

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$54,769,000	\$39,387,000	(\$15,382,000)	-28%
2	Short Term Investments	\$10,187,000	\$20,741,000	\$10,554,000	104%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$45,169,000	\$44,032,000	(\$1,137,000)	-3%
4	Current Assets Whose Use is Limited for Current Liabilities	\$4,527,000	\$4,091,000	(\$436,000)	-10%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$2,914,000	\$2,914,000	0%
7	Inventories of Supplies	\$1,347,000	\$1,251,000	(\$96,000)	-7%
8	Prepaid Expenses	\$2,156,000	\$2,331,000	\$175,000	8%
9	Other Current Assets	\$3,733,000	\$3,686,000	(\$47,000)	-1%
	Total Current Assets	\$121,888,000	\$118,433,000	(\$3,455,000)	-3%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$8,207,000	\$9,212,000	\$1,005,000	12%
2	Board Designated for Capital Acquisition	\$95,568,000	\$109,616,000	\$14,048,000	15%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$15,167,000	\$15,131,000	(\$36,000)	0%
	Total Noncurrent Assets Whose Use is Limited:	\$118,942,000	\$133,959,000	\$15,017,000	13%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$16,627,000	\$15,090,000	(\$1,537,000)	-9%
7	Other Noncurrent Assets	\$6,261,000	\$6,516,000	\$255,000	4%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$373,198,000	\$397,991,000	\$24,793,000	7%
2	Less: Accumulated Depreciation	\$208,046,000	\$230,191,000	\$22,145,000	11%
	Property, Plant and Equipment, Net	\$165,152,000	\$167,800,000	\$2,648,000	2%
3	Construction in Progress	\$14,694,000	\$18,513,000	\$3,819,000	26%
	Total Net Fixed Assets	\$179,846,000	\$186,313,000	\$6,467,000	4%
	Total Assets	\$443,564,000	\$460,311,000	\$16,747,000	4%
II.	LIABILITIES AND NET ASSETS				
A.	Current Liabilities:				
1	Accounts Payable and Accrued Expenses	\$19,149,000	\$16,703,000	(\$2,446,000)	-13%
2	Salaries, Wages and Payroll Taxes	\$32,727,000	\$31,544,000	(\$1,183,000)	-4%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,119,150,279	\$1,216,521,478	\$97,371,199	9%
2	Less: Allowances	\$763,805,256	\$849,725,650	\$85,920,394	11%
3	Less: Charity Care	\$7,509,399	\$8,529,846	\$1,020,447	14%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$347,835,624	\$358,265,982	\$10,430,358	3%
5	Provision for Bad Debts	\$0	\$11,094,963	\$11,094,963	0%
	Net Patient Service Revenue less provision for bad debts	\$347,835,624	\$347,171,019	(\$664,605)	0%
6	Other Operating Revenue	\$11,871,399	\$12,173,148	\$301,749	3%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$359,707,023	\$359,344,167	(\$362,856)	0%
B. Operating Expenses:					
1	Salaries and Wages	\$161,674,913	\$164,393,305	\$2,718,392	2%
2	Fringe Benefits	\$37,632,053	\$37,112,270	(\$519,783)	-1%
3	Physicians Fees	\$3,404,502	\$3,449,731	\$45,229	1%
4	Supplies and Drugs	\$34,609,056	\$36,955,430	\$2,346,374	7%
5	Depreciation and Amortization	\$21,448,732	\$22,127,207	\$678,475	3%
6	Bad Debts	\$12,199,395	\$0	(\$12,199,395)	-100%
7	Interest Expense	\$3,106,032	\$3,016,511	(\$89,521)	-3%
8	Malpractice Insurance Cost	\$1,871,742	\$4,466,100	\$2,594,358	139%
9	Other Operating Expenses	\$58,590,866	\$70,758,484	\$12,167,618	21%
	Total Operating Expenses	\$334,537,291	\$342,279,038	\$7,741,747	2%
	Income/(Loss) From Operations	\$25,169,732	\$17,065,129	(\$8,104,603)	-32%
C. Non-Operating Revenue:					
1	Income from Investments	\$2,152,953	\$5,700,710	\$3,547,757	165%
2	Gifts, Contributions and Donations	\$466,901	\$293,141	(\$173,760)	-37%
3	Other Non-Operating Gains/(Losses)	\$1,284,104	\$1,069,187	(\$214,917)	-17%
	Total Non-Operating Revenue	\$3,903,958	\$7,063,038	\$3,159,080	81%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$29,073,690	\$24,128,167	(\$4,945,523)	-17%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012</u>	<u>FY 2013</u>	<u>AMOUNT</u>	<u>%</u>
		<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$29,073,690	\$24,128,167	(\$4,945,523)	-17%
	Principal Payments	\$4,580,000	\$4,618,000	\$38,000	1%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$255,096,369	\$280,884,938	\$25,788,569	10%
2	MEDICARE MANAGED CARE	\$44,913,060	\$65,021,901	\$20,108,841	45%
3	MEDICAID	\$60,547,499	\$71,291,853	\$10,744,354	18%
4	MEDICAID MANAGED CARE	\$3,072,544	\$0	(\$3,072,544)	-100%
5	CHAMPUS/TRICARE	\$1,339,754	\$1,669,163	\$329,409	25%
6	COMMERCIAL INSURANCE	\$11,498,293	\$11,015,330	(\$482,963)	-4%
7	NON-GOVERNMENT MANAGED CARE	\$119,386,213	\$134,817,686	\$15,431,473	13%
8	WORKER'S COMPENSATION	\$4,767,740	\$4,281,946	(\$485,794)	-10%
9	SELF- PAY/UNINSURED	\$6,206,111	\$5,822,241	(\$383,870)	-6%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$506,827,583	\$574,805,058	\$67,977,475	13%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$180,423,650	\$187,944,456	\$7,520,806	4%
2	MEDICARE MANAGED CARE	\$39,954,183	\$51,578,756	\$11,624,573	29%
3	MEDICAID	\$82,621,534	\$104,354,788	\$21,733,254	26%
4	MEDICAID MANAGED CARE	\$13,327,363	\$0	(\$13,327,363)	-100%
5	CHAMPUS/TRICARE	\$2,626,269	\$2,759,727	\$133,458	5%
6	COMMERCIAL INSURANCE	\$28,398,227	\$26,613,437	(\$1,784,790)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$240,944,501	\$245,404,510	\$4,460,009	2%
8	WORKER'S COMPENSATION	\$10,188,552	\$8,197,096	(\$1,991,456)	-20%
9	SELF- PAY/UNINSURED	\$13,838,417	\$14,863,650	\$1,025,233	7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$612,322,696	\$641,716,420	\$29,393,724	5%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$435,520,019	\$468,829,394	\$33,309,375	8%
2	MEDICARE MANAGED CARE	\$84,867,243	\$116,600,657	\$31,733,414	37%
3	MEDICAID	\$143,169,033	\$175,646,641	\$32,477,608	23%
4	MEDICAID MANAGED CARE	\$16,399,907	\$0	(\$16,399,907)	-100%
5	CHAMPUS/TRICARE	\$3,966,023	\$4,428,890	\$462,867	12%
6	COMMERCIAL INSURANCE	\$39,896,520	\$37,628,767	(\$2,267,753)	-6%
7	NON-GOVERNMENT MANAGED CARE	\$360,330,714	\$380,222,196	\$19,891,482	6%
8	WORKER'S COMPENSATION	\$14,956,292	\$12,479,042	(\$2,477,250)	-17%
9	SELF- PAY/UNINSURED	\$20,044,528	\$20,685,891	\$641,363	3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,119,150,279	\$1,216,521,478	\$97,371,199	9%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$61,521,678	\$58,003,502	(\$3,518,176)	-6%
2	MEDICARE MANAGED CARE	\$11,023,954	\$14,148,398	\$3,124,444	28%
3	MEDICAID	\$10,474,311	\$10,706,376	\$232,065	2%
4	MEDICAID MANAGED CARE	\$614,073	\$0	(\$614,073)	-100%
5	CHAMPUS/TRICARE	\$338,550	\$377,732	\$39,182	12%
6	COMMERCIAL INSURANCE	\$4,506,227	\$4,066,243	(\$439,984)	-10%

MIDDLESEX HOSPITAL					
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FISCAL YEAR 2013					
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$51,604,977	\$58,186,843	\$6,581,866	13%
8	WORKER'S COMPENSATION	\$3,703,096	\$3,577,785	(\$125,311)	-3%
9	SELF- PAY/UNINSURED	\$4,126,794	\$3,735,559	(\$391,235)	-9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT NET REVENUE	\$147,913,660	\$152,802,438	\$4,888,778	3%
B.	<u>OUTPATIENT NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$38,217,841	\$45,431,759	\$7,213,918	19%
2	MEDICARE MANAGED CARE	\$8,301,638	\$9,021,925	\$720,287	9%
3	MEDICAID	\$15,597,962	\$18,933,996	\$3,336,034	21%
4	MEDICAID MANAGED CARE	\$4,396,449	\$0	(\$4,396,449)	-100%
5	CHAMPUS/TRICARE	\$840,268	\$373,436	(\$466,832)	-56%
6	COMMERCIAL INSURANCE	\$11,868,478	\$10,802,237	(\$1,066,241)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$100,917,442	\$104,142,742	\$3,225,300	3%
8	WORKER'S COMPENSATION	\$7,671,201	\$5,531,891	(\$2,139,310)	-28%
9	SELF- PAY/UNINSURED	\$3,652,693	\$4,549,613	\$896,920	25%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$191,463,972	\$198,787,599	\$7,323,627	4%
C.	<u>TOTAL NET REVENUE</u>				
1	MEDICARE TRADITIONAL	\$99,739,519	\$103,435,261	\$3,695,742	4%
2	MEDICARE MANAGED CARE	\$19,325,592	\$23,170,323	\$3,844,731	20%
3	MEDICAID	\$26,072,273	\$29,640,372	\$3,568,099	14%
4	MEDICAID MANAGED CARE	\$5,010,522	\$0	(\$5,010,522)	-100%
5	CHAMPUS/TRICARE	\$1,178,818	\$751,168	(\$427,650)	-36%
6	COMMERCIAL INSURANCE	\$16,374,705	\$14,868,480	(\$1,506,225)	-9%
7	NON-GOVERNMENT MANAGED CARE	\$152,522,419	\$162,329,585	\$9,807,166	6%
8	WORKER'S COMPENSATION	\$11,374,297	\$9,109,676	(\$2,264,621)	-20%
9	SELF- PAY/UNINSURED	\$7,779,487	\$8,285,172	\$505,685	7%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$339,377,632	\$351,590,037	\$12,212,405	4%
III.	<u>STATISTICS BY PAYER</u>				
A.	<u>DISCHARGES</u>				
1	MEDICARE TRADITIONAL	6,467	6,859	392	6%
2	MEDICARE MANAGED CARE	1,070	1,411	341	32%
3	MEDICAID	1,978	2,323	345	17%
4	MEDICAID MANAGED CARE	160	0	(160)	-100%
5	CHAMPUS/TRICARE	62	44	(18)	-29%
6	COMMERCIAL INSURANCE	359	302	(57)	-16%
7	NON-GOVERNMENT MANAGED CARE	3,812	3,992	180	5%
8	WORKER'S COMPENSATION	68	63	(5)	-7%
9	SELF- PAY/UNINSURED	182	168	(14)	-8%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	14,158	15,162	1,004	7%
B.	<u>PATIENT DAYS</u>				
1	MEDICARE TRADITIONAL	30,149	31,677	1,528	5%
2	MEDICARE MANAGED CARE	4,700	6,402	1,702	36%
3	MEDICAID	8,618	9,219	601	7%

