

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
I.	<b>ASSETS</b>				
A.	<b>Current Assets:</b>				
1	Cash and Cash Equivalents	\$404,540	\$1,665,016	\$1,260,476	312%
2	Short Term Investments	\$225,160	\$110,612	(\$114,548)	-51%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$12,293,728	\$9,618,035	(\$2,675,693)	-22%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$861,132	\$887,860	\$26,728	3%
8	Prepaid Expenses	\$613,086	\$1,216,823	\$603,737	98%
9	Other Current Assets	\$1,770,456	\$1,325,620	(\$444,836)	-25%
	<b>Total Current Assets</b>	<b>\$16,168,102</b>	<b>\$14,823,966</b>	<b>(\$1,344,136)</b>	<b>-8%</b>
B.	<b>Noncurrent Assets Whose Use is Limited:</b>				
1	Held by Trustee	\$761,871	\$894,273	\$132,402	17%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$919,295	\$1,685,728	\$766,433	83%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$1,681,166</b>	<b>\$2,580,001</b>	<b>\$898,835</b>	<b>53%</b>
5	Interest in Net Assets of Foundation	\$789,204	\$894,273	\$105,069	13%
6	Long Term Investments	\$12,311,143	\$3,482,913	(\$8,828,230)	-72%
7	Other Noncurrent Assets	\$3,692,913	\$4,434,466	\$741,553	20%
C.	<b>Net Fixed Assets:</b>				
1	Property, Plant and Equipment	\$72,359,288	\$50,192,655	(\$22,166,633)	-31%
2	Less: Accumulated Depreciation	\$48,777,136	\$28,032,185	(\$20,744,951)	-43%
	<b>Property, Plant and Equipment, Net</b>	<b>\$23,582,152</b>	<b>\$22,160,470</b>	<b>(\$1,421,682)</b>	<b>-6%</b>
3	Construction in Progress	\$0	\$0	\$0	0%
	<b>Total Net Fixed Assets</b>	<b>\$23,582,152</b>	<b>\$22,160,470</b>	<b>(\$1,421,682)</b>	<b>-6%</b>
	<b>Total Assets</b>	<b>\$58,224,680</b>	<b>\$48,376,089</b>	<b>(\$9,848,591)</b>	<b>-17%</b>
II.	<b>LIABILITIES AND NET ASSETS</b>				
A.	<b>Current Liabilities:</b>				
1	Accounts Payable and Accrued Expenses	\$4,350,123	\$5,318,753	\$968,630	22%
2	Salaries, Wages and Payroll Taxes	\$6,702,468	\$6,870,249	\$167,781	3%



<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
(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>
<b>A. <u>Operating Revenue:</u></b>					
1	Total Gross Patient Revenue	\$189,422,163	\$194,913,879	\$5,491,716	3%
2	Less: Allowances	\$104,777,915	\$117,910,482	\$13,132,567	13%
3	Less: Charity Care	\$192,533	\$643,601	\$451,068	234%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$84,451,715</b>	<b>\$76,359,796</b>	<b>(\$8,091,919)</b>	<b>-10%</b>
5	Provision for Bad Debts	\$0	\$6,456,481	\$6,456,481	0%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$84,451,715</b>	<b>\$69,903,315</b>	<b>(\$14,548,400)</b>	<b>-17%</b>
6	Other Operating Revenue	\$2,505,143	\$1,449,445	(\$1,055,698)	-42%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$86,956,858</b>	<b>\$71,352,760</b>	<b>(\$15,604,098)</b>	<b>-18%</b>
<b>B. <u>Operating Expenses:</u></b>					
1	Salaries and Wages	\$37,965,219	\$37,819,070	(\$146,149)	0%
2	Fringe Benefits	\$14,538,699	\$12,180,524	(\$2,358,175)	-16%
3	Physicians Fees	\$1,056,109	\$722,901	(\$333,208)	-32%
4	Supplies and Drugs	\$11,388,780	\$11,584,106	\$195,326	2%
5	Depreciation and Amortization	\$2,796,910	\$4,180,977	\$1,384,067	49%
6	Bad Debts	\$7,028,914	\$0	(\$7,028,914)	-100%
7	Interest Expense	\$102,151	\$34,936	(\$67,215)	-66%
8	Malpractice Insurance Cost	\$2,550,199	\$2,479,413	(\$70,786)	-3%
9	Other Operating Expenses	\$13,258,873	\$11,115,319	(\$2,143,554)	-16%
	<b>Total Operating Expenses</b>	<b>\$90,685,854</b>	<b>\$80,117,246</b>	<b>(\$10,568,608)</b>	<b>-12%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$3,728,996)</b>	<b>(\$8,764,486)</b>	<b>(\$5,035,490)</b>	<b>135%</b>
<b>C. <u>Non-Operating Revenue:</u></b>					
1	Income from Investments	\$1,939,024	\$324,629	(\$1,614,395)	-83%
2	Gifts, Contributions and Donations	\$740	\$300,669	\$299,929	40531%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$1,939,764</b>	<b>\$625,298</b>	<b>(\$1,314,466)</b>	<b>-68%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>(\$1,789,232)</b>	<b>(\$8,139,188)</b>	<b>(\$6,349,956)</b>	<b>355%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$3,465	(\$736,830)	(\$740,295)	-21365%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION</b>					
(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%
	<b>Total Other Adjustments</b>	<b>\$3,465</b>	<b>(\$736,830)</b>	<b>(\$740,295)</b>	<b>-21365%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>(\$1,785,767)</b>	<b>(\$8,876,018)</b>	<b>(\$7,090,251)</b>	<b>397%</b>
	Principal Payments	\$955,684	\$935,367	(\$20,317)	-2%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. GROSS REVENUE BY PAYER</b>					
<b>A. INPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$44,902,620	\$47,673,191	\$2,770,571	6%
2	MEDICARE MANAGED CARE	\$16,128,137	\$16,838,321	\$710,184	4%
3	MEDICAID	\$3,822,623	\$3,647,163	(\$175,460)	-5%
4	MEDICAID MANAGED CARE	\$1,628,161	\$1,577,197	(\$50,964)	-3%
5	CHAMPUS/TRICARE	\$27,348	\$174,774	\$147,426	539%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$27,710,776	\$26,124,829	(\$1,585,947)	-6%
8	WORKER'S COMPENSATION	\$564,577	\$750,068	\$185,491	33%
9	SELF- PAY/UNINSURED	\$1,735,686	\$1,363,537	(\$372,149)	-21%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$26,850	\$31,334	\$4,484	17%
	<b>TOTAL INPATIENT GROSS REVENUE</b>	<b>\$96,546,778</b>	<b>\$98,180,414</b>	<b>\$1,633,636</b>	<b>2%</b>
<b>B. OUTPATIENT GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$20,040,622	\$21,464,079	\$1,423,457	7%
2	MEDICARE MANAGED CARE	\$9,120,275	\$9,980,176	\$859,901	9%
3	MEDICAID	\$6,182,172	\$7,035,226	\$853,054	14%
4	MEDICAID MANAGED CARE	\$7,949,219	\$7,648,947	(\$300,272)	-4%
5	CHAMPUS/TRICARE	\$193,576	\$231,144	\$37,568	19%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$43,896,704	\$43,358,999	(\$537,705)	-1%
8	WORKER'S COMPENSATION	\$1,403,091	\$1,308,198	(\$94,893)	-7%
9	SELF- PAY/UNINSURED	\$3,892,808	\$5,507,937	\$1,615,129	41%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$196,919	\$198,761	\$1,842	1%
	<b>TOTAL OUTPATIENT GROSS REVENUE</b>	<b>\$92,875,386</b>	<b>\$96,733,467</b>	<b>\$3,858,081</b>	<b>4%</b>
<b>C. TOTAL GROSS REVENUE</b>					
1	MEDICARE TRADITIONAL	\$64,943,242	\$69,137,270	\$4,194,028	6%
2	MEDICARE MANAGED CARE	\$25,248,412	\$26,818,497	\$1,570,085	6%
3	MEDICAID	\$10,004,795	\$10,682,389	\$677,594	7%
4	MEDICAID MANAGED CARE	\$9,577,380	\$9,226,144	(\$351,236)	-4%
5	CHAMPUS/TRICARE	\$220,924	\$405,918	\$184,994	84%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$71,607,480	\$69,483,828	(\$2,123,652)	-3%
8	WORKER'S COMPENSATION	\$1,967,668	\$2,058,266	\$90,598	5%
9	SELF- PAY/UNINSURED	\$5,628,494	\$6,871,474	\$1,242,980	22%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$223,769	\$230,095	\$6,326	3%
	<b>TOTAL GROSS REVENUE</b>	<b>\$189,422,164</b>	<b>\$194,913,881</b>	<b>\$5,491,717</b>	<b>3%</b>
<b>II. NET REVENUE BY PAYER</b>					
<b>A. INPATIENT NET REVENUE</b>					
1	MEDICARE TRADITIONAL	\$16,439,612	\$15,052,562	(\$1,387,050)	-8%
2	MEDICARE MANAGED CARE	\$5,332,698	\$5,574,685	\$241,987	5%
3	MEDICAID	\$665,727	\$671,541	\$5,814	1%
4	MEDICAID MANAGED CARE	\$540,759	\$497,232	(\$43,527)	-8%
5	CHAMPUS/TRICARE	\$9,678	\$63,596	\$53,918	557%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
7	NON-GOVERNMENT MANAGED CARE	\$12,033,028	\$11,944,841	(\$88,187)	-1%
8	WORKER'S COMPENSATION	\$361,869	\$486,206	\$124,337	34%
9	SELF- PAY/UNINSURED	\$77,021	\$14,362	(\$62,659)	-81%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$6,495	\$6,064	(\$431)	-7%
	<b>TOTAL INPATIENT NET REVENUE</b>	<b>\$35,466,887</b>	<b>\$34,311,089</b>	<b>(\$1,155,798)</b>	<b>-3%</b>
<b>B.</b>	<b><u>OUTPATIENT NET REVENUE</u></b>				
1	MEDICARE TRADITIONAL	\$5,296,162	\$5,059,853	(\$236,309)	-4%
2	MEDICARE MANAGED CARE	\$2,564,344	\$2,443,172	(\$121,172)	-5%
3	MEDICAID	\$1,750,530	\$1,930,487	\$179,957	10%
4	MEDICAID MANAGED CARE	\$2,220,479	\$2,091,032	(\$129,447)	-6%
5	CHAMPUS/TRICARE	\$61,535	\$61,532	(\$3)	0%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$21,874,014	\$20,591,132	(\$1,282,882)	-6%
8	WORKER'S COMPENSATION	\$985,060	\$999,404	\$14,344	1%
9	SELF- PAY/UNINSURED	\$172,743	\$63,231	(\$109,512)	-63%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$47,480	\$37,428	(\$10,052)	-21%
	<b>TOTAL OUTPATIENT NET REVENUE</b>	<b>\$34,972,347</b>	<b>\$33,277,271</b>	<b>(\$1,695,076)</b>	<b>-5%</b>
<b>C.</b>	<b><u>TOTAL NET REVENUE</u></b>				
1	<b>MEDICARE TRADITIONAL</b>	<b>\$21,735,774</b>	<b>\$20,112,415</b>	<b>(\$1,623,359)</b>	<b>-7%</b>
2	<b>MEDICARE MANAGED CARE</b>	<b>\$7,897,042</b>	<b>\$8,017,857</b>	<b>\$120,815</b>	<b>2%</b>
3	<b>MEDICAID</b>	<b>\$2,416,257</b>	<b>\$2,602,028</b>	<b>\$185,771</b>	<b>8%</b>
4	<b>MEDICAID MANAGED CARE</b>	<b>\$2,761,238</b>	<b>\$2,588,264</b>	<b>(\$172,974)</b>	<b>-6%</b>
5	<b>CHAMPUS/TRICARE</b>	<b>\$71,213</b>	<b>\$125,128</b>	<b>\$53,915</b>	<b>76%</b>
6	<b>COMMERCIAL INSURANCE</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
7	<b>NON-GOVERNMENT MANAGED CARE</b>	<b>\$33,907,042</b>	<b>\$32,535,973</b>	<b>(\$1,371,069)</b>	<b>-4%</b>
8	<b>WORKER'S COMPENSATION</b>	<b>\$1,346,929</b>	<b>\$1,485,610</b>	<b>\$138,681</b>	<b>10%</b>
9	<b>SELF- PAY/UNINSURED</b>	<b>\$249,764</b>	<b>\$77,593</b>	<b>(\$172,171)</b>	<b>-69%</b>
10	<b>SAGA</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
11	<b>OTHER</b>	<b>\$53,975</b>	<b>\$43,492</b>	<b>(\$10,483)</b>	<b>-19%</b>
	<b>TOTAL NET REVENUE</b>	<b>\$70,439,234</b>	<b>\$67,588,360</b>	<b>(\$2,850,874)</b>	<b>-4%</b>
<b>III.</b>	<b><u>STATISTICS BY PAYER</u></b>				
<b>A.</b>	<b><u>DISCHARGES</u></b>				
1	MEDICARE TRADITIONAL	1,444	1,474	30	2%
2	MEDICARE MANAGED CARE	542	537	(5)	-1%
3	MEDICAID	190	143	(47)	-25%
4	MEDICAID MANAGED CARE	159	115	(44)	-28%
5	CHAMPUS/TRICARE	3	10	7	233%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	1,162	1,000	(162)	-14%
8	WORKER'S COMPENSATION	15	18	3	20%
9	SELF- PAY/UNINSURED	63	50	(13)	-21%
10	SAGA	0	0	0	0%
11	OTHER	2	1	(1)	-50%
	<b>TOTAL DISCHARGES</b>	<b>3,580</b>	<b>3,348</b>	<b>(232)</b>	<b>-6%</b>
<b>B.</b>	<b><u>PATIENT DAYS</u></b>				
1	MEDICARE TRADITIONAL	6,760	6,826	66	1%
2	MEDICARE MANAGED CARE	2,438	2,376	(62)	-3%
3	MEDICAID	813	568	(245)	-30%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
4	MEDICAID MANAGED CARE	434	343	(91)	-21%
5	CHAMPUS/TRICARE	9	27	18	200%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	3,989	3,236	(753)	-19%
8	WORKER'S COMPENSATION	56	46	(10)	-18%
9	SELF- PAY/UNINSURED	252	175	(77)	-31%
10	SAGA	0	0	0	0%
11	OTHER	5	6	1	20%
	<b>TOTAL PATIENT DAYS</b>	<b>14,756</b>	<b>13,603</b>	<b>(1,153)</b>	<b>-8%</b>
<b>C.</b>	<b>OUTPATIENT VISITS</b>				
1	MEDICARE TRADITIONAL	8,336	8,518	182	2%
2	MEDICARE MANAGED CARE	4,069	4,510	441	11%
3	MEDICAID	3,824	4,071	247	6%
4	MEDICAID MANAGED CARE	6,754	5,948	(806)	-12%
5	CHAMPUS/TRICARE	149	166	17	11%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	30,248	28,673	(1,575)	-5%
8	WORKER'S COMPENSATION	961	935	(26)	-3%
9	SELF- PAY/UNINSURED	2,887	2,717	(170)	-6%
10	SAGA	0	0	0	0%
11	OTHER	124	124	0	0%
	<b>TOTAL OUTPATIENT VISITS</b>	<b>57,352</b>	<b>55,662</b>	<b>(1,690)</b>	<b>-3%</b>
<b>IV.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT BY PAYER</b>				
<b>A.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>				
1	MEDICARE TRADITIONAL	\$7,293,771	\$7,991,432	\$697,661	10%
2	MEDICARE MANAGED CARE	\$2,920,343	\$3,220,674	\$300,331	10%
3	MEDICAID	\$4,447,121	\$1,342,068	(\$3,105,053)	-70%
4	MEDICAID MANAGED CARE	\$5,705,539	\$5,940,933	\$235,394	4%
5	CHAMPUS/TRICARE	\$135,312	\$153,712	\$18,400	14%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$18,118,342	\$23,249,455	\$5,131,113	28%
8	WORKER'S COMPENSATION	\$838,666	\$953,677	\$115,011	14%
9	SELF- PAY/UNINSURED	\$3,333,640	\$3,507,216	\$173,576	5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$130,545	\$151,918	\$21,373	16%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE</b>	<b>\$42,923,279</b>	<b>\$46,511,085</b>	<b>\$3,587,806</b>	<b>8%</b>
<b>B.</b>	<b>EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>				
1	MEDICARE TRADITIONAL	\$1,757,514	\$1,880,370	\$122,856	7%
2	MEDICARE MANAGED CARE	\$767,921	\$769,435	\$1,514	0%
3	MEDICAID	\$1,104,837	\$1,342,068	\$237,231	21%
4	MEDICAID MANAGED CARE	\$1,532,956	\$4,340,423	\$2,807,467	183%
5	CHAMPUS/TRICARE	\$42,700	\$51,003	\$8,303	19%
6	COMMERCIAL INSURANCE	\$0	\$0	\$0	0%
7	NON-GOVERNMENT MANAGED CARE	\$9,335,602	\$10,254,347	\$918,745	10%
8	WORKER'S COMPENSATION	\$608,828	\$676,606	\$67,778	11%
9	SELF- PAY/UNINSURED	\$213,529	\$744,309	\$530,780	249%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$26,560	\$46,915	\$20,355	77%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE</b>	<b>\$15,390,447</b>	<b>\$20,105,476</b>	<b>\$4,715,029</b>	<b>31%</b>
<b>C.</b>	<b><u>EMERGENCY DEPARTMENT OUTPATIENT VISITS</u></b>				
1	MEDICARE TRADITIONAL	4,007	4,050	43	1%
2	MEDICARE MANAGED CARE	1,520	1,532	12	1%
3	MEDICAID	3,196	3,216	20	1%
4	MEDICAID MANAGED CARE	5,205	4,944	(261)	-5%
5	CHAMPUS/TRICARE	122	119	(3)	-2%
6	COMMERCIAL INSURANCE	0	0	0	0%
7	NON-GOVERNMENT MANAGED CARE	15,761	14,791	(970)	-6%
8	WORKER'S COMPENSATION	845	896	51	6%
9	SELF- PAY/UNINSURED	2,656	2,508	(148)	-6%
10	SAGA	0	0	0	0%
11	OTHER	115	119	4	3%
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>33,427</b>	<b>32,175</b>	<b>(1,252)</b>	<b>-4%</b>

