
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$19,836,744	\$22,923,197	\$20,334,489
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$101,525,310	\$106,779,166	\$107,695,569
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$149,975,193	\$155,568,636	\$161,674,913
2	Total Fringe Benefits Expense	\$36,419,046	\$42,526,853	\$37,632,053
3	Total Salary and Fringe Benefits Expense	\$186,394,239	\$198,095,489	\$199,306,966

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
L. Total Full Time Equivalent Employees (FTEs)				
1	Total Nursing FTEs	505.0	497.2	522.0
2	Total Physician FTEs	124.0	130.3	134.0
3	Total Non-Nursing, Non-Physician FTEs	1392.0	1429.1	1424.0
4	Total Full Time Equivalent Employees (FTEs)	2,021.0	2,056.6	2,080.0
M. Nursing Salaries and Fringe Benefits Expense per FTE				
1	Nursing Salary Expense per FTE	\$89,703	\$93,676	\$91,402
2	Nursing Fringe Benefits Expense per FTE	\$21,783	\$25,608	\$21,275
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$111,487	\$119,284	\$112,678
N. Physician Salary and Fringe Expense per FTE				
1	Physician Salary Expense per FTE	\$185,374	\$192,915	\$198,521
2	Physician Fringe Benefits Expense per FTE	\$45,015	\$52,736	\$46,208
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$230,389	\$245,651	\$244,729
O. Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE				
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$58,684	\$58,677	\$61,349
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$14,251	\$16,040	\$14,280
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$72,935	\$74,718	\$75,629
P. Total Salary and Fringe Benefits Expense per FTE				
1	Total Salary Expense per FTE	\$74,208	\$75,644	\$77,728
2	Total Fringe Benefits Expense per FTE	\$18,020	\$20,678	\$18,092
3	Total Salary and Fringe Benefits Expense per FTE	\$92,229	\$96,322	\$95,821
Q. Total Salary and Fringe Ben. Expense per Statistic				
1	Total Salary and Fringe Benefits Expense per Patient Day	\$3,223	\$3,305	\$3,351
2	Total Salary and Fringe Benefits Expense per Discharge	\$13,392	\$14,298	\$14,077
3	Total Salary and Fringe Benefits Expense per EPD	\$1,417	\$1,515	\$1,518
4	Total Salary and Fringe Benefits Expense per ED	\$5,886	\$6,552	\$6,375
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,197	\$1,248	\$1,231
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,972	\$5,399	\$5,172