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	479	0	(479)	-100%
5	CHAMPUS/TRICARE	163	129	(34)	-21%
6	COMMERCIAL INSURANCE	1,211	1,050	(161)	-13%
7	NON-GOVERNMENT MANAGED CARE	13,196	13,258	62	0%
8	WORKER'S COMPENSATION	198	181	(17)	-9%
9	SELF- PAY/UNINSURED	759	630	(129)	-17%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	59,473	62,546	3,073	5%
C.	OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	217,449	208,364	(9,085)	-4%
2	MEDICARE MANAGED CARE	41,049	50,571	9,522	23%
3	MEDICAID	85,825	104,366	18,541	22%
4	MEDICAID MANAGED CARE	14,485	0	(14,485)	-100%
5	CHAMPUS/TRICARE	2,501	2,408	(93)	-4%
6	COMMERCIAL INSURANCE	25,974	27,680	1,706	7%
7	NON-GOVERNMENT MANAGED CARE	223,614	218,991	(4,623)	-2%
8	WORKER'S COMPENSATION	17,542	14,170	(3,372)	-19%
9	SELF- PAY/UNINSURED	13,644	12,362	(1,282)	-9%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	642,083	638,912	(3,171)	0%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$62,273,745	\$56,912,928	(\$5,360,817)	-9%
2	MEDICARE MANAGED CARE	\$12,266,601	\$13,430,570	\$1,163,969	9%
3	MEDICAID	\$41,914,936	\$47,510,649	\$5,595,713	13%
4	MEDICAID MANAGED CARE	\$4,101,458	\$0	(\$4,101,458)	-100%
5	CHAMPUS/TRICARE	\$1,223,219	\$1,333,671	\$110,452	9%
6	COMMERCIAL INSURANCE	\$7,771,216	\$6,745,854	(\$1,025,362)	-13%
7	NON-GOVERNMENT MANAGED CARE	\$76,547,983	\$77,528,383	\$980,400	1%
8	WORKER'S COMPENSATION	\$2,915,638	\$2,860,677	(\$54,961)	-2%
9	SELF- PAY/UNINSURED	\$7,757,608	\$10,060,023	\$2,302,415	30%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$216,772,404	\$216,382,755	(\$389,649)	0%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$9,062,102	\$7,596,970	(\$1,465,132)	-16%
2	MEDICARE MANAGED CARE	\$2,111,222	\$2,093,493	(\$17,729)	-1%
3	MEDICAID	\$7,786,480	\$7,926,639	\$140,159	2%
4	MEDICAID MANAGED CARE	\$1,054,676	\$0	(\$1,054,676)	-100%
5	CHAMPUS/TRICARE	\$259,008	\$223,282	(\$35,726)	-14%
6	COMMERCIAL INSURANCE	\$2,458,044	\$1,734,052	(\$723,992)	-29%
7	NON-GOVERNMENT MANAGED CARE	\$35,619,667	\$33,892,900	(\$1,726,767)	-5%
8	WORKER'S COMPENSATION	\$2,282,120	\$1,757,000	(\$525,120)	-23%
9	SELF- PAY/UNINSURED	\$398,093	\$222,548	(\$175,545)	-44%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$61,031,412	\$55,446,884	(\$5,584,528)	-9%
C.	<u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u>				
1	MEDICARE TRADITIONAL	16,660	15,450	(1,210)	-7%
2	MEDICARE MANAGED CARE	3,129	3,591	462	15%
3	MEDICAID	18,006	20,476	2,470	14%
4	MEDICAID MANAGED CARE	2,645	0	(2,645)	-100%
5	CHAMPUS/TRICARE	732	642	(90)	-12%
6	COMMERCIAL INSURANCE	3,193	2,568	(625)	-20%
7	NON-GOVERNMENT MANAGED CARE	33,573	31,607	(1,966)	-6%
8	WORKER'S COMPENSATION	2,127	1,967	(160)	-8%
9	SELF- PAY/UNINSURED	5,017	4,892	(125)	-2%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	85,082	81,193	(3,889)	-5%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$47,712,048	\$48,997,371	\$1,285,323	3%
2	Physician Salaries	\$26,601,785	\$27,684,896	\$1,083,111	4%
3	Non-Nursing, Non-Physician Salaries	\$87,361,080	\$87,711,038	\$349,958	0%
	Total Salaries & Wages	\$161,674,913	\$164,393,305	\$2,718,392	2%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$11,105,634	\$11,061,300	(\$44,334)	0%
2	Physician Fringe Benefits	\$6,191,930	\$6,249,946	\$58,016	1%
3	Non-Nursing, Non-Physician Fringe Benefits	\$20,334,489	\$19,801,024	(\$533,465)	-3%
	Total Fringe Benefits	\$37,632,053	\$37,112,270	(\$519,783)	-1%
C. Contractual Labor Fees:					
1	Nursing Fees	\$625,759	\$558,510	(\$67,249)	-11%
2	Physician Fees	\$3,404,502	\$3,449,731	\$45,229	1%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	Total Contractual Labor Fees	\$4,030,261	\$4,008,241	(\$22,020)	-1%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$25,188,379	\$26,475,474	\$1,287,095	5%
2	Pharmaceutical Costs	\$9,420,677	\$10,479,956	\$1,059,279	11%
	Total Medical Supplies and Pharmaceutical Cost	\$34,609,056	\$36,955,430	\$2,346,374	7%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$10,302,808	\$10,446,240	\$143,432	1%
2	Depreciation-Equipment	\$11,168,788	\$11,698,818	\$530,030	5%
3	Amortization	(\$22,864)	(\$17,851)	\$5,013	-22%
	Total Depreciation and Amortization	\$21,448,732	\$22,127,207	\$678,475	3%
F. Bad Debts:					
1	Bad Debts	\$12,199,395	\$0	(\$12,199,395)	-100%
G. Interest Expense:					
1	Interest Expense	\$3,106,032	\$3,016,511	(\$89,521)	-3%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$1,871,742	\$4,466,100	\$2,594,358	139%
I. Utilities:					
1	Water	\$490,212	\$378,807	(\$111,405)	-23%
2	Natural Gas	\$120,697	\$147,013	\$26,316	22%
3	Oil	\$977,604	\$935,629	(\$41,975)	-4%
4	Electricity	\$3,340,721	\$2,752,920	(\$587,801)	-18%
5	Telephone	\$1,378,849	\$1,415,880	\$37,031	3%
6	Other Utilities	\$0	\$0	\$0	0%
	Total Utilities	\$6,308,083	\$5,630,249	(\$677,834)	-11%
J. Business Expenses:					
1	Accounting Fees	\$172,414	\$194,525	\$22,111	13%
2	Legal Fees	\$605,719	\$447,095	(\$158,624)	-26%
3	Consulting Fees	\$3,016,460	\$6,339,117	\$3,322,657	110%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Dues and Membership	\$596,009	\$689,899	\$93,890	16%
5	Equipment Leases	\$1,815,761	\$2,274,371	\$458,610	25%
6	Building Leases	\$3,623,954	\$3,702,608	\$78,654	2%
7	Repairs and Maintenance	\$2,002,922	\$2,345,532	\$342,610	17%
8	Insurance	\$206,063	\$542,992	\$336,929	164%
9	Travel	\$1,146,988	\$1,084,051	(\$62,937)	-5%
10	Conferences	\$89,383	\$103,070	\$13,687	15%
11	Property Tax	\$77,140	\$152,532	\$75,392	98%
12	General Supplies	\$1,869,428	\$1,886,005	\$16,577	1%
13	Licenses and Subscriptions	\$442,118	\$364,398	(\$77,720)	-18%
14	Postage and Shipping	\$270,230	\$304,049	\$33,819	13%
15	Advertising	\$503,403	\$385,474	(\$117,929)	-23%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$2,986,474	\$3,304,553	\$318,079	11%
18	Computer hardware & small equipment	\$439,907	\$384,089	(\$55,818)	-13%
19	Dietary / Food Services	\$1,547,613	\$2,127,138	\$579,525	37%
20	Lab Fees / Red Cross charges	\$2,049,815	\$2,706,483	\$656,668	32%
21	Billing & Collection / Bank Fees	\$394,363	\$429,731	\$35,368	9%
22	Recruiting / Employee Education & Recognition	\$1,049,979	\$991,354	(\$58,625)	-6%
23	Laundry / Linen	\$505,722	\$518,898	\$13,176	3%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$381,888	\$376,055	(\$5,833)	-2%
26	Purchased Services - Medical	\$1,465,757	\$2,839,373	\$1,373,616	94%
27	Purchased Services - Non Medical	\$18,293,521	\$19,478,329	\$1,184,808	6%
28	Other Business Expenses	\$6,103,993	\$10,598,004	\$4,494,011	74%
	Total Business Expenses	\$51,657,024	\$64,569,725	\$12,912,701	25%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$334,537,291	\$342,279,038	\$7,741,747	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	\$33,005,268	\$43,058,154	\$10,052,886	30%
2	General Accounting	\$1,158,142	\$1,220,835	\$62,693	5%
3	Patient Billing & Collection	\$17,220,390	\$5,011,446	(\$12,208,944)	-71%
4	Admitting / Registration Office	\$2,747,251	\$2,787,997	\$40,746	1%
5	Data Processing	\$14,071,330	\$14,928,867	\$857,537	6%
6	Communications	\$1,836,437	\$1,793,171	(\$43,266)	-2%
7	Personnel	\$39,888,625	\$39,357,398	(\$531,227)	-1%
8	Public Relations	\$2,209,250	\$3,130,077	\$920,827	42%
9	Purchasing	\$1,646,576	\$1,833,867	\$187,291	11%
10	Dietary and Cafeteria	\$3,980,607	\$4,005,921	\$25,314	1%
11	Housekeeping	\$2,922,360	\$2,976,719	\$54,359	2%
12	Laundry & Linen	\$840,682	\$861,012	\$20,330	2%
13	Operation of Plant	\$13,743,529	\$14,166,045	\$422,516	3%
14	Security	\$1,842,743	\$2,037,934	\$195,191	11%
15	Repairs and Maintenance	\$0	\$0	\$0	0%
16	Central Sterile Supply	\$3,371,740	\$3,453,645	\$81,905	2%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
17	Pharmacy Department	\$12,217,756	\$13,684,140	\$1,466,384	12%
18	Other General Services	\$853,923	\$825,329	(\$28,594)	-3%
	Total General Services	\$153,556,609	\$155,132,557	\$1,575,948	1%
	B. Professional Services:				
1	Medical Care Administration	\$5,961,434	\$4,605,155	(\$1,356,279)	-23%
2	Residency Program	\$4,236,730	\$4,267,389	\$30,659	1%
3	Nursing Services Administration	\$3,133,785	\$2,988,126	(\$145,659)	-5%
4	Medical Records	\$4,112,456	\$4,225,236	\$112,780	3%
5	Social Service	\$326,855	\$380,546	\$53,691	16%
6	Other Professional Services	\$640,058	\$534,572	(\$105,486)	-16%
	Total Professional Services	\$18,411,318	\$17,001,024	(\$1,410,294)	-8%
	C. Special Services:				
1	Operating Room	\$20,461,682	\$21,724,027	\$1,262,345	6%
2	Recovery Room	\$2,361,187	\$2,280,084	(\$81,103)	-3%
3	Anesthesiology	\$1,058,413	\$1,180,363	\$121,950	12%
4	Delivery Room	\$176	\$0	(\$176)	-100%
5	Diagnostic Radiology	\$9,263,621	\$9,380,821	\$117,200	1%
6	Diagnostic Ultrasound	\$1,650,360	\$1,716,704	\$66,344	4%
7	Radiation Therapy	\$3,056,235	\$3,053,837	(\$2,398)	0%
8	Radioisotopes	\$798,018	\$761,314	(\$36,704)	-5%
9	CT Scan	\$2,598,154	\$2,637,822	\$39,668	2%
10	Laboratory	\$13,630,115	\$14,335,537	\$705,422	5%
11	Blood Storing/Processing	\$1,928,767	\$1,726,382	(\$202,385)	-10%
12	Cardiology	\$711,408	\$744,557	\$33,149	5%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$560,175	\$263,956	(\$296,219)	-53%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$150,881	\$162,675	\$11,794	8%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,157,874	\$1,228,731	\$70,857	6%
19	Pulmonary Function	\$66,127	\$57,500	(\$8,627)	-13%
20	Intravenous Therapy	\$749,102	\$804,343	\$55,241	7%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$8,449,452	\$8,716,764	\$267,312	3%
23	Renal Dialysis	\$164,539	\$170,142	\$5,603	3%
24	Emergency Room	\$21,818,365	\$23,289,572	\$1,471,207	7%
25	MRI	\$1,923,125	\$2,311,168	\$388,043	20%
26	PET Scan	\$366,793	\$351,687	(\$15,106)	-4%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$698,317	\$755,610	\$57,293	8%
29	Sleep Center	\$700,946	\$687,797	(\$13,149)	-2%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$944,547	\$983,399	\$38,852	4%
32	Occupational Therapy / Physical Therapy	\$3,112,617	\$3,193,308	\$80,691	3%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$3,799,006	\$4,209,055	\$410,049	11%
	Total Special Services	\$102,180,002	\$106,727,155	\$4,547,153	4%
	D. Routine Services:				
1	Medical & Surgical Units	\$23,992,820	\$26,432,132	\$2,439,312	10%
2	Intensive Care Unit	\$7,180,584	\$6,985,358	(\$195,226)	-3%
3	Coronary Care Unit	\$0	\$0	\$0	0%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	Psychiatric Unit	\$2,564,474	\$2,605,732	\$41,258	2%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,502,208	\$4,375,043	(\$127,165)	-3%
7	Newborn Nursery Unit	\$1,037,117	\$1,084,001	\$46,884	5%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$1,218,834	\$1,468,528	\$249,694	20%
11	Home Care	\$11,126,124	\$11,196,860	\$70,736	1%
12	Outpatient Clinics	\$8,585,990	\$9,090,108	\$504,118	6%
13	Other Routine Services	\$181,211	\$180,540	(\$671)	0%
	Total Routine Services	\$60,389,362	\$63,418,302	\$3,028,940	5%
E.	Other Departments:				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses - All Departments*	\$334,537,291	\$342,279,038	\$7,741,747	2%
*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.					