**MILFORD 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
<b>I. OPERATING EXPENSE BY CATEGORY</b>					
<b>A. Salaries &amp; Wages:</b>					
1	Nursing Salaries	\$16,612,248	\$16,446,079	(\$166,169)	-1%
2	Physician Salaries	\$5,506,935	\$5,633,239	\$126,304	2%
3	Non-Nursing, Non-Physician Salaries	\$15,846,036	\$15,739,752	(\$106,284)	-1%
	<b>Total Salaries &amp; Wages</b>	<b>\$37,965,219</b>	<b>\$37,819,070</b>	<b>(\$146,149)</b>	<b>0%</b>
<b>B. Fringe Benefits:</b>					
1	Nursing Fringe Benefits	\$6,871,624	\$5,577,143	(\$1,294,481)	-19%
2	Physician Fringe Benefits	\$771,654	\$695,961	(\$75,693)	-10%
3	Non-Nursing, Non-Physician Fringe Benefits	\$6,895,421	\$5,907,420	(\$988,001)	-14%
	<b>Total Fringe Benefits</b>	<b>\$14,538,699</b>	<b>\$12,180,524</b>	<b>(\$2,358,175)</b>	<b>-16%</b>
<b>C. Contractual Labor Fees:</b>					
1	Nursing Fees	\$149,330	\$279,055	\$129,725	87%
2	Physician Fees	\$1,056,109	\$722,901	(\$333,208)	-32%
3	Non-Nursing, Non-Physician Fees	\$0	\$0	\$0	0%
	<b>Total Contractual Labor Fees</b>	<b>\$1,205,439</b>	<b>\$1,001,956</b>	<b>(\$203,483)</b>	<b>-17%</b>
<b>D. Medical Supplies and Pharmaceutical Cost:</b>					
1	Medical Supplies	\$9,629,635	\$9,894,485	\$264,850	3%
2	Pharmaceutical Costs	\$1,759,145	\$1,689,621	(\$69,524)	-4%
	<b>Total Medical Supplies and Pharmaceutical Cost</b>	<b>\$11,388,780</b>	<b>\$11,584,106</b>	<b>\$195,326</b>	<b>2%</b>
<b>E. Depreciation and Amortization:</b>					
1	Depreciation-Building	\$1,391,027	\$2,686,630	\$1,295,603	93%
2	Depreciation-Equipment	\$1,396,357	\$1,484,821	\$88,464	6%
3	Amortization	\$9,526	\$9,526	\$0	0%
	<b>Total Depreciation and Amortization</b>	<b>\$2,796,910</b>	<b>\$4,180,977</b>	<b>\$1,384,067</b>	<b>49%</b>
<b>F. Bad Debts:</b>					
1	Bad Debts	\$7,028,914	\$0	(\$7,028,914)	-100%
<b>G. Interest Expense:</b>					
1	Interest Expense	\$102,151	\$34,936	(\$67,215)	-66%
<b>H. Malpractice Insurance Cost:</b>					
1	Malpractice Insurance Cost	\$2,550,199	\$2,479,413	(\$70,786)	-3%
<b>I. Utilities:</b>					
1	Water	\$92,807	\$84,975	(\$7,832)	-8%
2	Natural Gas	\$437,281	\$533,634	\$96,353	22%
3	Oil	\$29,179	\$34,489	\$5,310	18%
4	Electricity	\$1,031,851	\$1,083,168	\$51,317	5%
5	Telephone	\$66,168	\$78,530	\$12,362	19%
6	Other Utilities	\$54,153	\$53,913	(\$240)	0%
	<b>Total Utilities</b>	<b>\$1,711,439</b>	<b>\$1,868,709</b>	<b>\$157,270</b>	<b>9%</b>
<b>J. Business Expenses:</b>					
1	Accounting Fees	\$153,779	\$138,117	(\$15,662)	-10%
2	Legal Fees	\$190,551	\$372,467	\$181,916	95%
3	Consulting Fees	\$280,441	\$167,762	(\$112,679)	-40%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
4	Dues and Membership	\$215,685	\$229,641	\$13,956	6%
5	Equipment Leases	\$172,126	\$107,385	(\$64,741)	-38%
6	Building Leases	\$138,974	\$142,371	\$3,397	2%
7	Repairs and Maintenance	\$431,561	\$232,040	(\$199,521)	-46%
8	Insurance	\$100,291	\$117,407	\$17,116	17%
9	Travel	\$24,478	\$26,472	\$1,994	8%
10	Conferences	\$18,152	\$33,782	\$15,630	86%
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$1,209,912	\$650,726	(\$559,186)	-46%
13	Licenses and Subscriptions	\$145,572	\$152,014	\$6,442	4%
14	Postage and Shipping	\$32,635	\$48,402	\$15,767	48%
15	Advertising	\$178,555	\$126,444	(\$52,111)	-29%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$0	\$0	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$808,944	\$632,006	(\$176,938)	-22%
20	Lab Fees / Red Cross charges	\$872,090	\$777,655	(\$94,435)	-11%
21	Billing & Collection / Bank Fees	\$378,200	\$434,524	\$56,324	15%
22	Recruiting / Employee Education & Recognition	\$59,938	\$0	(\$59,938)	-100%
23	Laundry / Linen	\$311,748	\$286,339	(\$25,409)	-8%
24	Professional / Physician Fees	\$126,266	\$587,547	\$461,281	365%
25	Waste disposal	\$37,636	\$27,223	(\$10,413)	-28%
26	Purchased Services - Medical	\$785,536	\$733,755	(\$51,781)	-7%
27	Purchased Services - Non Medical	\$769,230	\$811,969	\$42,739	6%
28	Other Business Expenses	\$2,688,889	\$421,817	(\$2,267,072)	-84%
	<b>Total Business Expenses</b>	<b>\$10,131,189</b>	<b>\$7,257,865</b>	<b>(\$2,873,324)</b>	<b>-28%</b>
<b>K.</b>	<b>Other Operating Expense:</b>				
1	Miscellaneous Other Operating Expenses	\$1,266,915	\$1,709,690	\$442,775	35%
	<b>Total Operating Expenses - All Expense Categories*</b>	<b>\$90,685,854</b>	<b>\$80,117,246</b>	<b>(\$10,568,608)</b>	<b>-12%</b>
*A.-K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150					
<b>II. OPERATING EXPENSE BY DEPARTMENT</b>					
<b>A.</b>	<b>General Services:</b>				
1	General Administration	\$4,662,384	\$4,647,379	(\$15,005)	0%
2	General Accounting	\$678,395	\$666,700	(\$11,695)	-2%
3	Patient Billing & Collection	\$1,613,808	\$1,527,966	(\$85,842)	-5%
4	Admitting / Registration Office	\$678,806	\$628,133	(\$50,673)	-7%
5	Data Processing	\$2,042,452	\$1,919,935	(\$122,517)	-6%
6	Communications	\$372,752	\$437,632	\$64,880	17%
7	Personnel	\$409,348	\$362,818	(\$46,530)	-11%
8	Public Relations	\$171,224	\$179,801	\$8,577	5%
9	Purchasing	\$249,324	\$232,864	(\$16,460)	-7%
10	Dietary and Cafeteria	\$1,813,820	\$1,642,128	(\$171,692)	-9%
11	Housekeeping	\$1,157,547	\$1,171,432	\$13,885	1%
12	Laundry & Linen	\$28,518	\$61,624	\$33,106	116%
13	Operation of Plant	\$3,494,126	\$3,466,032	(\$28,094)	-1%
14	Security	\$234,339	\$234,512	\$173	0%
15	Repairs and Maintenance	\$795,805	\$795,600	(\$205)	0%
16	Central Sterile Supply	\$403,320	\$418,352	\$15,032	4%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
17	Pharmacy Department	\$2,621,443	\$2,573,605	(\$47,838)	-2%
18	Other General Services	\$18,479,412	\$4,315,319	(\$14,164,093)	-77%
	<b>Total General Services</b>	<b>\$39,906,823</b>	<b>\$25,281,832</b>	<b>(\$14,624,991)</b>	<b>-37%</b>
	<b>B. Professional Services:</b>				
1	Medical Care Administration	\$710,555	\$620,294	(\$90,261)	-13%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,866,682	\$1,260,371	(\$606,311)	-32%
4	Medical Records	\$885,186	\$895,689	\$10,503	1%
5	Social Service	\$282,309	\$256,505	(\$25,804)	-9%
6	Other Professional Services	\$0	\$0	\$0	0%
	<b>Total Professional Services</b>	<b>\$3,744,732</b>	<b>\$3,032,859</b>	<b>(\$711,873)</b>	<b>-19%</b>
	<b>C. Special Services:</b>				
1	Operating Room	\$1,940,094	\$2,208,844	\$268,750	14%
2	Recovery Room	\$439,725	\$477,572	\$37,847	9%
3	Anesthesiology	\$87,278	\$103,757	\$16,479	19%
4	Delivery Room	\$180,697	\$211,343	\$30,646	17%
5	Diagnostic Radiology	\$2,672,857	\$2,728,421	\$55,564	2%
6	Diagnostic Ultrasound	\$483,374	\$477,111	(\$6,263)	-1%
7	Radiation Therapy	\$0	\$0	\$0	0%
8	Radioisotopes	\$0	\$0	\$0	0%
9	CT Scan	\$636,616	\$638,756	\$2,140	0%
10	Laboratory	\$4,282,224	\$4,083,838	(\$198,386)	-5%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$0	\$0	\$0	0%
13	Electrocardiology	\$112,481	\$98,161	(\$14,320)	-13%
14	Electroencephalography	\$15,653	\$15,092	(\$561)	-4%
15	Occupational Therapy	\$62,578	\$53,472	(\$9,106)	-15%
16	Speech Pathology	\$33,170	\$41,307	\$8,137	25%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$941,133	\$1,002,450	\$61,317	7%
19	Pulmonary Function	\$98,606	\$101,010	\$2,404	2%
20	Intravenous Therapy	\$282,295	\$280,915	(\$1,380)	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$134,383	\$167,535	\$33,152	25%
24	Emergency Room	\$7,107,841	\$7,748,021	\$640,180	9%
25	MRI	\$395,953	\$413,312	\$17,359	4%
26	PET Scan	\$80,882	\$68,476	(\$12,406)	-15%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$629,218	\$454,384	(\$174,834)	-28%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$543,896	\$606,802	\$62,906	12%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$15,633,995	\$17,616,783	\$1,982,788	13%
	<b>Total Special Services</b>	<b>\$36,794,949</b>	<b>\$39,597,362</b>	<b>\$2,802,413</b>	<b>8%</b>
	<b>D. Routine Services:</b>				
1	Medical & Surgical Units	\$5,826,172	\$7,597,640	\$1,771,468	30%
2	Intensive Care Unit	\$2,129,499	\$2,083,907	(\$45,592)	-2%
3	Coronary Care Unit	\$0	\$0	\$0	0%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
4	Psychiatric Unit	\$0	\$0	\$0	0%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$867,344	\$974,021	\$106,677	12%
7	Newborn Nursery Unit	\$867,344	\$974,021	\$106,677	12%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$548,991	\$575,604	\$26,613	5%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$0	\$0	\$0	0%
13	Other Routine Services	\$0	\$0	\$0	0%
	<b>Total Routine Services</b>	<b>\$10,239,350</b>	<b>\$12,205,193</b>	<b>\$1,965,843</b>	<b>19%</b>
<b>E.</b>	<b>Other Departments:</b>				
1	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	<b>Total Operating Expenses - All Departments*</b>	<b>\$90,685,854</b>	<b>\$80,117,246</b>	<b>(\$10,568,608)</b>	<b>-12%</b>
<b>*A.- E. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.</b>					

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
<b>A. <u>Statement of Operations Summary</u></b>				
1	Total Net Patient Revenue	\$79,860,535	\$84,451,715	\$69,903,315
2	Other Operating Revenue	653,094	2,505,143	1,449,445
3	Total Operating Revenue	\$80,513,629	\$86,956,858	\$71,352,760
4	Total Operating Expenses	85,587,522	90,685,854	80,117,246
5	Income/(Loss) From Operations	(\$5,073,893)	(\$3,728,996)	(\$8,764,486)
6	Total Non-Operating Revenue	(333,921)	1,943,229	(111,532)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$5,407,814)	(\$1,785,767)	(\$8,876,018)
<b>B. <u>Profitability Summary</u></b>				
1	Hospital Operating Margin	-6.33%	-4.19%	-12.30%
2	Hospital Non Operating Margin	-0.42%	2.19%	-0.16%
3	Hospital Total Margin	-6.74%	-2.01%	-12.46%
4	Income/(Loss) From Operations	(\$5,073,893)	(\$3,728,996)	(\$8,764,486)
5	Total Operating Revenue	\$80,513,629	\$86,956,858	\$71,352,760
6	Total Non-Operating Revenue	(\$333,921)	\$1,943,229	(\$111,532)
7	Total Revenue	\$80,179,708	\$88,900,087	\$71,241,228
8	Excess/(Deficiency) of Revenue Over Expenses	(\$5,407,814)	(\$1,785,767)	(\$8,876,018)
<b>C. <u>Net Assets Summary</u></b>				
1	Hospital Unrestricted Net Assets	\$14,195,295	\$5,927,259	\$7,157,824
2	Hospital Total Net Assets	\$15,495,219	\$7,270,463	\$8,606,097
3	Hospital Change in Total Net Assets	(\$11,316,755)	(\$8,224,756)	\$1,335,634
4	Hospital Change in Total Net Assets %	57.8%	-53.1%	18.4%
<b>D. <u>Cost Data Summary</u></b>				
1	<b>Ratio of Cost to Charges</b>	<b>0.46</b>	<b>0.47</b>	<b>0.41</b>
2	Total Operating Expenses	\$85,587,522	\$90,685,854	\$80,117,246
3	Total Gross Revenue	\$184,109,980	\$189,422,164	\$194,913,881
4	Total Other Operating Revenue	\$653,094	\$2,505,143	\$1,449,445