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$336,113,486	\$347,835,624	\$347,171,019
2	Other Operating Revenue	9,543,630	11,871,399	12,173,148
3	Total Operating Revenue	\$345,657,116	\$359,707,023	\$359,344,167
4	Total Operating Expenses	328,515,648	334,537,291	342,279,038
5	Income/(Loss) From Operations	\$17,141,468	\$25,169,732	\$17,065,129
6	Total Non-Operating Revenue	4,377,722	3,903,958	7,063,038
7	Excess/(Deficiency) of Revenue Over Expenses	\$21,519,190	\$29,073,690	\$24,128,167
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	4.90%	6.92%	4.66%
2	Hospital Non Operating Margin	1.25%	1.07%	1.93%
3	Hospital Total Margin	6.15%	8.00%	6.59%
4	Income/(Loss) From Operations	\$17,141,468	\$25,169,732	\$17,065,129
5	Total Operating Revenue	\$345,657,116	\$359,707,023	\$359,344,167
6	Total Non-Operating Revenue	\$4,377,722	\$3,903,958	\$7,063,038
7	Total Revenue	\$350,034,838	\$363,610,981	\$366,407,205
8	Excess/(Deficiency) of Revenue Over Expenses	\$21,519,190	\$29,073,690	\$24,128,167
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$124,933,000	\$144,992,000	\$247,940,000
2	Hospital Total Net Assets	\$138,072,000	\$161,005,000	\$264,166,000
3	Hospital Change in Total Net Assets	(\$6,738,000)	\$22,933,000	\$103,161,000
4	Hospital Change in Total Net Assets %	95.3%	16.6%	64.1%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.31	0.30	0.28
2	Total Operating Expenses	\$328,515,648	\$334,537,291	\$342,279,038
3	Total Gross Revenue	\$1,033,672,371	\$1,119,150,279	\$1,216,521,478
4	Total Other Operating Revenue	\$9,543,630	\$11,871,399	\$12,173,148

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
5	<u>Private Payment to Cost Ratio</u>	1.40	1.47	1.55
6	Total Non-Government Payments	\$183,105,943	\$188,050,908	\$194,592,913
7	Total Uninsured Payments	\$8,137,253	\$7,779,487	\$8,285,172
8	Total Non-Government Charges	\$416,222,085	\$435,228,054	\$451,015,896
9	Total Uninsured Charges	\$20,216,749	\$20,044,528	\$20,685,891
10	<u>Medicare Payment to Cost Ratio</u>	0.76	0.77	0.78
11	Total Medicare Payments	\$114,384,581	\$119,065,111	\$126,605,584
12	Total Medicare Charges	\$476,963,732	\$520,387,262	\$585,430,051
13	<u>Medicaid Payment to Cost Ratio</u>	0.75	0.66	0.61
14	Total Medicaid Payments	\$32,272,046	\$31,082,795	\$29,640,372
15	Total Medicaid Charges	\$137,098,815	\$159,568,940	\$175,646,641
16	<u>Uncompensated Care Cost</u>	\$6,432,546	\$5,829,532	\$5,466,908
17	Charity Care	\$6,856,094	\$7,509,399	\$8,529,846
18	Bad Debts	\$13,570,742	\$12,199,395	\$11,094,963
19	Total Uncompensated Care	\$20,426,836	\$19,708,794	\$19,624,809
20	<u>Uncompensated Care % of Total Expenses</u>	2.0%	1.7%	1.6%
21	Total Operating Expenses	\$328,515,648	\$334,537,291	\$342,279,038
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	2	2	2
2	Total Current Assets	\$120,466,000	\$121,888,000	\$118,433,000
3	Total Current Liabilities	\$61,117,000	\$65,935,000	\$57,631,000
4	<u>Days Cash on Hand</u>	80	76	69
5	Cash and Cash Equivalents	\$56,459,000	\$54,769,000	\$39,387,000
6	Short Term Investments	10,647,000	10,187,000	20,741,000

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
7	Total Cash and Short Term Investments	\$67,106,000	\$64,956,000	\$60,128,000
8	Total Operating Expenses	\$328,515,648	\$334,537,291	\$342,279,038
9	Depreciation Expense	\$21,736,910	\$21,448,732	\$22,127,207
10	Operating Expenses less Depreciation Expense	\$306,778,738	\$313,088,559	\$320,151,831
11	<u>Days Revenue in Patient Accounts Receivable</u>	46	44	49
12	Net Patient Accounts Receivable	\$42,961,000	\$45,169,000	\$44,032,000
13	Due From Third Party Payers	\$0	\$0	\$2,914,000
14	Due To Third Party Payers	\$207,000	\$2,944,000	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$42,754,000	\$42,225,000	\$46,946,000
16	Total Net Patient Revenue	\$336,113,486	\$347,835,624	\$347,171,019
17	<u>Average Payment Period</u>	73	77	66
18	Total Current Liabilities	\$61,117,000	\$65,935,000	\$57,631,000
19	Total Operating Expenses	\$328,515,648	\$334,537,291	\$342,279,038
20	Depreciation Expense	\$21,736,910	\$21,448,732	\$22,127,207
21	Total Operating Expenses less Depreciation Expense	\$306,778,738	\$313,088,559	\$320,151,831
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	34.3	36.3	57.4
2	Total Net Assets	\$138,072,000	\$161,005,000	\$264,166,000
3	Total Assets	\$402,626,000	\$443,564,000	\$460,311,000
4	<u>Cash Flow to Total Debt Ratio</u>	33.9	39.1	39.3
5	Excess/(Deficiency) of Revenues Over Expenses	\$21,519,190	\$29,073,690	\$24,128,167
6	Depreciation Expense	\$21,736,910	\$21,448,732	\$22,127,207
7	Excess of Revenues Over Expenses and Depreciation Expense	\$43,256,100	\$50,522,422	\$46,255,374
8	Total Current Liabilities	\$61,117,000	\$65,935,000	\$57,631,000
9	Total Long Term Debt	\$66,531,000	\$63,332,000	\$60,071,000
10	Total Current Liabilities and Total Long Term Debt	\$127,648,000	\$129,267,000	\$117,702,000

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
11	<u>Long Term Debt to Capitalization Ratio</u>	32.5	28.2	18.5
12	Total Long Term Debt	\$66,531,000	\$63,332,000	\$60,071,000
13	Total Net Assets	\$138,072,000	\$161,005,000	\$264,166,000
14	Total Long Term Debt and Total Net Assets	\$204,603,000	\$224,337,000	\$324,237,000
15	<u>Debt Service Coverage Ratio</u>	7.0	7.0	6.5
16	Excess Revenues over Expenses	21,519,190	\$29,073,690	\$24,128,167
17	Interest Expense	3,242,228	\$3,106,032	\$3,016,511
18	Depreciation and Amortization Expense	21,736,910	\$21,448,732	\$22,127,207
19	Principal Payments	3,407,000	\$4,580,000	\$4,618,000
G.	<u>Other Financial Ratios</u>			
20	<u>Average Age of Plant</u>	11.9	9.7	10.4
21	Accumulated Depreciation	258,275,000	208,046,000	230,191,000
22	Depreciation and Amortization Expense	21,736,910	21,448,732	22,127,207
H.	<u>Utilization Measures Summary</u>			
1	Patient Days	59,935	59,473	62,546
2	Discharges	13,855	14,158	15,162
3	ALOS	4.3	4.2	4.1
4	Staffed Beds	183	183	189
5	Available Beds	-	260	260
6	Licensed Beds	248	297	297
7	Occupancy of Staffed Beds	89.7%	89.0%	90.7%
8	Occupancy of Available Beds	66.2%	62.7%	65.9%
9	Full Time Equivalent Employees	2,056.6	2,080.0	2,119.0
I.	<u>Hospital Gross Revenue Payer Mix Percentage</u>			
1	Non-Government Gross Revenue Payer Mix Percentage	38.3%	37.1%	35.4%
2	Medicare Gross Revenue Payer Mix Percentage	46.1%	46.5%	48.1%

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
3	Medicaid Gross Revenue Payer Mix Percentage	13.3%	14.3%	14.4%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	2.0%	1.8%	1.7%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.4%	0.4%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$396,005,336	\$415,183,526	\$430,330,005
9	Medicare Gross Revenue (Charges)	\$476,963,732	\$520,387,262	\$585,430,051
10	Medicaid Gross Revenue (Charges)	\$137,098,815	\$159,568,940	\$175,646,641
11	Other Medical Assistance Gross Revenue (Charges)	\$0	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$20,216,749	\$20,044,528	\$20,685,891
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$3,387,739	\$3,966,023	\$4,428,890
14	Total Gross Revenue (Charges)	\$1,033,672,371	\$1,119,150,279	\$1,216,521,478
J.	Hospital Net Revenue Payer Mix Percentage			
1	Non-Government Net Revenue Payer Mix Percentage	52.9%	53.1%	53.0%
2	Medicare Net Revenue Payer Mix Percentage	34.6%	35.1%	36.0%
3	Medicaid Net Revenue Payer Mix Percentage	9.8%	9.2%	8.4%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.0%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	2.5%	2.3%	2.4%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.3%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$174,968,690	\$180,271,421	\$186,307,741
9	Medicare Net Revenue (Payments)	\$114,384,581	\$119,065,111	\$126,605,584
10	Medicaid Net Revenue (Payments)	\$32,272,046	\$31,082,795	\$29,640,372
11	Other Medical Assistance Net Revenue (Payments)	\$0	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$8,137,253	\$7,779,487	\$8,285,172
13	CHAMPUS / TRICARE Net Revenue Payments)	\$786,915	\$1,178,818	\$751,168
14	Total Net Revenue (Payments)	\$330,549,485	\$339,377,632	\$351,590,037
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	4,406	4,421	4,525
2	Medicare	7,373	7,537	8,270
3	Medical Assistance	2,028	2,138	2,323
4	Medicaid	2,028	2,138	2,323
5	Other Medical Assistance	-	-	-
6	CHAMPUS / TRICARE	48	62	44

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
7	Uninsured (Included In Non-Government)	201	182	168
8	Total	13,855	14,158	15,162
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.12600	1.11010	1.12920
2	Medicare	1.33600	1.38656	1.34070
3	Medical Assistance	0.96600	0.95591	0.98280
4	Medicaid	0.96600	0.95591	0.98280
5	Other Medical Assistance	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.87600	0.79675	1.27120
7	Uninsured (Included In Non-Government)	1.08000	1.03321	1.10750
8	Total Case Mix Index	1.21347	1.23262	1.22254
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	8,487	8,809	9,971
2	Emergency Room - Treated and Discharged	86,806	85,082	81,193
3	Total Emergency Room Visits	95,293	93,891	91,164