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
<b>5</b>	<b><u>Private Payment to Cost Ratio</u></b>	<b>1.01</b>	<b>1.01</b>	<b>1.17</b>
6	Total Non-Government Payments	\$34,751,121	\$35,503,735	\$34,099,176
7	Total Uninsured Payments	\$281,013	\$249,764	\$77,593
8	Total Non-Government Charges	\$79,168,686	\$79,203,642	\$78,413,568
9	Total Uninsured Charges	\$5,558,813	\$5,628,494	\$6,871,474
<b>10</b>	<b><u>Medicare Payment to Cost Ratio</u></b>	<b>0.75</b>	<b>0.70</b>	<b>0.72</b>
11	Total Medicare Payments	\$29,188,273	\$29,632,816	\$28,130,272
12	Total Medicare Charges	\$84,565,457	\$90,191,654	\$95,955,767
<b>13</b>	<b><u>Medicaid Payment to Cost Ratio</u></b>	<b>0.56</b>	<b>0.56</b>	<b>0.64</b>
14	Total Medicaid Payments	\$5,189,560	\$5,177,495	\$5,190,292
15	Total Medicaid Charges	\$19,912,567	\$19,582,175	\$19,908,533
<b>16</b>	<b><u>Uncompensated Care Cost</u></b>	<b>\$3,612,969</b>	<b>\$3,412,141</b>	<b>\$2,896,870</b>
17	Charity Care	\$187,766	\$192,533	\$643,601
18	Bad Debts	\$7,611,773	\$7,028,914	\$6,456,481
19	Total Uncompensated Care	\$7,799,539	\$7,221,447	\$7,100,082
<b>20</b>	<b><u>Uncompensated Care % of Total Expenses</u></b>	<b>4.2%</b>	<b>3.8%</b>	<b>3.6%</b>
21	Total Operating Expenses	\$85,587,522	\$90,685,854	\$80,117,246
<b>E.</b>	<b><u>Liquidity Measures Summary</u></b>			
<b>1</b>	<b><u>Current Ratio</u></b>	<b>1</b>	<b>1</b>	<b>1</b>
2	Total Current Assets	\$16,721,077	\$16,168,102	\$14,823,966
3	Total Current Liabilities	\$16,180,983	\$16,194,450	\$16,587,370
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>5</b>	<b>3</b>	<b>9</b>
5	Cash and Cash Equivalents	\$956,229	\$404,540	\$1,665,016
6	Short Term Investments	224,305	225,160	110,612

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
7	Total Cash and Short Term Investments	\$1,180,534	\$629,700	\$1,775,628
8	Total Operating Expenses	\$85,587,522	\$90,685,854	\$80,117,246
9	Depreciation Expense	\$3,208,305	\$2,796,910	\$4,180,977
10	Operating Expenses less Depreciation Expense	\$82,379,217	\$87,888,944	\$75,936,269
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>48</b>	<b>49</b>	<b>41</b>
12	Net Patient Accounts Receivable	\$12,622,341	\$12,293,728	\$9,618,035
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$2,024,212	\$895,803	\$1,691,606
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$10,598,129	\$11,397,925	\$7,926,429
16	Total Net Patient Revenue	\$79,860,535	\$84,451,715	\$69,903,315
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>72</b>	<b>67</b>	<b>80</b>
18	Total Current Liabilities	\$16,180,983	\$16,194,450	\$16,587,370
19	Total Operating Expenses	\$85,587,522	\$90,685,854	\$80,117,246
20	Depreciation Expense	\$3,208,305	\$2,796,910	\$4,180,977
21	Total Operating Expenses less Depreciation Expense	\$82,379,217	\$87,888,944	\$75,936,269
<b>F.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>24.0</b>	<b>12.5</b>	<b>17.8</b>
2	Total Net Assets	\$15,495,219	\$7,270,463	\$8,606,097
3	Total Assets	\$64,583,356	\$58,224,680	\$48,376,089
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>(12.9)</b>	<b>6.2</b>	<b>(28.3)</b>
5	Excess/(Deficiency) of Revenues Over Expenses	(\$5,407,814)	(\$1,785,767)	(\$8,876,018)
6	Depreciation Expense	\$3,208,305	\$2,796,910	\$4,180,977
7	Excess of Revenues Over Expenses and Depreciation Expense	(\$2,199,509)	\$1,011,143	(\$4,695,041)
8	Total Current Liabilities	\$16,180,983	\$16,194,450	\$16,587,370
9	Total Long Term Debt	\$935,367	\$0	\$0
10	Total Current Liabilities and Total Long Term Debt	\$17,116,350	\$16,194,450	\$16,587,370

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>5.7</b>	-	-
12	Total Long Term Debt	\$935,367	\$0	\$0
13	Total Net Assets	\$15,495,219	\$7,270,463	\$8,606,097
14	Total Long Term Debt and Total Net Assets	\$16,430,586	\$7,270,463	\$8,606,097
<b>15</b>	<b><u>Debt Service Coverage Ratio</u></b>	<b>(1.9)</b>	<b>1.1</b>	<b>(4.8)</b>
16	Excess Revenues over Expenses	(5,407,814)	(\$1,785,767)	(\$8,876,018)
17	Interest Expense	168,405	\$102,151	\$34,936
18	Depreciation and Amortization Expense	3,208,305	\$2,796,910	\$4,180,977
19	Principal Payments	892,497	\$955,684	\$935,367
<b>G.</b>	<b><u>Other Financial Ratios</u></b>			
<b>20</b>	<b><u>Average Age of Plant</u></b>	<b>14.8</b>	<b>17.4</b>	<b>6.7</b>
21	Accumulated Depreciation	47,323,119	48,777,136	28,032,185
22	Depreciation and Amortization Expense	3,208,305	2,796,910	4,180,977
<b>H.</b>	<b><u>Utilization Measures Summary</u></b>			
1	Patient Days	17,312	14,756	13,603
2	Discharges	4,374	3,580	3,348
3	ALOS	4.0	4.1	4.1
4	Staffed Beds	49	47	46
5	Available Beds	-	118	118
6	Licensed Beds	118	118	118
7	Occupancy of Staffed Beds	96.8%	86.0%	81.0%
8	Occupancy of Available Beds	40.2%	34.3%	31.6%
9	Full Time Equivalent Employees	505.0	507.0	498.6
<b>I.</b>	<b><u>Hospital Gross Revenue Payer Mix Percentage</u></b>			
1	Non-Government Gross Revenue Payer Mix Percentage	40.0%	38.8%	36.7%
2	Medicare Gross Revenue Payer Mix Percentage	45.9%	47.6%	49.2%

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
(1)	(2)	(3)	(4)	(5)
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
3	Medicaid Gross Revenue Payer Mix Percentage	10.8%	10.3%	10.2%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
5	Uninsured Gross Revenue Payer Mix Percentage	3.0%	3.0%	3.5%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$73,609,873	\$73,575,148	\$71,542,094
9	Medicare Gross Revenue (Charges)	\$84,565,457	\$90,191,654	\$95,955,767
10	Medicaid Gross Revenue (Charges)	\$19,912,567	\$19,582,175	\$19,908,533
11	Other Medical Assistance Gross Revenue (Charges)	\$138,619	\$223,769	\$230,095
12	Uninsured Gross Revenue (Charges)	\$5,558,813	\$5,628,494	\$6,871,474
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$324,651	\$220,924	\$405,918
14	Total Gross Revenue (Charges)	\$184,109,980	\$189,422,164	\$194,913,881
<b>J.</b>	<b>Hospital Net Revenue Payer Mix Percentage</b>			
1	Non-Government Net Revenue Payer Mix Percentage	49.7%	50.0%	50.3%
2	Medicare Net Revenue Payer Mix Percentage	42.1%	42.1%	41.6%
3	Medicaid Net Revenue Payer Mix Percentage	7.5%	7.4%	7.7%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
5	Uninsured Net Revenue Payer Mix Percentage	0.4%	0.4%	0.1%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.1%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$34,470,108	\$35,253,971	\$34,021,583
9	Medicare Net Revenue (Payments)	\$29,188,273	\$29,632,816	\$28,130,272
10	Medicaid Net Revenue (Payments)	\$5,189,560	\$5,177,495	\$5,190,292
11	Other Medical Assistance Net Revenue (Payments)	\$85,777	\$53,975	\$43,491
12	Uninsured Net Revenue (Payments)	\$281,013	\$249,764	\$77,593
13	CHAMPUS / TRICARE Net Revenue Payments)	\$130,497	\$71,213	\$125,128
14	Total Net Revenue (Payments)	\$69,345,228	\$70,439,234	\$67,588,359
<b>K.</b>	<b>Discharges</b>			
1	Non-Government (Including Self Pay / Uninsured)	1,797	1,240	1,068
2	Medicare	2,050	1,986	2,011
3	Medical Assistance	519	351	259
4	Medicaid	517	349	258
5	Other Medical Assistance	2	2	1
6	CHAMPUS / TRICARE	8	3	10

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
7	Uninsured (Included In Non-Government)	78	63	50
8	Total	4,374	3,580	3,348
<b>L. Case Mix Index</b>				
1	Non-Government (Including Self Pay / Uninsured)	1.15166	1.33260	1.34430
2	Medicare	1.51910	1.48819	1.47660
3	Medical Assistance	0.94979	0.96735	1.20935
4	Medicaid	0.95100	0.96408	1.20690
5	Other Medical Assistance	0.63690	1.53870	1.84180
6	CHAMPUS / TRICARE	0.89710	0.57980	1.26520
7	Uninsured (Included In Non-Government)	1.27610	1.32154	0.94562
8	Total Case Mix Index	1.29945	1.38247	1.41309
<b>M. Emergency Department Visits</b>				
1	Emergency Room - Treated and Admitted	3,152	3,025	3,065
2	Emergency Room - Treated and Discharged	34,292	33,427	32,175
3	Total Emergency Room Visits	37,444	36,452	35,240

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICARE MANAGED CARE</b>					
<b>A. ANTHEM - MEDICARE BLUE CONNECTICUT</b>					
1	Inpatient Charges	\$1,244,014	\$1,080,277	(\$163,737)	-13%
2	Inpatient Payments	\$464,782	\$375,784	(\$88,998)	-19%
3	Outpatient Charges	\$875,511	\$448,970	(\$426,541)	-49%
4	Outpatient Payments	\$288,889	\$129,613	(\$159,276)	-55%
5	Discharges	48	22	(26)	-54%
6	Patient Days	173	130	(43)	-25%
7	Outpatient Visits (Excludes ED Visits)	219	117	(102)	-47%
8	Emergency Department Outpatient Visits	146	55	(91)	-62%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$2,119,525</b>	<b>\$1,529,247</b>	<b>(\$590,278)</b>	<b>-28%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$753,671</b>	<b>\$505,397</b>	<b>(\$248,274)</b>	<b>-33%</b>
<b>B. CIGNA HEALTHCARE</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>C. CONNECTICARE, INC.</b>					
1	Inpatient Charges	\$3,598,093	\$4,759,867	\$1,161,774	32%
2	Inpatient Payments	\$1,237,330	\$1,654,060	\$416,730	34%
3	Outpatient Charges	\$2,556,394	\$2,848,838	\$292,444	11%
4	Outpatient Payments	\$736,258	\$752,826	\$16,568	2%
5	Discharges	123	157	34	28%
6	Patient Days	501	624	123	25%
7	Outpatient Visits (Excludes ED Visits)	612	621	9	1%
8	Emergency Department Outpatient Visits	381	423	42	11%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$6,154,487</b>	<b>\$7,608,705</b>	<b>\$1,454,218</b>	<b>24%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$1,973,588</b>	<b>\$2,406,886</b>	<b>\$433,298</b>	<b>22%</b>
<b>D. HEALTHNET OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>E. OTHER MEDICARE MANAGED CARE</b>					
1	Inpatient Charges	\$212,774	\$11,462	(\$201,312)	-95%
2	Inpatient Payments	\$80,064	\$7,357	(\$72,707)	-91%
3	Outpatient Charges	\$174,895	\$9,253	(\$165,642)	-95%
4	Outpatient Payments	\$46,088	\$1,984	(\$44,104)	-96%
5	Discharges	7	1	(6)	-86%
6	Patient Days	30	1	(29)	-97%
7	Outpatient Visits (Excludes ED Visits)	21	0	(21)	-100%
8	Emergency Department Outpatient Visits	33	6	(27)	-82%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$387,669</b>	<b>\$20,715</b>	<b>(\$366,954)</b>	<b>-95%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$126,152</b>	<b>\$9,341</b>	<b>(\$116,811)</b>	<b>-93%</b>
<b>F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE</b>					
1	Inpatient Charges	\$259,401	\$0	(\$259,401)	-100%
2	Inpatient Payments	\$93,515	\$0	(\$93,515)	-100%
3	Outpatient Charges	\$143,517	\$0	(\$143,517)	-100%
4	Outpatient Payments	\$43,145	\$0	(\$43,145)	-100%
5	Discharges	7	0	(7)	-100%
6	Patient Days	41	0	(41)	-100%
7	Outpatient Visits (Excludes ED Visits)	31	0	(31)	-100%
8	Emergency Department Outpatient Visits	29	0	(29)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$402,918</b>	<b>\$0</b>	<b>(\$402,918)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$136,660</b>	<b>\$0</b>	<b>(\$136,660)</b>	<b>-100%</b>
<b>G. UNITED HEALTHCARE INSURANCE COMPANY</b>					
1	Inpatient Charges	\$9,507,989	\$8,985,384	(\$522,605)	-5%
2	Inpatient Payments	\$2,957,931	\$2,843,333	(\$114,598)	-4%
3	Outpatient Charges	\$4,573,338	\$4,965,074	\$391,736	9%
4	Outpatient Payments	\$1,209,763	\$1,132,614	(\$77,149)	-6%
5	Discharges	304	290	(14)	-5%
6	Patient Days	1,495	1,325	(170)	-11%
7	Outpatient Visits (Excludes ED Visits)	1,416	1,653	237	17%
8	Emergency Department Outpatient Visits	768	786	18	2%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$14,081,327</b>	<b>\$13,950,458</b>	<b>(\$130,869)</b>	<b>-1%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$4,167,694</b>	<b>\$3,975,947</b>	<b>(\$191,747)</b>	<b>-5%</b>
<b>H. WELLCARE OF CONNECTICUT</b>					
1	Inpatient Charges	\$81,598	\$188,918	\$107,320	132%
2	Inpatient Payments	\$33,736	\$71,625	\$37,889	112%
3	Outpatient Charges	\$94,221	\$183,818	\$89,597	95%
4	Outpatient Payments	\$22,998	\$33,970	\$10,972	48%
5	Discharges	3	9	6	200%
6	Patient Days	17	29	12	71%
7	Outpatient Visits (Excludes ED Visits)	39	72	33	85%
8	Emergency Department Outpatient Visits	37	47	10	27%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$175,819</b>	<b>\$372,736</b>	<b>\$196,917</b>	<b>112%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$56,734</b>	<b>\$105,595</b>	<b>\$48,861</b>	<b>86%</b>
<b>I. AETNA</b>					

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	Inpatient Charges	\$1,185,389	\$1,755,847	\$570,458	48%
2	Inpatient Payments	\$454,596	\$583,312	\$128,716	28%
3	Outpatient Charges	\$607,942	\$1,463,476	\$855,534	141%
4	Outpatient Payments	\$187,460	\$374,481	\$187,021	100%
5	Discharges	48	55	7	15%
6	Patient Days	174	259	85	49%
7	Outpatient Visits (Excludes ED Visits)	198	507	309	156%
8	Emergency Department Outpatient Visits	109	200	91	83%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,793,331</b>	<b>\$3,219,323</b>	<b>\$1,425,992</b>	<b>80%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$642,056</b>	<b>\$957,793</b>	<b>\$315,737</b>	<b>49%</b>
<b>J.</b>	<b>HUMANA</b>				
1	Inpatient Charges	\$38,879	\$56,566	\$17,687	45%
2	Inpatient Payments	\$10,744	\$39,214	\$28,470	265%
3	Outpatient Charges	\$57,052	\$60,747	\$3,695	6%
4	Outpatient Payments	\$20,693	\$17,684	(\$3,009)	-15%
5	Discharges	2	3	1	50%
6	Patient Days	7	8	1	14%
7	Outpatient Visits (Excludes ED Visits)	5	8	3	60%
8	Emergency Department Outpatient Visits	12	15	3	25%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$95,931</b>	<b>\$117,313</b>	<b>\$21,382</b>	<b>22%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$31,437</b>	<b>\$56,898</b>	<b>\$25,461</b>	<b>81%</b>
<b>K.</b>	<b>SECURE HORIZONS</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>L.</b>	<b>UNICARE LIFE &amp; HEALTH INSURANCE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>M.</b>	<b>UNIVERSAL AMERICAN</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY</b>					
(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%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>N.</b>	<b>EVERCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$37,405	\$0	(\$37,405)	-100%
4	Outpatient Payments	\$9,050	\$0	(\$9,050)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	8	0	(8)	-100%
8	Emergency Department Outpatient Visits	5	0	(5)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$37,405</b>	<b>\$0</b>	<b>(\$37,405)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$9,050</b>	<b>\$0</b>	<b>(\$9,050)</b>	<b>-100%</b>
<b>II.</b>	<b>TOTAL MEDICARE MANAGED CARE</b>				
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$16,128,137</b>	<b>\$16,838,321</b>	<b>\$710,184</b>	<b>4%</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$5,332,698</b>	<b>\$5,574,685</b>	<b>\$241,987</b>	<b>5%</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$9,120,275</b>	<b>\$9,980,176</b>	<b>\$859,901</b>	<b>9%</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$2,564,344</b>	<b>\$2,443,172</b>	<b>(\$121,172)</b>	<b>-5%</b>
	<b>TOTAL DISCHARGES</b>	<b>542</b>	<b>537</b>	<b>(5)</b>	<b>-1%</b>
	<b>TOTAL PATIENT DAYS</b>	<b>2,438</b>	<b>2,376</b>	<b>(62)</b>	<b>-3%</b>
	<b>TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)</b>	<b>2,549</b>	<b>2,978</b>	<b>429</b>	<b>17%</b>
	<b>TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS</b>	<b>1,520</b>	<b>1,532</b>	<b>12</b>	<b>1%</b>
	<b>TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$25,248,412</b>	<b>\$26,818,497</b>	<b>\$1,570,085</b>	<b>6%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$7,897,042</b>	<b>\$8,017,857</b>	<b>\$120,815</b>	<b>2%</b>

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. MEDICAID MANAGED CARE</b>					
<b>A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>B. COMMUNITY HEALTH NETWORK OF CT</b>					
1	Inpatient Charges	\$292,714	\$0	(\$292,714)	-100%
2	Inpatient Payments	\$100,882	\$0	(\$100,882)	-100%
3	Outpatient Charges	\$974,692	\$0	(\$974,692)	-100%
4	Outpatient Payments	\$289,324	\$0	(\$289,324)	-100%
5	Discharges	35	0	(35)	-100%
6	Patient Days	104	0	(104)	-100%
7	Outpatient Visits (Excludes ED Visits)	366	0	(366)	-100%
8	Emergency Department Outpatient Visits	639	0	(639)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$1,267,406</b>	<b>\$0</b>	<b>(\$1,267,406)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$390,206</b>	<b>\$0</b>	<b>(\$390,206)</b>	<b>-100%</b>
<b>C. HEALTHNET OF THE NORTHEAST, INC.</b>					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>D. OTHER MEDICAID MANAGED CARE</b>					
1	Inpatient Charges	\$1,152,144	\$1,577,197	\$425,053	37%
2	Inpatient Payments	\$400,197	\$497,232	\$97,035	24%
3	Outpatient Charges	\$6,256,931	\$7,648,947	\$1,392,016	22%
4	Outpatient Payments	\$1,730,460	\$2,091,032	\$360,572	21%
5	Discharges	109	115	6	6%
6	Patient Days	289	343	54	19%
7	Outpatient Visits (Excludes ED Visits)	1,010	1,004	(6)	-1%
8	Emergency Department Outpatient Visits	4,135	4,944	809	20%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$7,409,075</b>	<b>\$9,226,144</b>	<b>\$1,817,069</b>	<b>25%</b>

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$2,130,657</b>	<b>\$2,588,264</b>	<b>\$457,607</b>	<b>21%</b>
<b>E.</b>	<b>WELLCARE OF CONNECTICUT</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>F.</b>	<b>FIRST CHOICE OF CONNECTICUT, PREFERRED ONE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>G.</b>	<b>UNITED HEALTHCARE</b>				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>0%</b>
<b>H.</b>	<b>AETNA</b>				
1	Inpatient Charges	\$183,303	\$0	(\$183,303)	-100%
2	Inpatient Payments	\$39,680	\$0	(\$39,680)	-100%
3	Outpatient Charges	\$717,596	\$0	(\$717,596)	-100%
4	Outpatient Payments	\$200,695	\$0	(\$200,695)	-100%
5	Discharges	15	0	(15)	-100%
6	Patient Days	41	0	(41)	-100%
7	Outpatient Visits (Excludes ED Visits)	173	0	(173)	-100%
8	Emergency Department Outpatient Visits	431	0	(431)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	<b>TOTAL INPATIENT &amp; OUTPATIENT CHARGES</b>	<b>\$900,899</b>	<b>\$0</b>	<b>(\$900,899)</b>	<b>-100%</b>
	<b>TOTAL INPATIENT &amp; OUTPATIENT PAYMENTS</b>	<b>\$240,375</b>	<b>\$0</b>	<b>(\$240,375)</b>	<b>-100%</b>

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY</b>					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2012 ACTUAL	FY 2013 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
<b>II. TOTAL MEDICAID MANAGED CARE</b>					
	TOTAL INPATIENT CHARGES	\$1,628,161	\$1,577,197	(\$50,964)	-3%
	TOTAL INPATIENT PAYMENTS	\$540,759	\$497,232	(\$43,527)	-8%
	TOTAL OUTPATIENT CHARGES	\$7,949,219	\$7,648,947	(\$300,272)	-4%
	TOTAL OUTPATIENT PAYMENTS	\$2,220,479	\$2,091,032	(\$129,447)	-6%
	TOTAL DISCHARGES	159	115	(44)	-28%
	TOTAL PATIENT DAYS	434	343	(91)	-21%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	1,549	1,004	(545)	-35%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	5,205	4,944	(261)	-5%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$9,577,380	\$9,226,144	(\$351,236)	-4%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,761,238	\$2,588,264	(\$172,974)	-6%

<b>MILFORD HEALTH &amp; MEDICAL, INC.</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. ASSETS</b>					
<b>A. Current Assets:</b>					
1	Cash and Cash Equivalents	\$1,579,650	\$3,173,042	\$1,593,392	101%
2	Short Term Investments	\$226,782	\$112,243	(\$114,539)	-51%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$13,057,002	\$10,371,729	(\$2,685,273)	-21%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$861,132	\$887,860	\$26,728	3%
8	Prepaid Expenses	\$1,666,727	\$3,619,088	\$1,952,361	117%
9	Other Current Assets	\$780,877	\$0	(\$780,877)	-100%
	<b>Total Current Assets</b>	<b>\$18,172,170</b>	<b>\$18,163,962</b>	<b>(\$8,208)</b>	<b>0%</b>
<b>B. Noncurrent Assets Whose Use is Limited:</b>					
1	Held by Trustee	\$761,871	\$894,273	\$132,402	17%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$1,059,414	\$10,914,877	\$9,855,463	930%
	<b>Total Noncurrent Assets Whose Use is Limited:</b>	<b>\$1,821,285</b>	<b>\$11,809,150</b>	<b>\$9,987,865</b>	<b>548%</b>
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$12,850,225	\$4,061,602	(\$8,788,623)	-68%
7	Other Noncurrent Assets	\$4,188,450	\$5,037,525	\$849,075	20%
<b>C. Net Fixed Assets:</b>					
1	Property, Plant and Equipment	\$88,928,662	\$64,201,307	(\$24,727,355)	-28%
2	Less: Accumulated Depreciation	\$50,466,444	\$28,868,914	(\$21,597,530)	(\$0)
	<b>Property, Plant and Equipment, Net</b>	<b>\$38,462,218</b>	<b>\$35,332,393</b>	<b>(\$3,129,825)</b>	<b>-8%</b>
3	Construction in Progress	\$0	\$0	\$0	0%
	<b>Total Net Fixed Assets</b>	<b>\$38,462,218</b>	<b>\$35,332,393</b>	<b>(\$3,129,825)</b>	<b>-8%</b>
	<b>Total Assets</b>	<b>\$75,494,348</b>	<b>\$74,404,632</b>	<b>(\$1,089,716)</b>	<b>-1%</b>
<b>II. LIABILITIES AND NET ASSETS</b>					
<b>A. Current Liabilities:</b>					

<b>MILFORD HEALTH &amp; MEDICAL, INC.</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2012 ACTUAL</b>	<b>FY 2013 ACTUAL</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
1	Accounts Payable and Accrued Expenses	\$4,469,034	\$5,511,378	\$1,042,344	23%
2	Salaries, Wages and Payroll Taxes	\$6,944,752	\$7,152,032	\$207,280	3%
3	Due To Third Party Payers	\$1,100,013	\$1,886,925	\$786,912	72%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%
6	Current Portion of Notes Payable	\$1,060,828	\$133,467	(\$927,361)	-87%
7	Other Current Liabilities	\$3,586,610	\$2,999,148	(\$587,462)	-16%
	<b>Total Current Liabilities</b>	<b>\$17,161,237</b>	<b>\$17,682,950</b>	<b>\$521,713</b>	<b>3%</b>
	<b>B. Long Term Debt:</b>				
1	Bonds Payable (Net of Current Portion)	\$0	\$0	\$0	0%
2	Notes Payable (Net of Current Portion)	\$6,768,005	\$6,634,757	(\$133,248)	-2%
	<b>Total Long Term Debt</b>	<b>\$6,768,005</b>	<b>\$6,634,757</b>	<b>(\$133,248)</b>	<b>-2%</b>
3	Accrued Pension Liability	\$29,974,311	\$16,549,876	(\$13,424,435)	-45%
4	Other Long Term Liabilities	\$4,785,456	\$15,192,808	\$10,407,352	217%
	<b>Total Long Term Liabilities</b>	<b>\$41,527,772</b>	<b>\$38,377,441</b>	<b>(\$3,150,331)</b>	<b>-8%</b>
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
	<b>C. Net Assets:</b>				
1	Unrestricted Net Assets or Equity	\$15,462,135	\$16,895,968	\$1,433,833	9%
2	Temporarily Restricted Net Assets	\$669,441	\$774,510	\$105,069	16%
3	Permanently Restricted Net Assets	\$673,763	\$673,763	\$0	0%
	<b>Total Net Assets</b>	<b>\$16,805,339</b>	<b>\$18,344,241</b>	<b>\$1,538,902</b>	<b>9%</b>
	<b>Total Liabilities and Net Assets</b>	<b>\$75,494,348</b>	<b>\$74,404,632</b>	<b>(\$1,089,716)</b>	<b>-1%</b>

<b>MILFORD HEALTH &amp; MEDICAL, INC.</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2012</u> <u>ACTUAL</u>	<u>FY 2013</u> <u>ACTUAL</u>	<u>AMOUNT</u> <u>DIFFERENCE</u>	<u>%</u> <u>DIFFERENCE</u>
<b>A. Operating Revenue:</b>					
1	Total Gross Patient Revenue	\$196,681,143	\$202,576,756	\$5,895,613	3%
2	Less: Allowances	\$107,358,290	\$120,880,699	\$13,522,409	13%
3	Less: Charity Care	\$192,533	\$643,601	\$451,068	234%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	<b>Total Net Patient Revenue</b>	<b>\$89,130,320</b>	<b>\$81,052,456</b>	<b>(\$8,077,864)</b>	<b>-9%</b>
5	Provision for Bad Debts	\$0	\$6,520,133	\$6,520,133	0%
	<b>Net Patient Service Revenue less provision for bad debts</b>	<b>\$89,130,320</b>	<b>\$74,532,323</b>	<b>(\$14,597,997)</b>	<b>-16%</b>
6	Other Operating Revenue	\$3,585,478	\$2,729,480	(\$855,998)	-24%
7	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	<b>Total Operating Revenue</b>	<b>\$92,715,798</b>	<b>\$77,261,803</b>	<b>(\$15,453,995)</b>	<b>-17%</b>
<b>B. Operating Expenses:</b>					
1	Salaries and Wages	\$41,152,660	\$40,773,272	(\$379,388)	-1%
2	Fringe Benefits	\$15,348,836	\$12,946,476	(\$2,402,360)	-16%
3	Physicians Fees	\$1,056,109	\$722,901	(\$333,208)	-32%
4	Supplies and Drugs	\$10,875,051	\$11,584,106	\$709,055	7%
5	Depreciation and Amortization	\$3,165,395	\$6,887,793	\$3,722,398	118%
6	Bad Debts	\$7,967,947	\$0	(\$7,967,947)	-100%
7	Interest Expense	\$542,344	\$468,339	(\$74,005)	-14%
8	Malpractice Insurance Cost	\$2,552,883	\$2,499,414	(\$53,469)	-2%
9	Other Operating Expenses	\$15,410,856	\$13,950,615	(\$1,460,241)	-9%
	<b>Total Operating Expenses</b>	<b>\$98,072,081</b>	<b>\$89,832,916</b>	<b>(\$8,239,165)</b>	<b>-8%</b>
	<b>Income/(Loss) From Operations</b>	<b>(\$5,356,283)</b>	<b>(\$12,571,113)</b>	<b>(\$7,214,830)</b>	<b>135%</b>
<b>C. Non-Operating Revenue:</b>					
1	Income from Investments	\$2,507,029	\$1,736,372	(\$770,657)	-31%
2	Gifts, Contributions and Donations	\$283,158	\$454,342	\$171,184	60%
3	Other Non-Operating Gains/(Losses)	\$0	\$0	\$0	0%
	<b>Total Non-Operating Revenue</b>	<b>\$2,790,187</b>	<b>\$2,190,714</b>	<b>(\$599,473)</b>	<b>-21%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)</b>	<b>(\$2,566,096)</b>	<b>(\$10,380,399)</b>	<b>(\$7,814,303)</b>	<b>305%</b>
<b>Other Adjustments:</b>					
	Unrealized Gains/(Losses)	\$3,465	(\$536,330)	(\$539,795)	-15578%
	All Other Adjustments	\$0	\$0	\$0	0%
	<b>Total Other Adjustments</b>	<b>\$3,465</b>	<b>(\$536,330)</b>	<b>(\$539,795)</b>	<b>-15578%</b>
	<b>Excess/(Deficiency) of Revenue Over Expenses</b>	<b>(\$2,562,631)</b>	<b>(\$10,916,729)</b>	<b>(\$8,354,098)</b>	<b>326%</b>

<b>MILFORD HEALTH &amp; MEDICAL, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
<b>A. <u>Parent Corporation Statement of Operations Summary</u></b>				
1	Net Patient Revenue	\$84,946,930	\$89,130,320	\$74,532,323
2	Other Operating Revenue	1,505,504	3,585,478	2,729,480
3	Total Operating Revenue	\$86,452,434	\$92,715,798	\$77,261,803
4	Total Operating Expenses	93,643,054	98,072,081	89,832,916
5	Income/(Loss) From Operations	(\$7,190,620)	(\$5,356,283)	(\$12,571,113)
6	Total Non-Operating Revenue	111,096	2,793,652	1,654,384
7	Excess/(Deficiency) of Revenue Over Expenses	(\$7,079,524)	(\$2,562,631)	(\$10,916,729)
<b>B. <u>Parent Corporation Profitability Summary</u></b>				
1	Parent Corporation Operating Margin	-8.31%	-5.61%	-15.93%
2	Parent Corporation Non-Operating Margin	0.13%	2.93%	2.10%
3	Parent Corporation Total Margin	-8.18%	-2.68%	-13.83%
4	Income/(Loss) From Operations	(\$7,190,620)	(\$5,356,283)	(\$12,571,113)
5	Total Operating Revenue	\$86,452,434	\$92,715,798	\$77,261,803
6	Total Non-Operating Revenue	\$111,096	\$2,793,652	\$1,654,384
7	Total Revenue	\$86,563,530	\$95,509,450	\$78,916,187
8	Excess/(Deficiency) of Revenue Over Expenses	(\$7,079,524)	(\$2,562,631)	(\$10,916,729)
<b>C. <u>Parent Corporation Net Assets Summary</u></b>				
1	Parent Corporation Unrestricted Net Assets	\$23,731,621	\$15,462,135	\$16,895,968
2	Parent Corporation Total Net Assets	\$25,031,545	\$16,805,339	\$18,344,241
3	Parent Corporation Change in Total Net Assets	(\$11,783,159)	(\$8,226,206)	\$1,538,902
4	Parent Corporation Change in Total Net Assets %	68.0%	-32.9%	9.2%
<b>D. <u>Liquidity Measures Summary</u></b>				
1	<b><u>Current Ratio</u></b>	<b>1.07</b>	<b>1.06</b>	<b>1.03</b>
2	Total Current Assets	\$18,572,828	\$18,172,170	\$18,163,962
3	Total Current Liabilities	\$17,299,639	\$17,161,237	\$17,682,950