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$0	\$264,126	\$264,126	0%
2	Inpatient Payments	\$0	\$57,472	\$57,472	0%
3	Outpatient Charges	\$0	\$323,185	\$323,185	0%
4	Outpatient Payments	\$0	\$56,530	\$56,530	0%
5	Discharges	0	4	4	0%
6	Patient Days	0	19	19	0%
7	Outpatient Visits (Excludes ED Visits)	0	294	294	0%
8	Emergency Department Outpatient Visits	0	23	23	0%
9	Emergency Department Inpatient Admissions	0	3	3	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$587,311	\$587,311	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$114,002	\$114,002	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	\$4,954,853	\$40,591,334	\$35,636,481	719%
2	Inpatient Payments	\$1,216,173	\$8,832,445	\$7,616,272	626%
3	Outpatient Charges	\$5,479,545	\$35,767,088	\$30,287,543	553%
4	Outpatient Payments	\$1,138,534	\$6,256,219	\$5,117,685	449%
5	Discharges	120	902	782	652%
6	Patient Days	455	3,992	3,537	777%
7	Outpatient Visits (Excludes ED Visits)	5,201	32,578	27,377	526%
8	Emergency Department Outpatient Visits	429	2,490	2,061	480%
9	Emergency Department Inpatient Admissions	100	734	634	634%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$10,434,398	\$76,358,422	\$65,924,024	632%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,354,707	\$15,088,664	\$12,733,957	541%
D. HEALTHNET 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%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$39,958,207	\$24,166,441	(\$15,791,766)	-40%
2	Inpatient Payments	\$9,807,781	\$5,258,481	(\$4,549,300)	-46%
3	Outpatient Charges	\$34,474,638	\$15,488,483	(\$18,986,155)	-55%
4	Outpatient Payments	\$7,163,104	\$2,709,176	(\$4,453,928)	-62%
5	Discharges	950	505	(445)	-47%
6	Patient Days	4,245	2,391	(1,854)	-44%
7	Outpatient Visits (Excludes ED Visits)	32,719	14,108	(18,611)	-57%
8	Emergency Department Outpatient Visits	2,700	1,078	(1,622)	-60%
9	Emergency Department Inpatient Admissions	810	446	(364)	-45%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$74,432,845	\$39,654,924	(\$34,777,921)	-47%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$16,970,885	\$7,967,657	(\$9,003,228)	-53%
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%
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					

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
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%
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%
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
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	\$44,913,060	\$65,021,901	\$20,108,841	45%
	TOTAL INPATIENT PAYMENTS	\$11,023,954	\$14,148,398	\$3,124,444	28%
	TOTAL OUTPATIENT CHARGES	\$39,954,183	\$51,578,756	\$11,624,573	29%
	TOTAL OUTPATIENT PAYMENTS	\$8,301,638	\$9,021,925	\$720,287	9%
	TOTAL DISCHARGES	1,070	1,411	341	32%
	TOTAL PATIENT DAYS	4,700	6,402	1,702	36%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	37,920	46,980	9,060	24%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	3,129	3,591	462	15%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	910	1,183	273	30%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$84,867,243	\$116,600,657	\$31,733,414	37%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$19,325,592	\$23,170,323	\$3,844,731	20%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% 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	\$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. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$1,901,665	\$0	(\$1,901,665)	-100%
2	Inpatient Payments	\$380,063	\$0	(\$380,063)	-100%
3	Outpatient Charges	\$6,636,381	\$0	(\$6,636,381)	-100%
4	Outpatient Payments	\$2,189,219	\$0	(\$2,189,219)	-100%
5	Discharges	104	0	(104)	-100%
6	Patient Days	281	0	(281)	-100%
7	Outpatient Visits (Excludes ED Visits)	5,896	0	(5,896)	-100%
8	Emergency Department Outpatient Visits	1,730	0	(1,730)	-100%
9	Emergency Department Inpatient Admissions	21	0	(21)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$8,538,046	\$0	(\$8,538,046)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,569,282	\$0	(\$2,569,282)	-100%
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%
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$215,951	\$0	(\$215,951)	-100%
2	Inpatient Payments	\$43,160	\$0	(\$43,160)	-100%
3	Outpatient Charges	\$3,393,426	\$0	(\$3,393,426)	-100%
4	Outpatient Payments	\$1,119,428	\$0	(\$1,119,428)	-100%
5	Discharges	11	0	(11)	-100%
6	Patient Days	63	0	(63)	-100%
7	Outpatient Visits (Excludes ED Visits)	3,015	0	(3,015)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	11	0	(11)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,609,377	\$0	(\$3,609,377)	-100%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,162,588	\$0	(\$1,162,588)	-100%
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%
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	\$244,225	\$0	(\$244,225)	-100%
2	Inpatient Payments	\$48,810	\$0	(\$48,810)	-100%
3	Outpatient Charges	\$864,602	\$0	(\$864,602)	-100%
4	Outpatient Payments	\$285,216	\$0	(\$285,216)	-100%
5	Discharges	11	0	(11)	-100%
6	Patient Days	28	0	(28)	-100%
7	Outpatient Visits (Excludes ED Visits)	768	0	(768)	-100%
8	Emergency Department Outpatient Visits	247	0	(247)	-100%
9	Emergency Department Inpatient Admissions	2	0	(2)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,108,827	\$0	(\$1,108,827)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$334,026	\$0	(\$334,026)	-100%
H.	AETNA				
1	Inpatient Charges	\$710,703	\$0	(\$710,703)	-100%
2	Inpatient Payments	\$142,040	\$0	(\$142,040)	-100%
3	Outpatient Charges	\$2,432,954	\$0	(\$2,432,954)	-100%
4	Outpatient Payments	\$802,586	\$0	(\$802,586)	-100%
5	Discharges	34	0	(34)	-100%
6	Patient Days	107	0	(107)	-100%
7	Outpatient Visits (Excludes ED Visits)	2,161	0	(2,161)	-100%
8	Emergency Department Outpatient Visits	668	0	(668)	-100%
9	Emergency Department Inpatient Admissions	4	0	(4)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,143,657	\$0	(\$3,143,657)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$944,626	\$0	(\$944,626)	-100%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. TOTAL MEDICAID MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$3,072,544	\$0	(\$3,072,544)	-100%
	TOTAL INPATIENT PAYMENTS	\$614,073	\$0	(\$614,073)	-100%
	TOTAL OUTPATIENT CHARGES	\$13,327,363	\$0	(\$13,327,363)	-100%
	TOTAL OUTPATIENT PAYMENTS	\$4,396,449	\$0	(\$4,396,449)	-100%
	TOTAL DISCHARGES	160	0	(160)	-100%
	TOTAL PATIENT DAYS	479	0	(479)	-100%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	11,840	0	(11,840)	-100%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	2,645	0	(2,645)	-100%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	38	0	(38)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$16,399,907	\$0	(\$16,399,907)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$5,010,522	\$0	(\$5,010,522)	-100%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. ASSETS					
A. Current Assets:					
1	Cash and Cash Equivalents	\$58,568,000	\$43,344,000	(\$15,224,000)	-26%
2	Short Term Investments	\$10,187,000	\$20,741,000	\$10,554,000	104%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$45,951,000	\$44,833,000	(\$1,118,000)	-2%
4	Current Assets Whose Use is Limited for Current Liabilities	\$4,613,000	\$4,174,000	(\$439,000)	-10%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$2,914,000	\$2,914,000	0%
7	Inventories of Supplies	\$1,347,000	\$1,251,000	(\$96,000)	-7%
8	Prepaid Expenses	\$2,425,000	\$2,589,000	\$164,000	7%
9	Other Current Assets	\$3,796,000	\$3,760,000	(\$36,000)	-1%
	Total Current Assets	\$126,887,000	\$123,606,000	(\$3,281,000)	-3%
B. Noncurrent Assets Whose Use is Limited:					
1	Held by Trustee	\$8,207,000	\$9,212,000	\$1,005,000	12%
2	Board Designated for Capital Acquisition	\$95,568,000	\$109,616,000	\$14,048,000	15%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$15,313,000	\$15,249,000	(\$64,000)	0%
	Total Noncurrent Assets Whose Use is Limited:	\$119,088,000	\$134,077,000	\$14,989,000	13%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$16,627,000	\$15,090,000	(\$1,537,000)	-9%
7	Other Noncurrent Assets	\$6,278,000	\$6,654,000	\$376,000	6%
C. Net Fixed Assets:					
1	Property, Plant and Equipment	\$390,097,000	\$415,182,000	\$25,085,000	6%
2	Less: Accumulated Depreciation	\$215,805,000	\$238,640,000	\$22,835,000	\$0
	Property, Plant and Equipment, Net	\$174,292,000	\$176,542,000	\$2,250,000	1%
3	Construction in Progress	\$14,694,000	\$18,586,000	\$3,892,000	26%
	Total Net Fixed Assets	\$188,986,000	\$195,128,000	\$6,142,000	3%
	Total Assets	\$457,866,000	\$474,555,000	\$16,689,000	4%
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Accounts Payable and Accrued Expenses	\$19,616,000	\$17,040,000	(\$2,576,000)	-13%
2	Salaries, Wages and Payroll Taxes	\$33,912,000	\$32,899,000	(\$1,013,000)	-3%
3	Due To Third Party Payers	\$2,944,000	\$0	(\$2,944,000)	-100%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$3,300,000	\$3,400,000	\$100,000	3%
6	Current Portion of Notes Payable	\$1,615,000	\$87,000	(\$1,528,000)	-95%
7	Other Current Liabilities	\$6,771,000	\$6,461,000	(\$310,000)	-5%
	Total Current Liabilities	\$68,158,000	\$59,887,000	(\$8,271,000)	-12%
	B. Long Term Debt:				
1	Bonds Payable (Net of Current Portion)	\$68,388,000	\$64,874,000	(\$3,514,000)	-5%
2	Notes Payable (Net of Current Portion)	\$995,000	\$869,000	(\$126,000)	-13%
	Total Long Term Debt	\$69,383,000	\$65,743,000	(\$3,640,000)	-5%
3	Accrued Pension Liability	\$129,719,000	\$48,985,000	(\$80,734,000)	-62%
4	Other Long Term Liabilities	\$23,796,000	\$29,621,000	\$5,825,000	24%
	Total Long Term Liabilities	\$222,898,000	\$144,349,000	(\$78,549,000)	-35%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
	C. Net Assets:				
1	Unrestricted Net Assets or Equity	\$150,651,000	\$253,975,000	\$103,324,000	69%
2	Temporarily Restricted Net Assets	\$9,195,000	\$9,368,000	\$173,000	2%
3	Permanently Restricted Net Assets	\$6,964,000	\$6,976,000	\$12,000	0%
	Total Net Assets	\$166,810,000	\$270,319,000	\$103,509,000	62%
	Total Liabilities and Net Assets	\$457,866,000	\$474,555,000	\$16,689,000	4%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012 ACTUAL</u>	<u>FY 2013 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
A. <u>Operating Revenue:</u>					
1	Total Gross Patient Revenue	\$1,140,027,000	\$1,238,917,000	\$98,890,000	9%
2	Less: Allowances	\$771,052,000	\$857,418,000	\$86,366,000	11%
3	Less: Charity Care	\$7,509,000	\$8,530,000	\$1,021,000	14%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$361,466,000	\$372,969,000	\$11,503,000	3%
5	Provision for Bad Debts	\$0	\$11,209,000	\$11,209,000	0%
	Net Patient Service Revenue less provision for bad debts	\$361,466,000	\$361,760,000	\$294,000	0%
6	Other Operating Revenue	\$12,534,000	\$12,946,000	\$412,000	3%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$374,000,000	\$374,706,000	\$706,000	0%
B. <u>Operating Expenses:</u>					
1	Salaries and Wages	\$171,970,000	\$175,890,000	\$3,920,000	2%
2	Fringe Benefits	\$39,621,000	\$39,223,000	(\$398,000)	-1%
3	Physicians Fees	\$3,405,000	\$3,450,000	\$45,000	1%
4	Supplies and Drugs	\$35,376,000	\$37,787,000	\$2,411,000	7%
5	Depreciation and Amortization	\$22,115,000	\$22,813,000	\$698,000	3%
6	Bad Debts	\$12,256,000	\$0	(\$12,256,000)	-100%
7	Interest Expense	\$3,405,000	\$3,300,000	(\$105,000)	-3%
8	Malpractice Insurance Cost	\$2,078,000	\$4,632,000	\$2,554,000	123%
9	Other Operating Expenses	\$61,431,000	\$73,262,000	\$11,831,000	19%
	Total Operating Expenses	\$351,657,000	\$360,357,000	\$8,700,000	2%
	Income/(Loss) From Operations	\$22,343,000	\$14,349,000	(\$7,994,000)	-36%
C. <u>Non-Operating Revenue:</u>					
1	Income from Investments	\$2,161,000	\$5,707,000	\$3,546,000	164%
2	Gifts, Contributions and Donations	\$467,000	\$293,000	(\$174,000)	-37%
3	Other Non-Operating Gains/(Losses)	\$1,278,000	\$1,155,000	(\$123,000)	-10%
	Total Non-Operating Revenue	\$3,906,000	\$7,155,000	\$3,249,000	83%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$26,249,000	\$21,504,000	(\$4,745,000)	-18%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%