<b>MILFORD HEALTH &amp; MEDICAL, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
<b>4</b>	<b><u>Days Cash on Hand</u></b>	<b>11</b>	<b>7</b>	<b>14</b>
5	Cash and Cash Equivalents	\$2,404,819	\$1,579,650	\$3,173,042
6	Short Term Investments	\$225,915	\$226,782	\$112,243
7	Total Cash and Short Term Investments	\$2,630,734	\$1,806,432	\$3,285,285
8	Total Operating Expenses	\$93,643,054	\$98,072,081	\$89,832,916
9	Depreciation Expense	\$3,491,992	\$3,165,395	\$6,887,793
10	Operating Expenses less Depreciation Expense	\$90,151,062	\$94,906,686	\$82,945,123
<b>11</b>	<b><u>Days Revenue in Patient Accounts Receivable</u></b>	<b>48</b>	<b>49</b>	<b>42</b>
12	Net Patient Accounts Receivable	\$ 13,593,372	\$ 13,057,002	\$ 10,371,729
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$2,318,298	\$1,100,013	\$1,886,925
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 11,275,074	\$ 11,956,989	\$ 8,484,804
16	Total Net Patient Revenue	\$84,946,930	\$89,130,320	\$74,532,323
<b>17</b>	<b><u>Average Payment Period</u></b>	<b>70</b>	<b>66</b>	<b>78</b>
18	Total Current Liabilities	\$17,299,639	\$17,161,237	\$17,682,950
19	Total Operating Expenses	\$93,643,054	\$98,072,081	\$89,832,916
20	Depreciation Expense	\$3,491,992	\$3,165,395	\$6,887,793
20	Total Operating Expenses less Depreciation Expense	\$90,151,062	\$94,906,686	\$82,945,123
<b>E.</b>	<b><u>Solvency Measures Summary</u></b>			
<b>1</b>	<b><u>Equity Financing Ratio</u></b>	<b>30.5</b>	<b>22.3</b>	<b>24.7</b>
2	Total Net Assets	\$25,031,545	\$16,805,339	\$18,344,241
3	Total Assets	\$82,131,775	\$75,494,348	\$74,404,632
<b>4</b>	<b><u>Cash Flow to Total Debt Ratio</u></b>	<b>(14.3)</b>	<b>2.5</b>	<b>(16.6)</b>
5	Excess/(Deficiency) of Revenues Over Expenses	(\$7,079,524)	(\$2,562,631)	(\$10,916,729)

<b>MILFORD HEALTH &amp; MEDICAL, INC.</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
		<b>ACTUAL</b>	<b>ACTUAL</b>	<b>ACTUAL</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>FY 2011</b>	<b>FY 2012</b>	<b>FY 2013</b>
6	Depreciation Expense	\$3,491,992	\$3,165,395	\$6,887,793
7	Excess of Revenues Over Expenses and Depreciation Expense	(\$3,587,532)	\$602,764	(\$4,028,936)
8	Total Current Liabilities	\$17,299,639	\$17,161,237	\$17,682,950
9	Total Long Term Debt	\$7,828,804	\$6,768,005	\$6,634,757
10	Total Current Liabilities and Total Long Term Debt	\$25,128,443	\$23,929,242	\$24,317,707
<b>11</b>	<b><u>Long Term Debt to Capitalization Ratio</u></b>	<b>23.8</b>	<b>28.7</b>	<b>26.6</b>
12	Total Long Term Debt	\$7,828,804	\$6,768,005	\$6,634,757
13	Total Net Assets	\$25,031,545	\$16,805,339	\$18,344,241
14	Total Long Term Debt and Total Net Assets	\$32,860,349	\$23,573,344	\$24,978,998

		MILFORD 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)
		PATIENT DAYS	DISCHARGES OR CU/CCU # PATIENT	ADMISSIONS	STAFFED BEDS (A)	AVAILABLE BEDS	OCCUPANCY OF STAFFED BEDS (A)	OCCUPANCY OF AVAILABLE BEDS
LINE	DESCRIPTION							
1	Adult Medical/Surgical	11,402	3,156	3,153	32	78	97.6%	40.0%
2	ICU/CCU (Excludes Neonatal ICU)	1,593	137	0	6	10	72.7%	43.6%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL PSYCHIATRIC</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0%</b>	<b>0.0%</b>
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	312	100	103	4	12	21.4%	7.1%
7	Newborn	296	92	95	4	12	20.3%	6.8%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	0	0	0	0	6	0.0%	0.0%
10	Other	0	0	0	0	0	0.0%	0.0%
	<b>TOTAL EXCLUDING NEWBORN</b>	<b>13,307</b>	<b>3,256</b>	<b>3,256</b>	<b>42</b>	<b>106</b>	<b>86.8%</b>	<b>34.4%</b>
	<b>TOTAL INPATIENT BED UTILIZATION</b>	<b>13,603</b>	<b>3,348</b>	<b>3,351</b>	<b>46</b>	<b>118</b>	<b>81.0%</b>	<b>31.6%</b>
	<b>TOTAL INPATIENT REPORTED YEAR</b>	<b>13,603</b>	<b>3,348</b>	<b>3,351</b>	<b>46</b>	<b>118</b>	<b>81.0%</b>	<b>31.6%</b>
	<b>TOTAL INPATIENT PRIOR YEAR</b>	<b>14,756</b>	<b>3,580</b>	<b>3,578</b>	<b>47</b>	<b>118</b>	<b>86.0%</b>	<b>34.3%</b>
	<b>DIFFERENCE #: REPORTED VS. PRIOR YEAR</b>	<b>-1,153</b>	<b>-232</b>	<b>-227</b>	<b>-1</b>	<b>0</b>	<b>-5.0%</b>	<b>-2.7%</b>
	<b>DIFFERENCE %: REPORTED VS. PRIOR YEAR</b>	<b>-8%</b>	<b>-6%</b>	<b>-6%</b>	<b>-2%</b>	<b>0%</b>	<b>-6%</b>	<b>-8%</b>
	Total Licensed Beds and Bassinets	118						
<b>(A) This number may not exceed the number of available beds for each department or in total.</b>								
<b>Note: Total discharges do not include ICU/CCU patients.</b>								

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
<b>A. CT Scans (A)</b>					
1	Inpatient Scans	628	611	-17	-3%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,622	1,498	-124	-8%
3	Emergency Department Scans	5,887	6,160	273	5%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total CT Scans</b>	<b>8,137</b>	<b>8,269</b>	<b>132</b>	<b>2%</b>
<b>B. MRI Scans (A)</b>					
1	Inpatient Scans	258	192	-66	-26%
2	Outpatient Scans (Excluding Emergency Department Scans)	1,794	1,717	-77	-4%
3	Emergency Department Scans	75	105	30	40%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total MRI Scans</b>	<b>2,127</b>	<b>2,014</b>	<b>-113</b>	<b>-5%</b>
<b>C. PET Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	68	57	-11	-16%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET Scans</b>	<b>68</b>	<b>57</b>	<b>-11</b>	<b>-16%</b>
<b>D. PET/CT Scans (A)</b>					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	<b>Total PET/CT Scans</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.</b>					
<b>E. Linear Accelerator Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Linear Accelerator Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>F. Cardiac Catheterization Procedures</b>					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	<b>Total Cardiac Catheterization Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>G. Cardiac Angioplasty Procedures</b>					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	<b>Total Cardiac Angioplasty Procedures</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>H. Electrophysiology Studies</b>					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	<b>Total Electrophysiology Studies</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs</b>					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2012	ACTUAL FY 2013	AMOUNT DIFFERENCE	% DIFFERENCE
<b>I. <u>Surgical Procedures</u></b>					
1	Inpatient Surgical Procedures	1,091	1,081	-10	-1%
2	Outpatient Surgical Procedures	1,936	1,836	-100	-5%
	<b>Total Surgical Procedures</b>	<b>3,027</b>	<b>2,917</b>	<b>-110</b>	<b>-4%</b>
<b>J. <u>Endoscopy Procedures</u></b>					
1	Inpatient Endoscopy Procedures	245	236	-9	-4%
2	Outpatient Endoscopy Procedures	2,363	1,659	-704	-30%
	<b>Total Endoscopy Procedures</b>	<b>2,608</b>	<b>1,895</b>	<b>-713</b>	<b>-27%</b>
<b>K. <u>Hospital Emergency Room Visits</u></b>					
1	Emergency Room Visits: Treated and Admitted	3,025	3,065	40	1%
2	Emergency Room Visits: Treated and Discharged	33,427	32,175	-1,252	-4%
	<b>Total Emergency Room Visits</b>	<b>36,452</b>	<b>35,240</b>	<b>-1,212</b>	<b>-3%</b>
<b>L. <u>Hospital Clinic Visits</u></b>					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	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	0	0	0%
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	0%
9	Specialty Clinic Visits	0	0	0	0%
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	0	0	0%
	<b>Total Hospital Clinic Visits</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>
<b>M. <u>Other Hospital Outpatient Visits</u></b>					
1	Rehabilitation (PT/OT/ST)	0	0	0	0%
2	Cardiac Rehabilitation	0	0	0	0%
3	Chemotherapy	0	0	0	0%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	23,926	21,955	-1,971	-8%
	<b>Total Other Hospital Outpatient Visits</b>	<b>23,926</b>	<b>21,955</b>	<b>-1,971</b>	<b>-8%</b>
<b>N. <u>Hospital Full Time Equivalent Employees</u></b>					
1	Total Nursing FTEs	195.0	170.7	-24.3	-12%
2	Total Physician FTEs	18.0	20.6	2.6	14%
3	Total Non-Nursing and Non-Physician FTEs	294.0	307.3	13.3	5%
	<b>Total Hospital Full Time Equivalent Employees</b>	<b>507.0</b>	<b>498.6</b>	<b>-8.4</b>	<b>-2%</b>

MILFORD 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
<b>A. Outpatient Surgical Procedures</b>					
1	Milford Hospital	1,936	1,836	-100	-5%
	<b>Total Outpatient Surgical Procedures(A)</b>	<b>1,936</b>	<b>1,836</b>	<b>-100</b>	<b>-5%</b>
<b>B. Outpatient Endoscopy Procedures</b>					
1	Milford Hospital	2,363	1,659	-704	-30%
	<b>Total Outpatient Endoscopy Procedures(B)</b>	<b>2,363</b>	<b>1,659</b>	<b>-704</b>	<b>-30%</b>
<b>C. Outpatient Hospital Emergency Room Visits</b>					
1	MilfHospBostonPostRd WalkIn Ctr	12,783	12,199	-584	-5%
2	Milford Hospital	20,644	19,976	-668	-3%
	<b>Total Outpatient Hospital Emergency Room Visits(C)</b>	<b>33,427</b>	<b>32,175</b>	<b>-1,252</b>	<b>-4%</b>
<b>(A) Must agree with Total Outpatient Surgical Procedures on Report 450.</b>					
<b>(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.</b>					
<b>(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.</b>					

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>I. DATA BY MAJOR PAYER CATEGORY</b>					
<b>A. MEDICARE</b>					
<b>MEDICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$61,030,757	\$64,511,512	\$3,480,755	6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$21,772,310	\$20,627,247	(\$1,145,063)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.67%	31.97%	-3.70%	-10%
4	DISCHARGES	1,986	2,011	25	1%
5	CASE MIX INDEX (CMI)	1.48819	1.47660	(0.01159)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,955.54534	2,969.44260	13.89726	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,366.60	\$6,946.50	(\$420.09)	-6%
8	PATIENT DAYS	9,198	9,202	4	0%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,367.07	\$2,241.60	(\$125.47)	-5%
10	AVERAGE LENGTH OF STAY	4.6	4.6	(0.1)	-1%
<b>MEDICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$29,160,897	\$31,444,255	\$2,283,358	8%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$7,860,506	\$7,503,025	(\$357,481)	-5%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	26.96%	23.86%	-3.09%	-11%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	47.78%	48.74%	0.96%	2%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	948.92386	980.20330	31.27944	3%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$8,283.60	\$7,654.56	(\$629.04)	-8%
<b>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
17	TOTAL ACCRUED CHARGES	\$90,191,654	\$95,955,767	\$5,764,113	6%
18	TOTAL ACCRUED PAYMENTS	\$29,632,816	\$28,130,272	(\$1,502,544)	-5%
19	TOTAL ALLOWANCES	\$60,558,838	\$67,825,495	\$7,266,657	12%
<b>B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</b>					
<b>NON-GOVERNMENT INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$30,011,039	\$28,238,434	(\$1,772,605)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$12,471,918	\$12,445,409	(\$26,509)	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.56%	44.07%	2.51%	6%
4	DISCHARGES	1,240	1,068	(172)	-14%
5	CASE MIX INDEX (CMI)	1.33260	1.34430	0.01170	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,652.42400	1,435.71240	(216.71160)	-13%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,547.65	\$8,668.46	\$1,120.81	15%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$181.05)	(\$1,721.95)	(\$1,540.90)	851%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$299,177)	(\$2,472,226)	(\$2,173,049)	726%
10	PATIENT DAYS	4,297	3,457	(840)	-20%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,902.47	\$3,600.06	\$697.59	24%
12	AVERAGE LENGTH OF STAY	3.5	3.2	(0.2)	-7%
<b>NON-GOVERNMENT OUTPATIENT</b>					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$49,192,603	\$50,175,134	\$982,531	2%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$23,031,817	\$21,653,767	(\$1,378,050)	-6%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	46.82%	43.16%	-3.66%	-8%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
16	OUTPATIENT CHARGES / INPATIENT CHARGES	163.92%	177.68%	13.77%	8%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,032.54635	1,897.66342	(134.88293)	-7%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$11,331.51	\$11,410.75	\$79.24	1%
19	MEDICARE- NON-GOVERNMENT OP PMT / OPED	(\$3,047.91)	(\$3,756.19)	(\$708.28)	23%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,195,015)	(\$7,127,988)	(\$932,973)	15%
<b><u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u></b>					
21	TOTAL ACCRUED CHARGES	\$79,203,642	\$78,413,568	(\$790,074)	-1%
22	TOTAL ACCRUED PAYMENTS	\$35,503,735	\$34,099,176	(\$1,404,559)	-4%
23	TOTAL ALLOWANCES	\$43,699,907	\$44,314,392	\$614,485	1%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$6,494,193)	(\$9,600,214)	(\$3,106,022)	48%
<b><u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u></b>					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$69,988,341	\$68,766,683	(\$1,221,658)	-2%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$35,620,019	\$25,786,529	(\$9,833,490)	-28%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,368,322	\$42,980,154	\$8,611,832	25%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.11%	62.50%	13.40%	
<b><u>C. UNINSURED</u></b>					
<b><u>UNINSURED INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$1,735,686	\$1,363,537	(\$372,149)	-21%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$77,021	\$14,362	(\$62,659)	-81%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	4.44%	1.05%	-3.38%	-76%
4	DISCHARGES	63	50	(13)	-21%
5	CASE MIX INDEX (CMI)	1.32154	0.94562	(0.37592)	-28%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	83.25702	47.28100	(35.97602)	-43%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$925.10	\$303.76	(\$621.34)	-67%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,622.55	\$8,364.70	\$1,742.15	26%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,441.50	\$6,642.75	\$201.25	3%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$536,300	\$314,076	(\$222,224)	-41%
11	PATIENT DAYS	252	175	(77)	-31%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$305.64	\$82.07	(\$223.57)	-73%
13	AVERAGE LENGTH OF STAY	4.0	3.5	(0.5)	-13%
<b><u>UNINSURED OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$3,892,808	\$5,507,937	\$1,615,129	41%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$172,743	\$63,231	(\$109,512)	-63%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	4.44%	1.15%	-3.29%	-74%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	224.28%	403.94%	179.66%	80%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	141.29682	201.97241	60.67559	43%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,222.55	\$313.07	(\$909.49)	-74%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$10,108.95	\$11,097.68	\$988.73	10%
21	MEDICARE - UNINSURED OP PMT / OPED	\$7,061.05	\$7,341.49	\$280.45	4%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$997,703	\$1,482,779	\$485,076	49%
<b><u>UNINSURED TOTALS (INPATIENT AND OUTPATIENT)</u></b>					
23	TOTAL ACCRUED CHARGES	\$5,628,494	\$6,871,474	\$1,242,980	22%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
24	TOTAL ACCRUED PAYMENTS	\$249,764	\$77,593	(\$172,171)	-69%
25	TOTAL ALLOWANCES	\$5,378,730	\$6,793,881	\$1,415,151	26%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,534,003	\$1,796,855	\$262,851	17%
<b>D. STATE OF CONNECTICUT MEDICAID</b>					
<b>MEDICAID INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$5,450,784	\$5,224,360	(\$226,424)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,206,486	\$1,168,773	(\$37,713)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.13%	22.37%	0.24%	1%
4	DISCHARGES	349	258	(91)	-26%
5	CASE MIX INDEX (CMI)	0.96408	1.20690	0.24282	25%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	336.46392	311.38020	(25.08372)	-7%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,585.78	\$3,753.52	\$167.74	5%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,961.87	\$4,914.93	\$953.06	24%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,780.82	\$3,192.98	(\$587.83)	-16%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,272,108	\$994,231	(\$277,877)	-22%
11	PATIENT DAYS	1,247	911	(336)	-27%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$967.51	\$1,282.96	\$315.45	33%
13	AVERAGE LENGTH OF STAY	3.6	3.5	(0.0)	-1%
<b>MEDICAID OUTPATIENT</b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,131,391	\$14,684,173	\$552,782	4%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$3,971,009	\$4,021,519	\$50,510	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	28.10%	27.39%	-0.71%	-3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	259.25%	281.07%	21.82%	8%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	904.79745	725.16378	(179.63367)	-20%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,388.84	\$5,545.67	\$1,156.83	26%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$6,942.67	\$5,865.08	(\$1,077.59)	-16%
21	MEDICARE - MEDICAID OP PMT / OPED	\$3,894.76	\$2,108.89	(\$1,785.87)	-46%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,523,971	\$1,529,291	(\$1,994,681)	-57%
<b>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$19,582,175	\$19,908,533	\$326,358	2%
24	TOTAL ACCRUED PAYMENTS	\$5,177,495	\$5,190,292	\$12,797	0%
25	TOTAL ALLOWANCES	\$14,404,680	\$14,718,241	\$313,561	2%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,796,079	\$2,523,522	(\$2,272,558)	-47%
<b>E. OTHER MEDICAL ASSISTANCE (O.M.A.)</b>					
<b>OTHER MEDICAL ASSISTANCE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$26,850	\$31,334	\$4,484	17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,495	\$6,063	(\$432)	-7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.19%	19.35%	-4.84%	-20%
4	DISCHARGES	2	1	(1)	-50%
5	CASE MIX INDEX (CMI)	1.53870	1.84180	0.30310	20%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3.07740	1.84180	(1.23560)	-40%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,110.55	\$3,291.89	\$1,181.34	56%
8	NON-GOVERNMENT - O.M.A IP PMT / CMAD	\$5,437.10	\$5,376.57	(\$60.54)	-1%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$5,256.05	\$3,654.62	(\$1,601.43)	-30%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$16,175	\$6,731	(\$9,444)	-58%
11	PATIENT DAYS	5	6	1	20%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,299.00	\$1,010.50	(\$288.50)	-22%
13	AVERAGE LENGTH OF STAY	2.5	6.0	3.5	140%
<b><u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$196,919	\$198,761	\$1,842	1%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$47,480	\$37,428	(\$10,052)	-21%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.11%	18.83%	-5.28%	-22%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	733.40%	634.33%	-99.07%	-14%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	14.66808	6.34330	(8.32478)	-57%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,236.96	\$5,900.40	\$2,663.44	82%
20	NON-GOVERNMENT - O.M.A OP PMT / CMAD	\$8,094.55	\$5,510.35	(\$2,584.19)	-32%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$5,046.64	\$1,754.16	(\$3,292.48)	-65%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$74,025	\$11,127	(\$62,897)	-85%
<b><u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u></b>					
23	TOTAL ACCRUED CHARGES	\$223,769	\$230,095	\$6,326	3%
24	TOTAL ACCRUED PAYMENTS	\$53,975	\$43,491	(\$10,484)	-19%
25	TOTAL ALLOWANCES	\$169,794	\$186,604	\$16,810	10%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$90,199	\$17,858	(\$72,341)	-80%
<b>F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</b>					
<b><u>TOTAL MEDICAL ASSISTANCE INPATIENT</u></b>					
1	INPATIENT ACCRUED CHARGES	\$5,477,634	\$5,255,694	(\$221,940)	-4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,212,981	\$1,174,836	(\$38,145)	-3%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.14%	22.35%	0.21%	1%
4	DISCHARGES	351	259	(92)	-26%
5	CASE MIX INDEX (CMI)	0.96735	1.20935	0.24200	25%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	339.54132	313.22200	(26.31932)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,572.41	\$3,750.81	\$178.40	5%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,975.24	\$4,917.65	\$942.41	24%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,794.19	\$3,195.70	(\$598.49)	-16%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,288,283	\$1,000,962	(\$287,321)	-22%
11	PATIENT DAYS	1,252	917	(335)	-27%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$968.83	\$1,281.17	\$312.34	32%
13	AVERAGE LENGTH OF STAY	3.6	3.5	(0.0)	-1%
<b><u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u></b>					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,328,310	\$14,882,934	\$554,624	4%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$4,018,489	\$4,058,947	\$40,458	1%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	28.05%	27.27%	-0.77%	-3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	261.58%	283.18%	21.60%	8%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	919.46553	731.50708	(187.95845)	-20%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,370.46	\$5,548.75	\$1,178.28	27%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$6,961.05	\$5,862.01	(\$1,099.04)	-16%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,913.14	\$2,105.81	(\$1,807.32)	-46%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,597,996	\$1,540,418	(\$2,057,578)	-57%
<b>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</b>					
23	TOTAL ACCRUED CHARGES	\$19,805,944	\$20,138,628	\$332,684	2%
24	TOTAL ACCRUED PAYMENTS	\$5,231,470	\$5,233,783	\$2,313	0%
25	TOTAL ALLOWANCES	\$14,574,474	\$14,904,845	\$330,371	2%
<b>G. CHAMPUS / TRICARE</b>					
<b>CHAMPUS / TRICARE INPATIENT</b>					
1	INPATIENT ACCRUED CHARGES	\$27,348	\$174,774	\$147,426	539%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$9,678	\$63,596	\$53,918	557%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.39%	36.39%	1.00%	3%
4	DISCHARGES	3	10	7	233%
5	CASE MIX INDEX (CMI)	0.57980	1.26520	0.68540	118%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1.73940	12.65200	10.91260	627%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,563.99	\$5,026.56	(\$537.43)	-10%
8	PATIENT DAYS	9	27	18	200%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,075.33	\$2,355.41	\$1,280.07	119%
10	AVERAGE LENGTH OF STAY	3.0	2.7	(0.3)	-10%
<b>CHAMPUS / TRICARE OUTPATIENT</b>					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$193,576	\$231,144	\$37,568	19%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$61,535	\$61,532	(\$3)	0%
<b>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</b>					
13	TOTAL ACCRUED CHARGES	\$220,924	\$405,918	\$184,994	84%
14	TOTAL ACCRUED PAYMENTS	\$71,213	\$125,128	\$53,915	76%
15	TOTAL ALLOWANCES	\$149,711	\$280,790	\$131,079	88%
<b>H. OTHER DATA</b>					
1	OTHER OPERATING REVENUE	\$2,505,143	\$1,449,445	(\$1,055,698)	-42%
2	TOTAL OPERATING EXPENSES	\$90,685,854	\$80,117,246	(\$10,568,608)	-12%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
<b>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</b>					
4	CHARITY CARE (CHARGES)	\$192,533	\$643,601	\$451,068	234%
5	BAD DEBTS (CHARGES)	\$7,028,914	\$6,456,481	(\$572,433)	-8%
6	UNCOMPENSATED CARE (CHARGES)	\$7,221,447	\$7,100,082	(\$121,365)	-2%
7	COST OF UNCOMPENSATED CARE	\$2,696,757	\$2,192,238	(\$504,519)	-19%
<b>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</b>					
8	TOTAL ACCRUED CHARGES	\$19,805,944	\$20,138,628	\$332,684	2%
9	TOTAL ACCRUED PAYMENTS	\$5,231,470	\$5,233,783	\$2,313	0%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$7,396,277	\$6,218,051	(\$1,178,225)	-16%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,164,807	\$984,268	(\$1,180,538)	-55%
<b>II. AGGREGATE DATA</b>					
<b>A. TOTALS - ALL PAYERS</b>					
1	TOTAL INPATIENT CHARGES	\$96,546,778	\$98,180,414	\$1,633,636	2%
2	TOTAL INPATIENT PAYMENTS	\$35,466,887	\$34,311,088	(\$1,155,799)	-3%
3	TOTAL INPATIENT PAYMENTS / CHARGES	36.74%	34.95%	-1.79%	-5%
4	TOTAL DISCHARGES	3,580	3,348	(232)	-6%
5	TOTAL CASE MIX INDEX	1.38247	1.41309	0.03062	2%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	4,949.25006	4,731.02900	(218.22106)	-4%
7	TOTAL OUTPATIENT CHARGES	\$92,875,386	\$96,733,467	\$3,858,081	4%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	96.20%	98.53%	2.33%	2%
9	TOTAL OUTPATIENT PAYMENTS	\$34,972,347	\$33,277,271	(\$1,695,076)	-5%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	37.66%	34.40%	-3.25%	-9%
11	TOTAL CHARGES	\$189,422,164	\$194,913,881	\$5,491,717	3%
12	TOTAL PAYMENTS	\$70,439,234	\$67,588,359	(\$2,850,875)	-4%
13	TOTAL PAYMENTS / TOTAL CHARGES	37.19%	34.68%	-2.51%	-7%
14	PATIENT DAYS	14,756	13,603	(1,153)	-8%
<b>B. TOTALS - ALL GOVERNMENT PAYERS</b>					
1	INPATIENT CHARGES	\$66,535,739	\$69,941,980	\$3,406,241	5%
2	INPATIENT PAYMENTS	\$22,994,969	\$21,865,679	(\$1,129,290)	-5%
3	GOVT. INPATIENT PAYMENTS / CHARGES	34.56%	31.26%	-3.30%	-10%
4	DISCHARGES	2,340	2,280	(60)	-3%
5	CASE MIX INDEX	1.40890	1.44531	0.03641	3%
6	CASE MIX ADJUSTED DISCHARGES	3,296.82606	3,295.31660	(1.50946)	0%
7	OUTPATIENT CHARGES	\$43,682,783	\$46,558,333	\$2,875,550	7%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	65.65%	66.57%	0.91%	1%
9	OUTPATIENT PAYMENTS	\$11,940,530	\$11,623,504	(\$317,026)	-3%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	27.33%	24.97%	-2.37%	-9%
11	TOTAL CHARGES	\$110,218,522	\$116,500,313	\$6,281,791	6%
12	TOTAL PAYMENTS	\$34,935,499	\$33,489,183	(\$1,446,316)	-4%
13	TOTAL PAYMENTS / CHARGES	31.70%	28.75%	-2.95%	-9%
14	PATIENT DAYS	10,459	10,146	(313)	-3%
15	TOTAL GOVERNMENT DEDUCTIONS	\$75,283,023	\$83,011,130	\$7,728,107	10%
<b>C. AVERAGE LENGTH OF STAY</b>					
1	MEDICARE	4.6	4.6	(0.1)	-1%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.2	(0.2)	-7%
3	UNINSURED	4.0	3.5	(0.5)	-13%
4	MEDICAID	3.6	3.5	(0.0)	-1%
5	OTHER MEDICAL ASSISTANCE	2.5	6.0	3.5	140%
6	CHAMPUS / TRICARE	3.0	2.7	(0.3)	-10%
7	TOTAL AVERAGE LENGTH OF STAY	4.1	4.1	(0.1)	-1%
<b>III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION</b>					
1	TOTAL CHARGES	\$189,422,164	\$194,913,881	\$5,491,717	3%
2	TOTAL GOVERNMENT DEDUCTIONS	\$75,283,023	\$83,011,130	\$7,728,107	10%

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT</b>					
<b>AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS</b>					
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
3	UNCOMPENSATED CARE	\$7,221,447	\$7,100,082	(\$121,365)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,368,322	\$42,980,154	\$8,611,832	25%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,812,087	\$1,640,438	(\$171,649)	-9%
6	TOTAL ADJUSTMENTS	\$118,684,879	\$134,731,804	\$16,046,925	14%
7	TOTAL ACCRUED PAYMENTS	\$70,737,285	\$60,182,077	(\$10,555,208)	-15%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$70,737,285	\$60,182,077	(\$10,555,208)	-15%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3734372130	0.3087623965	(0.0646748165)	-17%
11	COST OF UNCOMPENSATED CARE	\$2,696,757	\$2,192,238	(\$504,519)	-19%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$2,164,807	\$984,268	(\$1,180,538)	-55%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$4,861,564	\$3,176,506	(\$1,685,057)	-35%
<b>IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>					
1	MEDICAID	\$3,523,971	\$1,529,291	(\$1,994,681)	-57%
2	OTHER MEDICAL ASSISTANCE	\$90,199	\$17,858	(\$72,341)	-80%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,534,003	\$1,796,855	\$262,851	17%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$5,148,174	\$3,344,004	(\$1,804,171)	-35%
<b>V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</b>					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,586,807	\$2,775,412	(\$811,395)	-22.62%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$14,012,479	\$2,314,956	(\$11,697,523)	-83.48%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$84,451,715	\$69,903,315	(\$14,548,400)	-17.23%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$189,422,163	\$194,913,879	\$5,491,716	2.90%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$7,221,447	\$7,100,082	(\$121,365)	-1.68%