MIDDLESEX HEALTH SYSTEM, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012	FY 2013	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$26,249,000	\$21,504,000	(\$4,745,000)	-18%

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
A. <u>Parent Corporation Statement of Operations Summary</u>				
1	Net Patient Revenue	\$345,032,000	\$361,466,000	\$361,760,000
2	Other Operating Revenue	14,403,000	12,534,000	12,946,000
3	Total Operating Revenue	\$359,435,000	\$374,000,000	\$374,706,000
4	Total Operating Expenses	344,623,000	351,657,000	360,357,000
5	Income/(Loss) From Operations	\$14,812,000	\$22,343,000	\$14,349,000
6	Total Non-Operating Revenue	5,151,000	3,906,000	7,155,000
7	Excess/(Deficiency) of Revenue Over Expenses	\$19,963,000	\$26,249,000	\$21,504,000
B. <u>Parent Corporation Profitability Summary</u>				
1	Parent Corporation Operating Margin	4.06%	5.91%	3.76%
2	Parent Corporation Non-Operating Margin	1.41%	1.03%	1.87%
3	Parent Corporation Total Margin	5.48%	6.95%	5.63%
4	Income/(Loss) From Operations	\$14,812,000	\$22,343,000	\$14,349,000
5	Total Operating Revenue	\$359,435,000	\$374,000,000	\$374,706,000
6	Total Non-Operating Revenue	\$5,151,000	\$3,906,000	\$7,155,000
7	Total Revenue	\$364,586,000	\$377,906,000	\$381,861,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$19,963,000	\$26,249,000	\$21,504,000
C. <u>Parent Corporation Net Assets Summary</u>				
1	Parent Corporation Unrestricted Net Assets	\$130,362,000	\$150,651,000	\$253,975,000
2	Parent Corporation Total Net Assets	\$143,545,000	\$166,810,000	\$270,319,000
3	Parent Corporation Change in Total Net Assets	(\$4,907,000)	\$23,265,000	\$103,509,000
4	Parent Corporation Change in Total Net Assets %	96.7%	16.2%	62.1%
D. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	1.97	1.86	2.06
2	Total Current Assets	\$124,828,000	\$126,887,000	\$123,606,000
3	Total Current Liabilities	\$63,255,000	\$68,158,000	\$59,887,000

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
4	<u>Days Cash on Hand</u>	80	76	69
5	Cash and Cash Equivalents	\$59,543,000	\$58,568,000	\$43,344,000
6	Short Term Investments	\$10,647,000	\$10,187,000	\$20,741,000
7	Total Cash and Short Term Investments	\$70,190,000	\$68,755,000	\$64,085,000
8	Total Operating Expenses	\$344,623,000	\$351,657,000	\$360,357,000
9	Depreciation Expense	\$22,454,000	\$22,115,000	\$22,813,000
10	Operating Expenses less Depreciation Expense	\$322,169,000	\$329,542,000	\$337,544,000
11	<u>Days Revenue in Patient Accounts Receivable</u>	46	43	48
12	Net Patient Accounts Receivable	\$ 43,838,000	\$ 45,951,000	\$ 44,833,000
13	Due From Third Party Payers	\$0	\$0	\$2,914,000
14	Due To Third Party Payers	\$207,000	\$2,944,000	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 43,631,000	\$ 43,007,000	\$ 47,747,000
16	Total Net Patient Revenue	\$345,032,000	\$361,466,000	\$361,760,000
17	<u>Average Payment Period</u>	72	75	65
18	Total Current Liabilities	\$63,255,000	\$68,158,000	\$59,887,000
19	Total Operating Expenses	\$344,623,000	\$351,657,000	\$360,357,000
20	Depreciation Expense	\$22,454,000	\$22,115,000	\$22,813,000
20	Total Operating Expenses less Depreciation Expense	\$322,169,000	\$329,542,000	\$337,544,000
E. <u>Solvency Measures Summary</u>				
1	<u>Equity Financing Ratio</u>	34.4	36.4	57.0
2	Total Net Assets	\$143,545,000	\$166,810,000	\$270,319,000
3	Total Assets	\$416,726,000	\$457,866,000	\$474,555,000
4	<u>Cash Flow to Total Debt Ratio</u>	31.2	35.2	35.3
5	Excess/(Deficiency) of Revenues Over Expenses	\$19,963,000	\$26,249,000	\$21,504,000

MIDDLESEX HEALTH SYSTEM, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2011	FY 2012	FY 2013
6	Depreciation Expense	\$22,454,000	\$22,115,000	\$22,813,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$42,417,000	\$48,364,000	\$44,317,000
8	Total Current Liabilities	\$63,255,000	\$68,158,000	\$59,887,000
9	Total Long Term Debt	\$72,734,000	\$69,383,000	\$65,743,000
10	Total Current Liabilities and Total Long Term Debt	\$135,989,000	\$137,541,000	\$125,630,000
11	<u>Long Term Debt to Capitalization Ratio</u>	33.6	29.4	19.6
12	Total Long Term Debt	\$72,734,000	\$69,383,000	\$65,743,000
13	Total Net Assets	\$143,545,000	\$166,810,000	\$270,319,000
14	Total Long Term Debt and Total Net Assets	\$216,279,000	\$236,193,000	\$336,062,000

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
LINE	DESCRIPTION	PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
1	Adult Medical/Surgical	43,814	12,076	12,073	134	170	89.6%	70.6%
2	ICU/CCU (Excludes Neonatal ICU)	7,081	704	0	20	24	97.0%	80.8%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,787	785	784	17	20	93.3%	79.3%
	TOTAL PSYCHIATRIC	5,787	785	784	17	20	93.3%	79.3%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	3,025	1,223	1,223	9	23	92.1%	36.0%
7	Newborn	2,839	1,078	1,076	9	23	86.4%	33.8%
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	59,707	14,084	14,080	180	237	90.9%	69.0%
	TOTAL INPATIENT BED UTILIZATION	62,546	15,162	15,156	189	260	90.7%	65.9%
	TOTAL INPATIENT REPORTED YEAR	62,546	15,162	15,156	189	260	90.7%	65.9%
	TOTAL INPATIENT PRIOR YEAR	59,473	14,158	14,181	183	260	89.0%	62.7%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	3,073	1,004	975	6	0	1.6%	3.2%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	5%	7%	7%	3%	0%	2%	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 2013					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	7,073	7,905	832	12%
2	Outpatient Scans (Excluding Emergency Department Scans)	10,392	9,959	-433	-4%
3	Emergency Department Scans	11,314	11,148	-166	-1%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	28,779	29,012	233	1%
B. MRI Scans (A)					
1	Inpatient Scans	1,663	2,257	594	36%
2	Outpatient Scans (Excluding Emergency Department Scans)	9,098	9,072	-26	0%
3	Emergency Department Scans	98	130	32	33%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	10,859	11,459	600	6%
C. PET Scans (A)					
1	Inpatient Scans	1	0	-1	-100%
2	Outpatient Scans (Excluding Emergency Department Scans)	8	4	-4	-50%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	9	4	-5	-56%
D. PET/CT Scans (A)					
1	Inpatient Scans	3	3	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	495	494	-1	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	498	497	-1	0%
(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	225	178	-47	-21%
2	Outpatient Procedures	12,272	12,571	299	2%
	Total Linear Accelerator Procedures	12,497	12,749	252	2%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	110	132	22	20%
2	Outpatient Procedures	202	227	25	12%
	Total Cardiac Catheterization Procedures	312	359	47	15%
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%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
I. <u>Surgical Procedures</u>					
1	Inpatient Surgical Procedures	2,859	2,966	107	4%
2	Outpatient Surgical Procedures	4,807	4,720	-87	-2%
	Total Surgical Procedures	7,666	7,686	20	0%
J. <u>Endoscopy Procedures</u>					
1	Inpatient Endoscopy Procedures	885	880	-5	-1%
2	Outpatient Endoscopy Procedures	1,926	1,985	59	3%
	Total Endoscopy Procedures	2,811	2,865	54	2%
K. <u>Hospital Emergency Room Visits</u>					
1	Emergency Room Visits: Treated and Admitted	8,809	9,971	1,162	13%
2	Emergency Room Visits: Treated and Discharged	85,082	81,193	-3,889	-5%
	Total Emergency Room Visits	93,891	91,164	-2,727	-3%
L. <u>Hospital Clinic Visits</u>					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	35,449	35,842	393	1%
4	Medical Clinic Visits	55,697	0	-55,697	-100%
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	0%
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	0%
7	Medical Clinic Visits - Family Practice Clinic	0	33,379	33,379	0%
8	Medical Clinic Visits - Other Medical Clinics	0	22,074	22,074	0%
9	Specialty Clinic Visits	6,891	0	-6,891	-100%
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	0%
11	Specialty Clinic Visits - Chronic Pain Clinic	0	0	0	0%
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	0%
13	Specialty Clinic Visits - Other Speciality Clinics	0	5,844	5,844	0%
	Total Hospital Clinic Visits	98,037	97,139	-898	-1%
M. <u>Other Hospital Outpatient Visits</u>					
1	Rehabilitation (PT/OT/ST)	46,677	43,247	-3,430	-7%
2	Cardiac Rehabilitation	3,489	3,442	-47	-1%
3	Chemotherapy	730	948	218	30%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	399,259	402,972	3,713	1%
	Total Other Hospital Outpatient Visits	450,155	450,609	454	0%
N. <u>Hospital Full Time Equivalent Employees</u>					
1	Total Nursing FTEs	522.0	534.0	12.0	2%
2	Total Physician FTEs	134.0	135.0	1.0	1%
3	Total Non-Nursing and Non-Physician FTEs	1,424.0	1,450.0	26.0	2%
	Total Hospital Full Time Equivalent Employees	2,080.0	2,119.0	39.0	2%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	MH OP Center Saybrook Road	1,440	1,784	344	24%
2	Middlesex Hospital	3,367	2,936	-431	-13%
	Total Outpatient Surgical Procedures(A)	4,807	4,720	-87	-2%
B. Outpatient Endoscopy Procedures					
1	MH Shoreline Oscopy Room	0	0	0	0%
2	Middlesex Hospital	1,926	1,985	59	3%
	Total Outpatient Endoscopy Procedures(B)	1,926	1,985	59	3%
C. Outpatient Hospital Emergency Room Visits					
1	MH Marlborough ED	23,096	21,428	-1,668	-7%
2	MH Shoreline ED	20,601	20,429	-172	-1%
3	Middlesex Hospital ED	41,385	39,336	-2,049	-5%
	Total Outpatient Hospital Emergency Room Visits(C)	85,082	81,193	-3,889	-5%
(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					
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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$300,009,429	\$345,906,839	\$45,897,410	15%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$72,545,632	\$72,151,900	(\$393,732)	-1%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.18%	20.86%	-3.32%	-14%
4	DISCHARGES	7,537	8,270	733	10%
5	CASE MIX INDEX (CMI)	1.38656	1.34070	(0.04586)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	10,450.50272	11,087.58900	637.08628	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,941.83	\$6,507.45	(\$434.38)	-6%
8	PATIENT DAYS	34,849	38,079	3,230	9%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,081.71	\$1,894.80	(\$186.92)	-9%
10	AVERAGE LENGTH OF STAY	4.6	4.6	(0.0)	0%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$220,377,833	\$239,523,212	\$19,145,379	9%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$46,519,479	\$54,453,684	\$7,934,205	17%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.11%	22.73%	1.63%	8%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	73.46%	69.25%	-4.21%	-6%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,536.45175	5,726.56201	190.11026	3%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,402.40	\$9,508.97	\$1,106.57	13%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$520,387,262	\$585,430,051	\$65,042,789	12%
18	TOTAL ACCRUED PAYMENTS	\$119,065,111	\$126,605,584	\$7,540,473	6%
19	TOTAL ALLOWANCES	\$401,322,151	\$458,824,467	\$57,502,316	14%
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$141,858,357	\$155,937,203	\$14,078,846	10%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$63,941,094	\$69,566,430	\$5,625,336	9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	45.07%	44.61%	-0.46%	-1%
4	DISCHARGES	4,421	4,525	104	2%
5	CASE MIX INDEX (CMI)	1.11010	1.12920	0.01910	2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,907.75210	5,109.63000	201.87790	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$13,028.59	\$13,614.77	\$586.18	4%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$6,086.76)	(\$7,107.32)	(\$1,020.56)	17%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$29,872,304)	(\$36,315,783)	(\$6,443,478)	22%
10	PATIENT DAYS	15,364	15,119	(245)	-2%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$4,161.75	\$4,601.26	\$439.51	11%
12	AVERAGE LENGTH OF STAY	3.5	3.3	(0.1)	-4%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$293,369,697	\$295,078,693	\$1,708,996	1%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$124,109,814	\$125,026,483	\$916,669	1%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	42.30%	42.37%	0.07%	0%