**MILFORD 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)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>				
<b>A. INPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$30,011,039	\$28,238,434	(\$1,772,605)
2	MEDICARE	\$61,030,757	64,511,512	\$3,480,755
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,477,634	5,255,694	(\$221,940)
4	MEDICAID	\$5,450,784	5,224,360	(\$226,424)
5	OTHER MEDICAL ASSISTANCE	\$26,850	31,334	\$4,484
6	CHAMPUS / TRICARE	\$27,348	174,774	\$147,426
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,735,686	1,363,537	(\$372,149)
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$66,535,739</b>	<b>\$69,941,980</b>	<b>\$3,406,241</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$96,546,778</b>	<b>\$98,180,414</b>	<b>\$1,633,636</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$49,192,603	\$50,175,134	\$982,531
2	MEDICARE	\$29,160,897	31,444,255	\$2,283,358
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,328,310	14,882,934	\$554,624
4	MEDICAID	\$14,131,391	14,684,173	\$552,782
5	OTHER MEDICAL ASSISTANCE	\$196,919	198,761	\$1,842
6	CHAMPUS / TRICARE	\$193,576	231,144	\$37,568
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,892,808	5,507,937	\$1,615,129
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$43,682,783</b>	<b>\$46,558,333</b>	<b>\$2,875,550</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$92,875,386</b>	<b>\$96,733,467</b>	<b>\$3,858,081</b>
<b>C. TOTAL ACCRUED CHARGES</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$79,203,642	\$78,413,568	(\$790,074)
2	TOTAL MEDICARE	\$90,191,654	\$95,955,767	\$5,764,113
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$19,805,944	\$20,138,628	\$332,684
4	TOTAL MEDICAID	\$19,582,175	\$19,908,533	\$326,358
5	TOTAL OTHER MEDICAL ASSISTANCE	\$223,769	\$230,095	\$6,326
6	TOTAL CHAMPUS / TRICARE	\$220,924	\$405,918	\$184,994
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,628,494	\$6,871,474	\$1,242,980
	<b>TOTAL GOVERNMENT CHARGES</b>	<b>\$110,218,522</b>	<b>\$116,500,313</b>	<b>\$6,281,791</b>
	<b>TOTAL CHARGES</b>	<b>\$189,422,164</b>	<b>\$194,913,881</b>	<b>\$5,491,717</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,471,918	\$12,445,409	(\$26,509)
2	MEDICARE	\$21,772,310	20,627,247	(\$1,145,063)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$1,212,981	1,174,836	(\$38,145)
4	MEDICAID	\$1,206,486	1,168,773	(\$37,713)
5	OTHER MEDICAL ASSISTANCE	\$6,495	6,063	(\$432)
6	CHAMPUS / TRICARE	\$9,678	63,596	\$53,918
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$77,021	14,362	(\$62,659)
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$22,994,969</b>	<b>\$21,865,679</b>	<b>(\$1,129,290)</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$35,466,887</b>	<b>\$34,311,088</b>	<b>(\$1,155,799)</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$23,031,817	\$21,653,767	(\$1,378,050)
2	MEDICARE	\$7,860,506	7,503,025	(\$357,481)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,018,489	4,058,947	\$40,458
4	MEDICAID	\$3,971,009	4,021,519	\$50,510
5	OTHER MEDICAL ASSISTANCE	\$47,480	37,428	(\$10,052)
6	CHAMPUS / TRICARE	\$61,535	61,532	(\$3)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$172,743	63,231	(\$109,512)
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$11,940,530</b>	<b>\$11,623,504</b>	<b>(\$317,026)</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$34,972,347</b>	<b>\$33,277,271</b>	<b>(\$1,695,076)</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$35,503,735	\$34,099,176	(\$1,404,559)
2	TOTAL MEDICARE	\$29,632,816	\$28,130,272	(\$1,502,544)
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$5,231,470	\$5,233,783	\$2,313
4	TOTAL MEDICAID	\$5,177,495	\$5,190,292	\$12,797
5	TOTAL OTHER MEDICAL ASSISTANCE	\$53,975	\$43,491	(\$10,484)
6	TOTAL CHAMPUS / TRICARE	\$71,213	\$125,128	\$53,915
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$249,764	\$77,593	(\$172,171)
	<b>TOTAL GOVERNMENT PAYMENTS</b>	<b>\$34,935,499</b>	<b>\$33,489,183</b>	<b>(\$1,446,316)</b>

**MILFORD 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)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>
	<b>TOTAL PAYMENTS</b>	<b>\$70,439,234</b>	<b>\$67,588,359</b>	<b>(\$2,850,875)</b>
<b>II. PAYER MIX</b>				
<b>A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.84%	14.49%	-1.36%
2	MEDICARE	32.22%	33.10%	0.88%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2.89%	2.70%	-0.20%
4	MEDICAID	2.88%	2.68%	-0.20%
5	OTHER MEDICAL ASSISTANCE	0.01%	0.02%	0.00%
6	CHAMPUS / TRICARE	0.01%	0.09%	0.08%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.92%	0.70%	-0.22%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>35.13%</b>	<b>35.88%</b>	<b>0.76%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>50.97%</b>	<b>50.37%</b>	<b>-0.60%</b>
<b>B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	25.97%	25.74%	-0.23%
2	MEDICARE	15.39%	16.13%	0.74%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	7.56%	7.64%	0.07%
4	MEDICAID	7.46%	7.53%	0.07%
5	OTHER MEDICAL ASSISTANCE	0.10%	0.10%	0.00%
6	CHAMPUS / TRICARE	0.10%	0.12%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.06%	2.83%	0.77%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>23.06%</b>	<b>23.89%</b>	<b>0.83%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>49.03%</b>	<b>49.63%</b>	<b>0.60%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED CHARGES</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.71%	18.41%	0.71%
2	MEDICARE	30.91%	30.52%	-0.39%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.72%	1.74%	0.02%
4	MEDICAID	1.71%	1.73%	0.02%
5	OTHER MEDICAL ASSISTANCE	0.01%	0.01%	0.00%
6	CHAMPUS / TRICARE	0.01%	0.09%	0.08%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.11%	0.02%	-0.09%
	<b>TOTAL INPATIENT GOVERNMENT PAYER MIX</b>	<b>32.65%</b>	<b>32.35%</b>	<b>-0.29%</b>
	<b>TOTAL INPATIENT PAYER MIX</b>	<b>50.35%</b>	<b>50.76%</b>	<b>0.41%</b>
<b>D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	32.70%	32.04%	-0.66%
2	MEDICARE	11.16%	11.10%	-0.06%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.70%	6.01%	0.30%
4	MEDICAID	5.64%	5.95%	0.31%
5	OTHER MEDICAL ASSISTANCE	0.07%	0.06%	-0.01%
6	CHAMPUS / TRICARE	0.09%	0.09%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.25%	0.09%	-0.15%
	<b>TOTAL OUTPATIENT GOVERNMENT PAYER MIX</b>	<b>16.95%</b>	<b>17.20%</b>	<b>0.25%</b>
	<b>TOTAL OUTPATIENT PAYER MIX</b>	<b>49.65%</b>	<b>49.24%</b>	<b>-0.41%</b>
	<b>TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS</b>	<b>100.00%</b>	<b>100.00%</b>	<b>0.00%</b>
<b>III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA</b>				
<b>A. DISCHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,240	1,068	(172)
2	MEDICARE	1,986	2,011	25
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	351	259	(92)
4	MEDICAID	349	258	(91)
5	OTHER MEDICAL ASSISTANCE	2	1	(1)

**MILFORD 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)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>
6	CHAMPUS / TRICARE	3	10	7
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	63	50	(13)
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>2,340</b>	<b>2,280</b>	<b>(60)</b>
	<b>TOTAL DISCHARGES</b>	<b>3,580</b>	<b>3,348</b>	<b>(232)</b>
<b>B.</b>	<b>PATIENT DAYS</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4,297	3,457	(840)
2	MEDICARE	9,198	9,202	4
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,252	917	(335)
4	MEDICAID	1,247	911	(336)
5	OTHER MEDICAL ASSISTANCE	5	6	1
6	CHAMPUS / TRICARE	9	27	18
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	252	175	(77)
	<b>TOTAL GOVERNMENT PATIENT DAYS</b>	<b>10,459</b>	<b>10,146</b>	<b>(313)</b>
	<b>TOTAL PATIENT DAYS</b>	<b>14,756</b>	<b>13,603</b>	<b>(1,153)</b>
<b>C.</b>	<b>AVERAGE LENGTH OF STAY (ALOS)</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.5	3.2	(0.2)
2	MEDICARE	4.6	4.6	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.6	3.5	(0.0)
4	MEDICAID	3.6	3.5	(0.0)
5	OTHER MEDICAL ASSISTANCE	2.5	6.0	3.5
6	CHAMPUS / TRICARE	3.0	2.7	(0.3)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.0	3.5	(0.5)
	<b>TOTAL GOVERNMENT AVERAGE LENGTH OF STAY</b>	<b>4.5</b>	<b>4.5</b>	<b>(0.0)</b>
	<b>TOTAL AVERAGE LENGTH OF STAY</b>	<b>4.1</b>	<b>4.1</b>	<b>(0.1)</b>
<b>D.</b>	<b>CASE MIX INDEX</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.33260	1.34430	0.01170
2	MEDICARE	1.48819	1.47660	(0.01159)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.96735	1.20935	0.24200
4	MEDICAID	0.96408	1.20690	0.24282
5	OTHER MEDICAL ASSISTANCE	1.53870	1.84180	0.30310
6	CHAMPUS / TRICARE	0.57980	1.26520	0.68540
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.32154	0.94562	(0.37592)
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.40890</b>	<b>1.44531</b>	<b>0.03641</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.38247</b>	<b>1.41309</b>	<b>0.03062</b>
<b>E.</b>	<b>OTHER REQUIRED DATA</b>			
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$69,988,341	\$68,766,683	(\$1,221,658)
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$35,620,019	\$25,786,529	(\$9,833,490)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,368,322	\$42,980,154	\$8,611,832
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	49.11%	62.50%	13.40%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$3,586,807	\$2,775,412	(\$811,395)
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,812,087	\$1,640,438	(\$171,649)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$192,533	\$643,601	\$451,068
9	BAD DEBTS	\$7,028,914	\$6,456,481	(\$572,433)
10	TOTAL UNCOMPENSATED CARE	\$7,221,447	\$7,100,082	(\$121,365)
11	TOTAL OTHER OPERATING REVENUE	\$2,505,143	\$1,449,445	(\$1,055,698)
12	TOTAL OPERATING EXPENSES	\$90,685,854	\$80,117,246	(\$10,568,608)
<b>IV.</b>	<b>DSH UPPER PAYMENT LIMIT CALCULATIONS</b>			
<b>A.</b>	<b>CASE MIX ADJUSTED DISCHARGES</b>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,652.42400	1,435.71240	(216.71160)

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>
2	MEDICARE	2,955.54534	2,969.44260	13.89726
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	339.54132	313.22200	(26.31932)
4	MEDICAID	336.46392	311.38020	(25.08372)
5	OTHER MEDICAL ASSISTANCE	3.07740	1.84180	(1.23560)
6	CHAMPUS / TRICARE	1.73940	12.65200	10.91260
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	83.25702	47.28100	(35.97602)
	<b>TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES</b>	<b>3,296.82606</b>	<b>3,295.31660</b>	<b>(1.50946)</b>
	<b>TOTAL CASE MIX ADJUSTED DISCHARGES</b>	<b>4,949.25006</b>	<b>4,731.02900</b>	<b>(218.22106)</b>
<b>B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,032.54635	1,897.66342	-134.88293
2	MEDICARE	948.92386	980.20330	31.27944
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	919.46553	731.50708	-187.95845
4	MEDICAID	904.79745	725.16378	-179.63367
5	OTHER MEDICAL ASSISTANCE	14.66808	6.34330	-8.32478
6	CHAMPUS / TRICARE	21.23475	13.22531	-8.00944
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	141.29682	201.97241	60.67559
	<b>TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>1,889.62414</b>	<b>1,724.93568</b>	<b>-164.68846</b>
	<b>TOTAL OUTPATIENT EQUIVALENT DISCHARGES</b>	<b>3,922.17049</b>	<b>3,622.59910</b>	<b>-299.57139</b>
<b>C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,547.65	\$8,668.46	\$1,120.81
2	MEDICARE	\$7,366.60	\$6,946.50	(\$420.09)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,572.41	\$3,750.81	\$178.40
4	MEDICAID	\$3,585.78	\$3,753.52	\$167.74
5	OTHER MEDICAL ASSISTANCE	\$2,110.55	\$3,291.89	\$1,181.34
6	CHAMPUS / TRICARE	\$5,563.99	\$5,026.56	(\$537.43)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$925.10	\$303.76	(\$621.34)
	<b>TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$6,974.88</b>	<b>\$6,635.38</b>	<b>(\$339.50)</b>
	<b>TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE</b>	<b>\$7,166.11</b>	<b>\$7,252.35</b>	<b>\$86.24</b>
<b>D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,331.51	\$11,410.75	\$79.24
2	MEDICARE	\$8,283.60	\$7,654.56	(\$629.04)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,370.46	\$5,548.75	\$1,178.28
4	MEDICAID	\$4,388.84	\$5,545.67	\$1,156.83
5	OTHER MEDICAL ASSISTANCE	\$3,236.96	\$5,900.40	\$2,663.44
6	CHAMPUS / TRICARE	\$2,897.84	\$4,652.59	\$1,754.75
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,222.55	\$313.07	(\$909.49)
	<b>TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$6,319.00</b>	<b>\$6,738.51</b>	<b>\$419.52</b>
	<b>TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE</b>	<b>\$8,916.58</b>	<b>\$9,186.02</b>	<b>\$269.44</b>
<b>V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>				
1	MEDICAID	\$3,523,971	\$1,529,291	(\$1,994,681)
2	OTHER MEDICAL ASSISTANCE	\$90,199	\$17,858	(\$72,341)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,534,003	\$1,796,855	\$262,851
	<b>TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</b>	<b>\$5,148,174</b>	<b>\$3,344,004</b>	<b>(\$1,804,171)</b>
<b>VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)</b>				
1	TOTAL CHARGES	\$189,422,164	\$194,913,881	\$5,491,717
2	TOTAL GOVERNMENT DEDUCTIONS	\$75,283,023	\$83,011,130	\$7,728,107
3	UNCOMPENSATED CARE	\$7,221,447	\$7,100,082	(\$121,365)
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$34,368,322	\$42,980,154	\$8,611,832
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,812,087	\$1,640,438	(\$171,649)
6	TOTAL ADJUSTMENTS	\$118,684,879	\$134,731,804	\$16,046,925
7	TOTAL ACCRUED PAYMENTS	\$70,737,285	\$60,182,077	(\$10,555,208)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$70,737,285	\$60,182,077	(\$10,555,208)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3734372130	0.3087623965	(0.0646748165)

**MILFORD 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)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>
11	COST OF UNCOMPENSATED CARE	\$2,696,757	\$2,192,238	(\$504,519)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$2,164,807	\$984,268	(\$1,180,538)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$4,861,564	\$3,176,506	(\$1,685,057)
<b>VII. RATIOS</b>				
<b>A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	41.56%	44.07%	2.51%
2	MEDICARE	35.67%	31.97%	-3.70%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	22.14%	22.35%	0.21%
4	MEDICAID	22.13%	22.37%	0.24%
5	OTHER MEDICAL ASSISTANCE	24.19%	19.35%	-4.84%
6	CHAMPUS / TRICARE	35.39%	36.39%	1.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.44%	1.05%	-3.38%
	<b>TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>34.56%</b>	<b>31.26%</b>	<b>-3.30%</b>
	<b>TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES</b>	<b>36.74%</b>	<b>34.95%</b>	<b>-1.79%</b>
<b>B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	46.82%	43.16%	-3.66%
2	MEDICARE	26.96%	23.86%	-3.09%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	28.05%	27.27%	-0.77%
4	MEDICAID	28.10%	27.39%	-0.71%
5	OTHER MEDICAL ASSISTANCE	24.11%	18.83%	-5.28%
6	CHAMPUS / TRICARE	31.79%	26.62%	-5.17%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.44%	1.15%	-3.29%
	<b>TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>27.33%</b>	<b>24.97%</b>	<b>-2.37%</b>
	<b>TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES</b>	<b>37.66%</b>	<b>34.40%</b>	<b>-3.25%</b>
<b>VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>				
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	TOTAL ACCRUED PAYMENTS	\$70,439,234	\$67,588,359	(\$2,850,875)
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$70,439,234</b>	<b>\$67,588,359</b>	<b>(\$2,850,875)</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$14,012,479	\$2,314,956	(\$11,697,523)
4	<b>CALCULATED NET REVENUE</b>	<b>\$93,255,347</b>	<b>\$69,903,315</b>	<b>(\$23,352,032)</b>
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$84,451,715	\$69,903,315	(\$14,548,400)
6	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$8,803,632</b>	<b>\$0</b>	<b>(\$8,803,632)</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED GROSS REVENUE	\$189,422,164	\$194,913,881	\$5,491,717
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	<b>CALCULATED GROSS REVENUE</b>	<b>\$189,422,164</b>	<b>\$194,913,881</b>	<b>\$5,491,717</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$189,422,163	\$194,913,879	\$5,491,716
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$1</b>	<b>\$2</b>	<b>\$1</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$7,221,447	\$7,100,082	(\$121,365)
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND</b>				
<b>BASELINE UNDERPAYMENT DATA</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	\$7,221,447	\$7,100,082	(\$121,365)
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$7,221,447	\$7,100,082	(\$121,365)
4	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