MIDDLESEX HOSPITAL					
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AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
16	OUTPATIENT CHARGES / INPATIENT CHARGES	206.80%	189.23%	-17.58%	-8%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	9,142.83415	8,562.62047	(580.21368)	-6%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$13,574.55	\$14,601.43	\$1,026.88	8%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$5,172.15)	(\$5,092.46)	\$79.68	-2%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$47,288,070)	(\$43,604,815)	\$3,683,254	-8%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$435,228,054	\$451,015,896	\$15,787,842	4%
22	TOTAL ACCRUED PAYMENTS	\$188,050,908	\$194,592,913	\$6,542,005	3%
23	TOTAL ALLOWANCES	\$247,177,146	\$256,422,983	\$9,245,837	4%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$77,160,374)	(\$79,920,598)	(\$2,760,224)	4%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$396,628,859	\$414,396,424	\$17,767,565	4%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$187,614,053	\$195,897,906	\$8,283,853	4%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$209,014,806	\$218,498,518	\$9,483,712	5%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.70%	52.73%	0.03%	
C. UNINSURED					
UNINSURED INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$6,206,111	\$5,822,241	(\$383,870)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$4,126,794	\$3,735,559	(\$391,235)	-9%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	66.50%	64.16%	-2.34%	-4%
4	DISCHARGES	182	168	(14)	-8%
5	CASE MIX INDEX (CMI)	1.03321	1.10750	0.07429	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	188.04422	186.06000	(1.98422)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$21,945.87	\$20,077.17	(\$1,868.70)	-9%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	(\$8,917.28)	(\$6,462.41)	\$2,454.87	-28%
9	MEDICARE - UNINSURED IP PMT / CMAD	(\$15,004.04)	(\$13,569.73)	\$1,434.31	-10%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,821,423)	(\$2,524,783)	\$296,639	-11%
11	PATIENT DAYS	759	630	(129)	-17%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$5,437.15	\$5,929.46	\$492.31	9%
13	AVERAGE LENGTH OF STAY	4.2	3.8	(0.4)	-10%
UNINSURED OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$13,838,417	\$14,863,650	\$1,025,233	7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,652,693	\$4,549,613	\$896,920	25%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.40%	30.61%	4.21%	16%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	222.98%	255.29%	32.31%	14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	405.82450	428.88867	23.06417	6%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,000.67	\$10,607.91	\$1,607.24	18%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$4,573.87	\$3,993.52	(\$580.36)	-13%
21	MEDICARE - UNINSURED OP PMT / OPED	(\$598.27)	(\$1,098.95)	(\$500.67)	84%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$242,793)	(\$471,325)	(\$228,532)	94%
UNINSURED TOTALS (INPATIENT AND OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$20,044,528	\$20,685,891	\$641,363	3%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2012	FY 2013	DIFFERENCE	DIFFERENCE
24	TOTAL ACCRUED PAYMENTS	\$7,779,487	\$8,285,172	\$505,685	7%
25	TOTAL ALLOWANCES	\$12,265,041	\$12,400,719	\$135,678	1%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,064,216)	(\$2,996,109)	\$68,108	-2%
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$63,620,043	\$71,291,853	\$7,671,810	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,088,384	\$10,706,376	(\$382,008)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	17.43%	15.02%	-2.41%	-14%
4	DISCHARGES	2,138	2,323	185	9%
5	CASE MIX INDEX (CMI)	0.95591	0.98280	0.02689	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,043.73558	2,283.04440	239.30882	12%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,425.55	\$4,689.52	(\$736.03)	-14%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$7,603.04	\$8,925.25	\$1,322.21	17%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$1,516.28	\$1,817.93	\$301.65	20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,098,885	\$4,150,415	\$1,051,530	34%
11	PATIENT DAYS	9,097	9,219	122	1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,218.91	\$1,161.34	(\$57.57)	-5%
13	AVERAGE LENGTH OF STAY	4.3	4.0	(0.3)	-7%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$95,948,897	\$104,354,788	\$8,405,891	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,994,411	\$18,933,996	(\$1,060,415)	-5%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.84%	18.14%	-2.69%	-13%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	150.82%	146.38%	-4.44%	-3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,224.43576	3,400.33485	175.89909	5%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,200.90	\$5,568.27	(\$632.63)	-10%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$7,373.64	\$9,033.15	\$1,659.51	23%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,201.50	\$3,940.69	\$1,739.19	79%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,098,586	\$13,399,673	\$6,301,087	89%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$159,568,940	\$175,646,641	\$16,077,701	10%
24	TOTAL ACCRUED PAYMENTS	\$31,082,795	\$29,640,372	(\$1,442,423)	-5%
25	TOTAL ALLOWANCES	\$128,486,145	\$146,006,269	\$17,520,124	14%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,197,471	\$17,550,088	\$7,352,617	72%
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%

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REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
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LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$13,028.59	\$13,614.77	\$586.18	4%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,941.83	\$6,507.45	(\$434.38)	-6%
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%
<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>					
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	\$13,574.55	\$14,601.43	\$1,026.88	8%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$8,402.40	\$9,508.97	\$1,106.57	13%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>					
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%
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
<u>TOTAL MEDICAL ASSISTANCE INPATIENT</u>					
1	INPATIENT ACCRUED CHARGES	\$63,620,043	\$71,291,853	\$7,671,810	12%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$11,088,384	\$10,706,376	(\$382,008)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	17.43%	15.02%	-2.41%	-14%
4	DISCHARGES	2,138	2,323	185	9%
5	CASE MIX INDEX (CMI)	0.95591	0.98280	0.02689	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,043.73558	2,283.04440	239.30882	12%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,425.55	\$4,689.52	(\$736.03)	-14%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$7,603.04	\$8,925.25	\$1,322.21	17%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$1,516.28	\$1,817.93	\$301.65	20%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,098,885	\$4,150,415	\$1,051,530	34%
11	PATIENT DAYS	9,097	9,219	122	1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,218.91	\$1,161.34	(\$57.57)	-5%
13	AVERAGE LENGTH OF STAY	4.3	4.0	(0.3)	-7%
<u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$95,948,897	\$104,354,788	\$8,405,891	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$19,994,411	\$18,933,996	(\$1,060,415)	-5%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	20.84%	18.14%	-2.69%	-13%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	150.82%	146.38%	-4.44%	-3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,224.43576	3,400.33485	175.89909	5%

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LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$6,200.90	\$5,568.27	(\$632.63)	-10%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$7,373.64	\$9,033.15	\$1,659.51	23%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,201.50	\$3,940.69	\$1,739.19	79%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,098,586	\$13,399,673	\$6,301,087	89%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$159,568,940	\$175,646,641	\$16,077,701	10%
24	TOTAL ACCRUED PAYMENTS	\$31,082,795	\$29,640,372	(\$1,442,423)	-5%
25	TOTAL ALLOWANCES	\$128,486,145	\$146,006,269	\$17,520,124	14%
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$1,339,754	\$1,669,163	\$329,409	25%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$338,550	\$377,732	\$39,182	12%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	25.27%	22.63%	-2.64%	-10%
4	DISCHARGES	62	44	(18)	-29%
5	CASE MIX INDEX (CMI)	0.79675	1.27120	0.47445	60%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	49.39850	55.93280	6.53430	13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,853.45	\$6,753.32	(\$100.13)	-1%
8	PATIENT DAYS	163	129	(34)	-21%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,076.99	\$2,928.16	\$851.16	41%
10	AVERAGE LENGTH OF STAY	2.6	2.9	0.3	12%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$2,626,269	\$2,759,727	\$133,458	5%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$840,268	\$373,436	(\$466,832)	-56%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$3,966,023	\$4,428,890	\$462,867	12%
14	TOTAL ACCRUED PAYMENTS	\$1,178,818	\$751,168	(\$427,650)	-36%
15	TOTAL ALLOWANCES	\$2,787,205	\$3,677,722	\$890,517	32%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$11,871,399	\$12,173,148	\$301,749	3%
2	TOTAL OPERATING EXPENSES	\$334,537,291	\$342,279,038	\$7,741,747	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)	\$7,509,399	\$8,529,846	\$1,020,447	14%
5	BAD DEBTS (CHARGES)	\$12,199,395	\$11,094,963	(\$1,104,432)	-9%
6	UNCOMPENSATED CARE (CHARGES)	\$19,708,794	\$19,624,809	(\$83,985)	0%
7	COST OF UNCOMPENSATED CARE	\$6,004,919	\$5,687,260	(\$317,660)	-5%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$159,568,940	\$175,646,641	\$16,077,701	10%
9	TOTAL ACCRUED PAYMENTS	\$31,082,795	\$29,640,372	(\$1,442,423)	-5%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$48,617,821	\$50,902,307	\$2,284,486	5%

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LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$17,535,026	\$21,261,935	\$3,726,909	21%
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$506,827,583	\$574,805,058	\$67,977,475	13%
2	TOTAL INPATIENT PAYMENTS	\$147,913,660	\$152,802,438	\$4,888,778	3%
3	TOTAL INPATIENT PAYMENTS / CHARGES	29.18%	26.58%	-2.60%	-9%
4	TOTAL DISCHARGES	14,158	15,162	1,004	7%
5	TOTAL CASE MIX INDEX	1.23262	1.22254	(0.01007)	-1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	17,451.38890	18,536.19620	1,084.80730	6%
7	TOTAL OUTPATIENT CHARGES	\$612,322,696	\$641,716,420	\$29,393,724	5%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	120.81%	111.64%	-9.17%	-8%
9	TOTAL OUTPATIENT PAYMENTS	\$191,463,972	\$198,787,599	\$7,323,627	4%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.27%	30.98%	-0.29%	-1%
11	TOTAL CHARGES	\$1,119,150,279	\$1,216,521,478	\$97,371,199	9%
12	TOTAL PAYMENTS	\$339,377,632	\$351,590,037	\$12,212,405	4%
13	TOTAL PAYMENTS / TOTAL CHARGES	30.32%	28.90%	-1.42%	-5%
14	PATIENT DAYS	59,473	62,546	3,073	5%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$364,969,226	\$418,867,855	\$53,898,629	15%
2	INPATIENT PAYMENTS	\$83,972,566	\$83,236,008	(\$736,558)	-1%
3	GOVT. INPATIENT PAYMENTS / CHARGES	23.01%	19.87%	-3.14%	-14%
4	DISCHARGES	9,737	10,637	900	9%
5	CASE MIX INDEX	1.28824	1.26225	(0.02599)	-2%
6	CASE MIX ADJUSTED DISCHARGES	12,543.63680	13,426.56620	882.92940	7%
7	OUTPATIENT CHARGES	\$318,952,999	\$346,637,727	\$27,684,728	9%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	87.39%	82.76%	-4.64%	-5%
9	OUTPATIENT PAYMENTS	\$67,354,158	\$73,761,116	\$6,406,958	10%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	21.12%	21.28%	0.16%	1%
11	TOTAL CHARGES	\$683,922,225	\$765,505,582	\$81,583,357	12%
12	TOTAL PAYMENTS	\$151,326,724	\$156,997,124	\$5,670,400	4%
13	TOTAL PAYMENTS / CHARGES	22.13%	20.51%	-1.62%	-7%
14	PATIENT DAYS	44,109	47,427	3,318	8%
15	TOTAL GOVERNMENT DEDUCTIONS	\$532,595,501	\$608,508,458	\$75,912,957	14%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	4.6	4.6	(0.0)	0%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.3	(0.1)	-4%
3	UNINSURED	4.2	3.8	(0.4)	-10%
4	MEDICAID	4.3	4.0	(0.3)	-7%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	2.6	2.9	0.3	12%
7	TOTAL AVERAGE LENGTH OF STAY	4.2	4.1	(0.1)	-2%
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,119,150,279	\$1,216,521,478	\$97,371,199	9%
2	TOTAL GOVERNMENT DEDUCTIONS	\$532,595,501	\$608,508,458	\$75,912,957	14%

MIDDLESEX HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2013					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
3	UNCOMPENSATED CARE	\$19,708,794	\$19,624,809	(\$83,985)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$209,014,806	\$218,498,518	\$9,483,712	5%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,845,972	\$17,342,392	\$496,420	3%
6	TOTAL ADJUSTMENTS	\$778,165,073	\$863,974,177	\$85,809,104	11%
7	TOTAL ACCRUED PAYMENTS	\$340,985,206	\$352,547,301	\$11,562,095	3%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$340,985,206	\$352,547,301	\$11,562,095	3%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3046822329	0.2897994876	(0.0148827453)	-5%
11	COST OF UNCOMPENSATED CARE	\$6,004,919	\$5,687,260	(\$317,660)	-5%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$17,535,026	\$21,261,935	\$3,726,909	21%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$23,539,945	\$26,949,194	\$3,409,249	14%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$7,098,586	\$13,399,673	\$6,301,087	89%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$3,064,216)	(\$2,996,109)	\$68,108	-2%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$4,034,370	\$10,403,564	\$6,369,194	158%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,313,424	\$23,800,791	\$487,367	2.09%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$8,457,989	(\$4,419,016)	(\$12,877,005)	-152.25%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$347,835,624	\$347,171,019	(\$664,605)	-0.19%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,119,150,279	\$1,216,521,478	\$97,371,199	8.70%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$19,708,794	\$19,624,809	(\$83,985)	-0.43%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2012	FY ACTUAL 2013	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$141,858,357	\$155,937,203	\$14,078,846
2	MEDICARE	\$300,009,429	345,906,839	\$45,897,410
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$63,620,043	71,291,853	\$7,671,810
4	MEDICAID	\$63,620,043	71,291,853	\$7,671,810
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$1,339,754	1,669,163	\$329,409
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$6,206,111	5,822,241	(\$383,870)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$364,969,226	\$418,867,855	\$53,898,629
	TOTAL INPATIENT CHARGES	\$506,827,583	\$574,805,058	\$67,977,475
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$293,369,697	\$295,078,693	\$1,708,996
2	MEDICARE	\$220,377,833	239,523,212	\$19,145,379
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$95,948,897	104,354,788	\$8,405,891
4	MEDICAID	\$95,948,897	104,354,788	\$8,405,891
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$2,626,269	2,759,727	\$133,458
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$13,838,417	14,863,650	\$1,025,233
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$318,952,999	\$346,637,727	\$27,684,728
	TOTAL OUTPATIENT CHARGES	\$612,322,696	\$641,716,420	\$29,393,724
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$435,228,054	\$451,015,896	\$15,787,842
2	TOTAL MEDICARE	\$520,387,262	\$585,430,051	\$65,042,789
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$159,568,940	\$175,646,641	\$16,077,701
4	TOTAL MEDICAID	\$159,568,940	\$175,646,641	\$16,077,701
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$3,966,023	\$4,428,890	\$462,867
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$20,044,528	\$20,685,891	\$641,363
	TOTAL GOVERNMENT CHARGES	\$683,922,225	\$765,505,582	\$81,583,357
	TOTAL CHARGES	\$1,119,150,279	\$1,216,521,478	\$97,371,199
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$63,941,094	\$69,566,430	\$5,625,336
2	MEDICARE	\$72,545,632	72,151,900	(\$393,732)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,088,384	10,706,376	(\$382,008)
4	MEDICAID	\$11,088,384	10,706,376	(\$382,008)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$338,550	377,732	\$39,182
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$4,126,794	3,735,559	(\$391,235)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$83,972,566	\$83,236,008	(\$736,558)
	TOTAL INPATIENT PAYMENTS	\$147,913,660	\$152,802,438	\$4,888,778
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$124,109,814	\$125,026,483	\$916,669
2	MEDICARE	\$46,519,479	54,453,684	\$7,934,205
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,994,411	18,933,996	(\$1,060,415)
4	MEDICAID	\$19,994,411	18,933,996	(\$1,060,415)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$840,268	373,436	(\$466,832)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,652,693	4,549,613	\$896,920
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$67,354,158	\$73,761,116	\$6,406,958
	TOTAL OUTPATIENT PAYMENTS	\$191,463,972	\$198,787,599	\$7,323,627
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$188,050,908	\$194,592,913	\$6,542,005
2	TOTAL MEDICARE	\$119,065,111	\$126,605,584	\$7,540,473
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$31,082,795	\$29,640,372	(\$1,442,423)
4	TOTAL MEDICAID	\$31,082,795	\$29,640,372	(\$1,442,423)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$1,178,818	\$751,168	(\$427,650)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$7,779,487	\$8,285,172	\$505,685
	TOTAL GOVERNMENT PAYMENTS	\$151,326,724	\$156,997,124	\$5,670,400
	TOTAL PAYMENTS	\$339,377,632	\$351,590,037	\$12,212,405
II. PAYER MIX				

MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2012	FY ACTUAL 2013	AMOUNT DIFFERENCE
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	12.68%	12.82%	0.14%
2	MEDICARE	26.81%	28.43%	1.63%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.68%	5.86%	0.18%
4	MEDICAID	5.68%	5.86%	0.18%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.12%	0.14%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.55%	0.48%	-0.08%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	32.61%	34.43%	1.82%
	TOTAL INPATIENT PAYER MIX	45.29%	47.25%	1.96%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.21%	24.26%	-1.96%
2	MEDICARE	19.69%	19.69%	0.00%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	8.57%	8.58%	0.00%
4	MEDICAID	8.57%	8.58%	0.00%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.23%	0.23%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.24%	1.22%	-0.01%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	28.50%	28.49%	-0.01%
	TOTAL OUTPATIENT PAYER MIX	54.71%	52.75%	-1.96%
	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)	18.84%	19.79%	0.95%
2	MEDICARE	21.38%	20.52%	-0.85%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.27%	3.05%	-0.22%
4	MEDICAID	3.27%	3.05%	-0.22%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.10%	0.11%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.22%	1.06%	-0.15%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	24.74%	23.67%	-1.07%
	TOTAL INPATIENT PAYER MIX	43.58%	43.46%	-0.12%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	36.57%	35.56%	-1.01%
2	MEDICARE	13.71%	15.49%	1.78%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.89%	5.39%	-0.51%
4	MEDICAID	5.89%	5.39%	-0.51%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.25%	0.11%	-0.14%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.08%	1.29%	0.22%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	19.85%	20.98%	1.13%
	TOTAL OUTPATIENT PAYER MIX	56.42%	56.54%	0.12%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,421	4,525	104
2	MEDICARE	7,537	8,270	733
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,138	2,323	185
4	MEDICAID	2,138	2,323	185
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	62	44	(18)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	182	168	(14)
	TOTAL GOVERNMENT DISCHARGES	9,737	10,637	900
	TOTAL DISCHARGES	14,158	15,162	1,004
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15,364	15,119	(245)
2	MEDICARE	34,849	38,079	3,230

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2012	FY ACTUAL 2013	AMOUNT DIFFERENCE
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	9,097	9,219	122
4	MEDICAID	9,097	9,219	122
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	163	129	(34)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	759	630	(129)
	TOTAL GOVERNMENT PATIENT DAYS	44,109	47,427	3,318
	TOTAL PATIENT DAYS	59,473	62,546	3,073
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.3	(0.1)
2	MEDICARE	4.6	4.6	(0.0)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.3	4.0	(0.3)
4	MEDICAID	4.3	4.0	(0.3)
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	2.6	2.9	0.3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.2	3.8	(0.4)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.5	4.5	(0.1)
	TOTAL AVERAGE LENGTH OF STAY	4.2	4.1	(0.1)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.11010	1.12920	0.01910
2	MEDICARE	1.38656	1.34070	(0.04586)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.95591	0.98280	0.02689
4	MEDICAID	0.95591	0.98280	0.02689
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	0.79675	1.27120	0.47445
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.03321	1.10750	0.07429
	TOTAL GOVERNMENT CASE MIX INDEX	1.28824	1.26225	(0.02599)
	TOTAL CASE MIX INDEX	1.23262	1.22254	(0.01007)
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$396,628,859	\$414,396,424	\$17,767,565
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$187,614,053	\$195,897,906	\$8,283,853
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$209,014,806	\$218,498,518	\$9,483,712
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.70%	52.73%	0.03%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,313,424	\$23,800,791	\$487,367
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,845,972	\$17,342,392	\$496,420
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$7,509,399	\$8,529,846	\$1,020,447
9	BAD DEBTS	\$12,199,395	\$11,094,963	(\$1,104,432)
10	TOTAL UNCOMPENSATED CARE	\$19,708,794	\$19,624,809	(\$83,985)
11	TOTAL OTHER OPERATING REVENUE	\$11,871,399	\$12,173,148	\$301,749
12	TOTAL OPERATING EXPENSES	\$334,537,291	\$342,279,038	\$7,741,747
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,907.75210	5,109.63000	201.87790
2	MEDICARE	10,450.50272	11,087.58900	637.08628
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,043.73558	2,283.04440	239.30882
4	MEDICAID	2,043.73558	2,283.04440	239.30882
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	49.39850	55.93280	6.53430
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	188.04422	186.06000	(1.98422)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	12,543.63680	13,426.56620	882.92940
	TOTAL CASE MIX ADJUSTED DISCHARGES	17,451.38890	18,536.19620	1,084.80730
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	9,142.83415	8,562.62047	-580.21368
2	MEDICARE	5,536.45175	5,726.56201	190.11026
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,224.43576	3,400.33485	175.89909

MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE
4	MEDICAID	3,224.43576	3,400.33485	175.89909
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	121.53625	72.74783	-48.78842
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	405.82450	428.88867	23.06417
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	8,882.42376	9,199.64469	317.22094
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	18,025.25791	17,762.26516	-262.99275
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,028.59	\$13,614.77	\$586.18
2	MEDICARE	\$6,941.83	\$6,507.45	(\$434.38)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,425.55	\$4,689.52	(\$736.03)
4	MEDICAID	\$5,425.55	\$4,689.52	(\$736.03)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$6,853.45	\$6,753.32	(\$100.13)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$21,945.87	\$20,077.17	(\$1,868.70)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,694.44	\$6,199.35	(\$495.08)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,475.75	\$8,243.46	(\$232.29)
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$13,574.55	\$14,601.43	\$1,026.88
2	MEDICARE	\$8,402.40	\$9,508.97	\$1,106.57
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,200.90	\$5,568.27	(\$632.63)
4	MEDICAID	\$6,200.90	\$5,568.27	(\$632.63)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$6,913.72	\$5,133.29	(\$1,780.43)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$9,000.67	\$10,607.91	\$1,607.24
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,582.86	\$8,017.82	\$434.96
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$10,621.98	\$11,191.57	\$569.59
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$7,098.586	\$13,399.673	\$6,301,087
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	(\$3,064,216)	(\$2,996,109)	\$68,108
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$4,034,370	\$10,403,564	\$6,369,194
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,119,150,279	\$1,216,521,478	\$97,371,199
2	TOTAL GOVERNMENT DEDUCTIONS	\$532,595,501	\$608,508,458	\$75,912,957
3	UNCOMPENSATED CARE	\$19,708,794	\$19,624,809	(\$83,985)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$209,014,806	\$218,498,518	\$9,483,712
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$16,845,972	\$17,342,392	\$496,420
6	TOTAL ADJUSTMENTS	\$778,165,073	\$863,974,177	\$85,809,104
7	TOTAL ACCRUED PAYMENTS	\$340,985,206	\$352,547,301	\$11,562,095
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$340,985,206	\$352,547,301	\$11,562,095
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3046822329	0.2897994876	(0.0148827453)
11	COST OF UNCOMPENSATED CARE	\$6,004,919	\$5,687,260	(\$317,660)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$17,535,026	\$21,261,935	\$3,726,909
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$23,539,945	\$26,949,194	\$3,409,249
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	45.07%	44.61%	-0.46%
2	MEDICARE	24.18%	20.86%	-3.32%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17.43%	15.02%	-2.41%
4	MEDICAID	17.43%	15.02%	-2.41%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	25.27%	22.63%	-2.64%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	66.50%	64.16%	-2.34%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	23.01%	19.87%	-3.14%