**MILFORD 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)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>
<b>I. ACCRUED CHARGES AND PAYMENTS</b>		
<b>A. INPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$28,238,434
2	MEDICARE	64,511,512
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,255,694
4	MEDICAID	5,224,360
5	OTHER MEDICAL ASSISTANCE	31,334
6	CHAMPUS / TRICARE	174,774
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,363,537
	<b>TOTAL INPATIENT GOVERNMENT CHARGES</b>	<b>\$69,941,980</b>
	<b>TOTAL INPATIENT CHARGES</b>	<b>\$98,180,414</b>
<b>B. OUTPATIENT ACCRUED CHARGES</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$50,175,134
2	MEDICARE	31,444,255
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,882,934
4	MEDICAID	14,684,173
5	OTHER MEDICAL ASSISTANCE	198,761
6	CHAMPUS / TRICARE	231,144
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,507,937
	<b>TOTAL OUTPATIENT GOVERNMENT CHARGES</b>	<b>\$46,558,333</b>
	<b>TOTAL OUTPATIENT CHARGES</b>	<b>\$96,733,467</b>
<b>C. TOTAL ACCRUED CHARGES</b>		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$78,413,568
2	TOTAL GOVERNMENT ACCRUED CHARGES	116,500,313
	<b>TOTAL ACCRUED CHARGES</b>	<b>\$194,913,881</b>
<b>D. INPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,445,409
2	MEDICARE	20,627,247
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,174,836
4	MEDICAID	1,168,773
5	OTHER MEDICAL ASSISTANCE	6,063
6	CHAMPUS / TRICARE	63,596
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	14,362
	<b>TOTAL INPATIENT GOVERNMENT PAYMENTS</b>	<b>\$21,865,679</b>
	<b>TOTAL INPATIENT PAYMENTS</b>	<b>\$34,311,088</b>
<b>E. OUTPATIENT ACCRUED PAYMENTS</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$21,653,767
2	MEDICARE	7,503,025
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,058,947
4	MEDICAID	4,021,519
5	OTHER MEDICAL ASSISTANCE	37,428
6	CHAMPUS / TRICARE	61,532
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	63,231
	<b>TOTAL OUTPATIENT GOVERNMENT PAYMENTS</b>	<b>\$11,623,504</b>
	<b>TOTAL OUTPATIENT PAYMENTS</b>	<b>\$33,277,271</b>
<b>F. TOTAL ACCRUED PAYMENTS</b>		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$34,099,176
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	33,489,183
	<b>TOTAL ACCRUED PAYMENTS</b>	<b>\$67,588,359</b>
<b>II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA</b>		
<b>A. ACCRUED DISCHARGES</b>		

**MILFORD 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)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,068
2	MEDICARE	2,011
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	259
4	MEDICAID	258
5	OTHER MEDICAL ASSISTANCE	1
6	CHAMPUS / TRICARE	10
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	50
	<b>TOTAL GOVERNMENT DISCHARGES</b>	<b>2,280</b>
	<b>TOTAL DISCHARGES</b>	<b>3,348</b>
<b>B. CASE MIX INDEX</b>		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.34430
2	MEDICARE	1.47660
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.20935
4	MEDICAID	1.20690
5	OTHER MEDICAL ASSISTANCE	1.84180
6	CHAMPUS / TRICARE	1.26520
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94562
	<b>TOTAL GOVERNMENT CASE MIX INDEX</b>	<b>1.44531</b>
	<b>TOTAL CASE MIX INDEX</b>	<b>1.41309</b>
<b>C. OTHER REQUIRED DATA</b>		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$68,766,683
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$25,786,529
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$42,980,154
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	62.50%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$2,775,412
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,640,438
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$643,601
9	BAD DEBTS	\$6,456,481
10	TOTAL UNCOMPENSATED CARE	\$7,100,082
11	TOTAL OTHER OPERATING REVENUE	\$1,449,445
12	TOTAL OPERATING EXPENSES	\$80,117,246
<b>III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS</b>		
<b>A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	TOTAL ACCRUED PAYMENTS	\$67,588,359
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	<b>OHCA DEFINED NET REVENUE</b>	<b>\$67,588,359</b>
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$2,314,956
	<b>CALCULATED NET REVENUE</b>	<b>\$69,903,315</b>
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$69,903,315
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>
<b>B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED GROSS REVENUE	\$194,913,881
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0

<b>MILFORD HOSPITAL</b>		
<b>TWELVE MONTHS ACTUAL FILING</b>		
<b>FISCAL YEAR 2013</b>		
<b>REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND</b>		
<b>BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES</b>		
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2013</b>
	<b>CALCULATED GROSS REVENUE</b>	<b>\$194,913,881</b>
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS <b>(FROM ANNUAL REPORTING)</b>	\$194,913,879
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$2</b>
<b>C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS</b>		
1	OHCA DEFINED UNCOMPENSATED CARE <b>(CHARITY CARE AND BAD DEBTS)</b>	\$7,100,082
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	<b>CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)</b>	<b>\$7,100,082</b>
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS <b>(FROM ANNUAL REPORTING)</b>	\$7,100,082
	<b>VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)</b>	<b>\$0</b>

<b>MILFORD HOSPITAL</b>					
<b>TWELVE MONTHS ACTUAL FILING</b>					
<b>FISCAL YEAR 2013</b>					
<b>REPORT 650 - HOSPITAL UNCOMPENSATED CARE</b>					
(1)	(2)	(3)	(4)	(5)	(6)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>	<b>AMOUNT DIFFERENCE</b>	<b>% DIFFERENCE</b>
<b>A. <u>Hospital Charity Care (from HRS Report 500)</u></b>					
1	Number of Applicants	72	512	440	611%
2	Number of Approved Applicants	32	123	91	284%
3	<b>Total Charges (A)</b>	<b>\$192,533</b>	<b>\$643,601</b>	<b>\$451,068</b>	<b>234%</b>
4	<b>Average Charges</b>	<b>\$6,017</b>	<b>\$5,233</b>	<b>(\$784)</b>	<b>-13%</b>
5	Ratio of Cost to Charges (RCC)	0.463229	0.472501	0.009272	2%
6	<b>Total Cost</b>	<b>\$89,187</b>	<b>\$304,102</b>	<b>\$214,915</b>	<b>241%</b>
7	<b>Average Cost</b>	<b>\$2,787</b>	<b>\$2,472</b>	<b>(\$315)</b>	<b>-11%</b>
8	Charity Care - Inpatient Charges	\$99,912	\$424,743	\$324,831	325%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	16,752	105,854	89,102	532%
10	Charity Care - Emergency Department Charges	75,869	113,004	37,135	49%
11	<b>Total Charges (A)</b>	<b>\$192,533</b>	<b>\$643,601</b>	<b>\$451,068</b>	<b>234%</b>
12	Charity Care - Number of Patient Days	22	75	53	241%
13	Charity Care - Number of Discharges	8	24	16	200%
14	Charity Care - Number of Outpatient ED Visits	62	76	14	23%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	5	15	10	200%
<b>B. <u>Hospital Bad Debts (from HRS Report 500)</u></b>					
1	Bad Debts - Inpatient Services	\$2,512,309	\$1,408,208	(\$1,104,101)	-44%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	4,516,605	5,048,273	531,668	12%
3	Bad Debts - Emergency Department	0	0	0	0%
4	<b>Total Bad Debts (A)</b>	<b>\$7,028,914</b>	<b>\$6,456,481</b>	<b>(\$572,433)</b>	<b>-8%</b>
<b>C. <u>Hospital Uncompensated Care (from HRS Report 500)</u></b>					
1	Charity Care (A)	\$192,533	\$643,601	\$451,068	234%
2	Bad Debts (A)	7,028,914	6,456,481	(572,433)	-8%
3	<b>Total Uncompensated Care (A)</b>	<b>\$7,221,447</b>	<b>\$7,100,082</b>	<b>(\$121,365)</b>	<b>-2%</b>
4	Uncompensated Care - Inpatient Services	\$2,612,221	\$1,832,951	(\$779,270)	-30%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	4,533,357	5,154,127	620,770	14%
6	Uncompensated Care - Emergency Department	75,869	113,004	37,135	49%
7	<b>Total Uncompensated Care (A)</b>	<b>\$7,221,447</b>	<b>\$7,100,082</b>	<b>(\$121,365)</b>	<b>-2%</b>
<b>(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.</b>					

MILFORD 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>
<b><u>COMMERCIAL - ALL PAYERS</u></b>					
1	Total Gross Revenue	\$69,988,341	\$68,766,683	(\$1,221,658)	-2%
2	Total Contractual Allowances	\$34,368,322	\$42,980,154	\$8,611,832	25%
	<b>Total Accrued Payments (A)</b>	<b>\$35,620,019</b>	<b>\$25,786,529</b>	<b>(\$9,833,490)</b>	<b>-28%</b>
	<b>Total Discount Percentage</b>	<b>49.11%</b>	<b>62.50%</b>	<b>13.40%</b>	<b>27%</b>
<b>(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.</b>					

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>
<b>A. <u>Gross and Net Revenue</u></b>				
1	Inpatient Gross Revenue	\$95,337,039	\$96,546,778	\$98,180,414
2	Outpatient Gross Revenue	\$88,772,941	\$92,875,386	\$96,733,467
3	Total Gross Patient Revenue	\$184,109,980	\$189,422,164	\$194,913,881
4	Net Patient Revenue	\$79,860,535	\$84,451,715	\$69,903,315
<b>B. <u>Total Operating Expenses</u></b>				
1	Total Operating Expense	\$85,587,522	\$90,685,854	\$80,117,246
<b>C. <u>Utilization Statistics</u></b>				
1	Patient Days	17,312	14,756	13,603
2	Discharges	4,374	3,580	3,348
3	Average Length of Stay	4.0	4.1	4.1
4	Equivalent (Adjusted) Patient Days (EPD)	33,432	28,951	27,006
0	Equivalent (Adjusted) Discharges (ED)	8,447	7,024	6,647
<b>D. <u>Case Mix Statistics</u></b>				
1	Case Mix Index	1.29945	1.38247	1.41309
2	Case Mix Adjusted Patient Days (CMAPD)	22,496	20,400	19,222
3	Case Mix Adjusted Discharges (CMAD)	5,684	4,949	4,731
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	43,443	40,024	38,161
5	Case Mix Adjusted Equivalent Discharges (CMAED)	10,976	9,710	9,392
<b>E. <u>Gross Revenue Per Statistic</u></b>				
1	Total Gross Revenue per Patient Day	\$10,635	\$12,837	\$14,329
2	Total Gross Revenue per Discharge	\$42,092	\$52,911	\$58,218
3	Total Gross Revenue per EPD	\$5,507	\$6,543	\$7,218
4	Total Gross Revenue per ED	\$21,796	\$26,968	\$29,325
5	Total Gross Revenue per CMAEPD	\$4,238	\$4,733	\$5,108
6	Total Gross Revenue per CMAED	\$16,773	\$19,507	\$20,752
7	Inpatient Gross Revenue per EPD	\$2,852	\$3,335	\$3,636
8	Inpatient Gross Revenue per ED	\$11,287	\$13,746	\$14,771

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>
<b>F.</b>	<b><u>Net Revenue Per Statistic</u></b>			
1	Net Patient Revenue per Patient Day	\$4,613	\$5,723	\$5,139
2	Net Patient Revenue per Discharge	\$18,258	\$23,590	\$20,879
3	Net Patient Revenue per EPD	\$2,389	\$2,917	\$2,588
4	Net Patient Revenue per ED	\$9,454	\$12,024	\$10,517
5	Net Patient Revenue per CMAEPD	\$1,838	\$2,110	\$1,832
6	Net Patient Revenue per CMAED	\$7,276	\$8,697	\$7,443
<b>G.</b>	<b><u>Operating Expense Per Statistic</u></b>			
1	Total Operating Expense per Patient Day	\$4,944	\$6,146	\$5,890
2	Total Operating Expense per Discharge	\$19,567	\$25,331	\$23,930
3	Total Operating Expense per EPD	\$2,560	\$3,132	\$2,967
4	Total Operating Expense per ED	\$10,132	\$12,911	\$12,054
5	Total Operating Expense per CMAEPD	\$1,970	\$2,266	\$2,099
6	Total Operating Expense per CMAED	\$7,798	\$9,339	\$8,530
<b>H.</b>	<b><u>Nursing Salary and Fringe Benefits Expense</u></b>			
1	Nursing Salary Expense	\$16,272,813	\$16,612,248	\$16,446,079
2	Nursing Fringe Benefits Expense	\$6,268,543	\$6,871,624	\$5,577,143
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense</b>	<b>\$22,541,356</b>	<b>\$23,483,872</b>	<b>\$22,023,222</b>
<b>I.</b>	<b><u>Physician Salary and Fringe Expense</u></b>			
1	Physician Salary Expense	\$5,349,273	\$5,506,935	\$5,633,239
2	Physician Fringe Benefits Expense	\$867,350	\$771,654	\$695,961
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense</b>	<b>\$6,216,623</b>	<b>\$6,278,589</b>	<b>\$6,329,200</b>
<b>J.</b>	<b><u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u></b>			
1	Non-Nursing, Non-Physician Salary Expense	\$16,329,168	\$15,846,036	\$15,739,752
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$6,291,068	\$6,895,421	\$5,907,420
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense</b>	<b>\$22,620,236</b>	<b>\$22,741,457</b>	<b>\$21,647,172</b>

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
(1)	(2)	(3)	(4)	(5)
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>
<b>K.</b>	<b>Total Salary and Fringe Benefits Expense</b>			
1	Total Salary Expense	\$37,951,254	\$37,965,219	\$37,819,070
2	Total Fringe Benefits Expense	\$13,426,961	\$14,538,699	\$12,180,524
<b>3</b>	<b>Total Salary and Fringe Benefits Expense</b>	<b>\$51,378,215</b>	<b>\$52,503,918</b>	<b>\$49,999,594</b>
<b>L.</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>			
1	Total Nursing FTEs	196.0	195.0	170.7
2	Total Physician FTEs	21.5	18.0	20.6
3	Total Non-Nursing, Non-Physician FTEs	287.5	294.0	307.3
<b>4</b>	<b>Total Full Time Equivalent Employees (FTEs)</b>	<b>505.0</b>	<b>507.0</b>	<b>498.6</b>
<b>M.</b>	<b>Nursing Salaries and Fringe Benefits Expense per FTE</b>			
1	Nursing Salary Expense per FTE	\$83,025	\$85,191	\$96,345
2	Nursing Fringe Benefits Expense per FTE	\$31,982	\$35,239	\$32,672
<b>3</b>	<b>Total Nursing Salary and Fringe Benefits Expense per FTE</b>	<b>\$115,007</b>	<b>\$120,430</b>	<b>\$129,017</b>
<b>N.</b>	<b>Physician Salary and Fringe Expense per FTE</b>			
1	Physician Salary Expense per FTE	\$248,803	\$305,941	\$273,458
2	Physician Fringe Benefits Expense per FTE	\$40,342	\$42,870	\$33,785
<b>3</b>	<b>Total Physician Salary and Fringe Benefits Expense per FTE</b>	<b>\$289,145</b>	<b>\$348,811</b>	<b>\$307,243</b>
<b>O.</b>	<b>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</b>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$56,797	\$53,898	\$51,219
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$21,882	\$23,454	\$19,224
<b>3</b>	<b>Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE</b>	<b>\$78,679</b>	<b>\$77,352</b>	<b>\$70,443</b>
<b>P.</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>			
1	Total Salary Expense per FTE	\$75,151	\$74,882	\$75,851
2	Total Fringe Benefits Expense per FTE	\$26,588	\$28,676	\$24,429
<b>3</b>	<b>Total Salary and Fringe Benefits Expense per FTE</b>	<b>\$101,739</b>	<b>\$103,558</b>	<b>\$100,280</b>
<b>Q.</b>	<b>Total Salary and Fringe Ben. Expense per Statistic</b>			

<b>MILFORD HOSPITAL</b>				
<b>TWELVE MONTHS ACTUAL FILING</b>				
<b>FISCAL YEAR 2013</b>				
<b>REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE</b>				
<b>(1)</b>	<b>(2)</b>	<b>(3)</b>	<b>(4)</b>	<b>(5)</b>
<b>LINE</b>	<b>DESCRIPTION</b>	<b>ACTUAL FY 2011</b>	<b>ACTUAL FY 2012</b>	<b>ACTUAL FY 2013</b>
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,968	\$3,558	\$3,676
2	Total Salary and Fringe Benefits Expense per Discharge	\$11,746	\$14,666	\$14,934
3	Total Salary and Fringe Benefits Expense per EPD	\$1,537	\$1,814	\$1,851
4	Total Salary and Fringe Benefits Expense per ED	\$6,083	\$7,475	\$7,523
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,183	\$1,312	\$1,310
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,681	\$5,407	\$5,323