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL 2012	FY ACTUAL 2013	AMOUNT DIFFERENCE
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	29.18%	26.58%	-2.60%
B.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	42.30%	42.37%	0.07%
2	MEDICARE	21.11%	22.73%	1.63%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	20.84%	18.14%	-2.69%
4	MEDICAID	20.84%	18.14%	-2.69%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	31.99%	13.53%	-18.46%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	26.40%	30.61%	4.21%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES		21.28%	0.16%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	31.27%	30.98%	-0.29%
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	\$339,377,632	\$351,590,037	\$12,212,405
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$339,377,632	\$351,590,037	\$12,212,405
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$8,457,989	(\$4,419,016)	(\$12,877,005)
4	CALCULATED NET REVENUE	\$366,502,468	\$347,171,021	(\$19,331,447)
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$347,835,624	\$347,171,019	(\$664,605)
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$18,666,844	\$2	(\$18,666,842)
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS			
1	OHCA DEFINED GROSS REVENUE	\$1,119,150,279	\$1,216,521,478	\$97,371,199
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,119,150,279	\$1,216,521,478	\$97,371,199
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,119,150,279	\$1,216,521,478	\$97,371,199
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)	\$19,708,794	\$19,624,809	(\$83,985)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$19,708,794	\$19,624,809	(\$83,985)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$19,708,794	\$19,624,809	(\$83,985)
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$155,937,203
2	MEDICARE	345,906,839
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	71,291,853
4	MEDICAID	71,291,853
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,669,163
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,822,241
	TOTAL INPATIENT GOVERNMENT CHARGES	\$418,867,855
	TOTAL INPATIENT CHARGES	\$574,805,058
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$295,078,693
2	MEDICARE	239,523,212
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	104,354,788
4	MEDICAID	104,354,788
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	2,759,727
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	14,863,650
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$346,637,727
	TOTAL OUTPATIENT CHARGES	\$641,716,420
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$451,015,896
2	TOTAL GOVERNMENT ACCRUED CHARGES	765,505,582
	TOTAL ACCRUED CHARGES	\$1,216,521,478
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$69,566,430
2	MEDICARE	72,151,900
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,706,376
4	MEDICAID	10,706,376
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	377,732
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3,735,559
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$83,236,008
	TOTAL INPATIENT PAYMENTS	\$152,802,438
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$125,026,483
2	MEDICARE	54,453,684
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	18,933,996
4	MEDICAID	18,933,996
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	373,436
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4,549,613
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$73,761,116
	TOTAL OUTPATIENT PAYMENTS	\$198,787,599
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$194,592,913
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	156,997,124
	TOTAL ACCRUED PAYMENTS	\$351,590,037
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		

**MIDDLESEX HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2013
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES**

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,525
2	MEDICARE	8,270
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,323
4	MEDICAID	2,323
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	44
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	168
	TOTAL GOVERNMENT DISCHARGES	10,637
	TOTAL DISCHARGES	15,162
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.12920
2	MEDICARE	1.34070
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.98280
4	MEDICAID	0.98280
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	1.27120
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.10750
	TOTAL GOVERNMENT CASE MIX INDEX	1.26225
	TOTAL CASE MIX INDEX	1.22254
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$414,396,424
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$195,897,906
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$218,498,518
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.73%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$23,800,791
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$17,342,392
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$8,529,846
9	BAD DEBTS	\$11,094,963
10	TOTAL UNCOMPENSATED CARE	\$19,624,809
11	TOTAL OTHER OPERATING REVENUE	\$12,173,148
12	TOTAL OPERATING EXPENSES	\$342,279,038
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	\$351,590,037
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$351,590,037
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$4,419,016)
	CALCULATED NET REVENUE	\$347,171,021
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$347,171,019
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$2
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$1,216,521,478
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

MIDDLESEX HOSPITAL		
TWELVE MONTHS ACTUAL FILING		
FISCAL YEAR 2013		
REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND		
BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2013
	CALCULATED GROSS REVENUE	\$1,216,521,478
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,216,521,478
	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)	\$19,624,809
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$19,624,809
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$19,624,809
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	3,679	4,478	799	22%
2	Number of Approved Applicants	2,603	2,895	292	11%
3	Total Charges (A)	\$7,509,399	\$8,529,846	\$1,020,447	14%
4	Average Charges	\$2,885	\$2,946	\$62	2%
5	Ratio of Cost to Charges (RCC)	0.314907	0.295783	(0.019124)	-6%
6	Total Cost	\$2,364,762	\$2,522,983	\$158,221	7%
7	Average Cost	\$908	\$871	(\$37)	-4%
8	Charity Care - Inpatient Charges	\$1,121,518	\$2,148,665	\$1,027,147	92%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	2,669,833	3,180,582	510,749	19%
10	Charity Care - Emergency Department Charges	3,718,048	3,200,599	(517,449)	-14%
11	Total Charges (A)	\$7,509,399	\$8,529,846	\$1,020,447	14%
12	Charity Care - Number of Patient Days	137	286	149	109%
13	Charity Care - Number of Discharges	33	69	36	109%
14	Charity Care - Number of Outpatient ED Visits	1,061	1,299	238	22%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	1,360	2,148	788	58%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$3,072,553	\$2,778,668	(\$293,885)	-10%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	2,534,540	2,225,289	(309,251)	-12%
3	Bad Debts - Emergency Department	6,592,302	6,091,006	(501,296)	-8%
4	Total Bad Debts (A)	\$12,199,395	\$11,094,963	(\$1,104,432)	-9%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$7,509,399	\$8,529,846	\$1,020,447	14%
2	Bad Debts (A)	12,199,395	11,094,963	(1,104,432)	-9%
3	Total Uncompensated Care (A)	\$19,708,794	\$19,624,809	(\$83,985)	0%
4	Uncompensated Care - Inpatient Services	\$4,194,071	\$4,927,333	\$733,262	17%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	5,204,373	5,405,871	201,498	4%
6	Uncompensated Care - Emergency Department	10,310,350	9,291,605	(1,018,745)	-10%
7	Total Uncompensated Care (A)	\$19,708,794	\$19,624,809	(\$83,985)	0%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

MIDDLESEX HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2013 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2012	(4) FY 2013	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
<u>COMMERCIAL - ALL PAYERS</u>					
1	Total Gross Revenue	\$396,628,859	\$414,396,424	\$17,767,565	4%
2	Total Contractual Allowances	\$209,014,806	\$218,498,518	\$9,483,712	5%
	Total Accrued Payments (A)	\$187,614,053	\$195,897,906	\$8,283,853	4%
	Total Discount Percentage	52.70%	52.73%	0.03%	0%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$473,660,251	\$506,827,583	\$574,805,058
2	Outpatient Gross Revenue	\$560,012,120	\$612,322,696	\$641,716,420
3	Total Gross Patient Revenue	\$1,033,672,371	\$1,119,150,279	\$1,216,521,478
4	Net Patient Revenue	\$336,113,486	\$347,835,624	\$347,171,019
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$328,515,648	\$334,537,291	\$342,279,038
C. <u>Utilization Statistics</u>				
1	Patient Days	59,935	59,473	62,546
2	Discharges	13,855	14,158	15,162
3	Average Length of Stay	4.3	4.2	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	130,797	131,325	132,373
0	Equivalent (Adjusted) Discharges (ED)	30,236	31,263	32,089
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.21347	1.23262	1.22254
2	Case Mix Adjusted Patient Days (CMAPD)	72,729	73,307	76,465
3	Case Mix Adjusted Discharges (CMAD)	16,813	17,451	18,536
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	158,717	161,874	161,831
5	Case Mix Adjusted Equivalent Discharges (CMAED)	36,690	38,535	39,230
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$17,247	\$18,818	\$19,450
2	Total Gross Revenue per Discharge	\$74,606	\$79,047	\$80,235
3	Total Gross Revenue per EPD	\$7,903	\$8,522	\$9,190
4	Total Gross Revenue per ED	\$34,187	\$35,798	\$37,911
5	Total Gross Revenue per CMAEPD	\$6,513	\$6,914	\$7,517
6	Total Gross Revenue per CMAED	\$28,173	\$29,042	\$31,010
7	Inpatient Gross Revenue per EPD	\$3,621	\$3,859	\$4,342
8	Inpatient Gross Revenue per ED	\$15,666	\$16,212	\$17,913

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$5,608	\$5,849	\$5,551
2	Net Patient Revenue per Discharge	\$24,259	\$24,568	\$22,897
3	Net Patient Revenue per EPD	\$2,570	\$2,649	\$2,623
4	Net Patient Revenue per ED	\$11,116	\$11,126	\$10,819
5	Net Patient Revenue per CMAEPD	\$2,118	\$2,149	\$2,145
6	Net Patient Revenue per CMAED	\$9,161	\$9,026	\$8,850
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$5,481	\$5,625	\$5,472
2	Total Operating Expense per Discharge	\$23,711	\$23,629	\$22,575
3	Total Operating Expense per EPD	\$2,512	\$2,547	\$2,586
4	Total Operating Expense per ED	\$10,865	\$10,701	\$10,667
5	Total Operating Expense per CMAEPD	\$2,070	\$2,067	\$2,115
6	Total Operating Expense per CMAED	\$8,954	\$8,681	\$8,725
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$46,575,871	\$47,712,048	\$48,997,371
2	Nursing Fringe Benefits Expense	\$12,732,163	\$11,105,634	\$11,061,300
3	Total Nursing Salary and Fringe Benefits Expense	\$59,308,034	\$58,817,682	\$60,058,671
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$25,136,796	\$26,601,785	\$27,684,896
2	Physician Fringe Benefits Expense	\$6,871,493	\$6,191,930	\$6,249,946
3	Total Physician Salary and Fringe Benefits Expense	\$32,008,289	\$32,793,715	\$33,934,842
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$83,855,969	\$87,361,080	\$87,711,038
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$22,923,197	\$20,334,489	\$19,801,024
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$106,779,166	\$107,695,569	\$107,512,062

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
K.	Total Salary and Fringe Benefits Expense			
1	Total Salary Expense	\$155,568,636	\$161,674,913	\$164,393,305
2	Total Fringe Benefits Expense	\$42,526,853	\$37,632,053	\$37,112,270
3	Total Salary and Fringe Benefits Expense	\$198,095,489	\$199,306,966	\$201,505,575
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	497.2	522.0	534.0
2	Total Physician FTEs	130.3	134.0	135.0
3	Total Non-Nursing, Non-Physician FTEs	1429.1	1424.0	1450.0
4	Total Full Time Equivalent Employees (FTEs)	2,056.6	2,080.0	2,119.0
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$93,676	\$91,402	\$91,755
2	Nursing Fringe Benefits Expense per FTE	\$25,608	\$21,275	\$20,714
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$119,284	\$112,678	\$112,469
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$192,915	\$198,521	\$205,073
2	Physician Fringe Benefits Expense per FTE	\$52,736	\$46,208	\$46,296
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$245,651	\$244,729	\$251,369
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$58,677	\$61,349	\$60,490
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$16,040	\$14,280	\$13,656
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$74,718	\$75,629	\$74,146
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$75,644	\$77,728	\$77,581
2	Total Fringe Benefits Expense per FTE	\$20,678	\$18,092	\$17,514
3	Total Salary and Fringe Benefits Expense per FTE	\$96,322	\$95,821	\$95,095
Q.	Total Salary and Fringe Ben. Expense per Statistic			

MIDDLESEX HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2013				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	ACTUAL FY 2013
1	Total Salary and Fringe Benefits Expense per Patient Day	\$3,305	\$3,351	\$3,222
2	Total Salary and Fringe Benefits Expense per Discharge	\$14,298	\$14,077	\$13,290
3	Total Salary and Fringe Benefits Expense per EPD	\$1,515	\$1,518	\$1,522
4	Total Salary and Fringe Benefits Expense per ED	\$6,552	\$6,375	\$6,280
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,248	\$1,231	\$1,245
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,399	\$5,172	\$5,136