

Office of Health Strategy Hospital Assessment

By: Nicole Dube, Principal Analyst
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Issue

This report addresses several questions related to the hospital assessment imposed by the Office of Health Strategy (OHS), which covers the costs of the OHS Health System Planning Unit (HSPU).

1. What is the hospital assessment?

By law, HSPU annually assesses short-term acute care and children's hospitals for the costs of its operation. Each hospital is required to pay its share of the HSPU's actual expenditures into the state's General Fund, which includes the amounts for fringe benefits of the unit's personnel, services the unit provides, and expenditures made on HSPU's behalf from the Capital Equipment Purchase Fund ([CGS §§ 19a-631](#) and [19a-632](#)). (This fund is used to purchase certain state agency equipment, such as printers, scanners, vehicles, and information technology ([CGS § 4a-9](#))).

2. What specific OHS activities, programs, or functions are funded by the hospital assessment?

By law, the assessment is limited to only those activities performed by its HSPU and not the entire office. According to OHS, staff performing the following activities are included in the assessment.

Statewide Health Care Facility Utilization Study

HSPU staff conduct the statewide health care facility utilization study required under existing law ([CGS § 19a-634\(a\)](#), as amended by [PA 25-168](#), § 338). This information is included in the biennial [Healthcare Facilities and Services Inventory](#). (OHS is required to keep an inventory of all health care facilities and services, including specific imaging equipment (e.g. MRI and CT scanners).) Additional data is included in hospital and large group practice annual and 12-month [filings](#) (see below).

Statewide Health Care Facilities and Services Plan

By law, HSPU staff must establish and maintain the biennial [Statewide Health Care Facilities and Services Plan](#). Among other things, this plan (1) assesses the availability of care across various health care settings; (2) evaluates unmet needs of at-risk and vulnerable populations; (3) projects future demand for health care services and the impact that technology may have on this demand; and (4) makes recommendations for expanding, reducing, or modifying health care facilities or services ([CGS § 19a-634\(b\)](#)).

Certificate of Need Program

HSPU staff administer the state's certificate of need (CON) program for health care facilities. Under the program, health care entities must generally receive CON approval when establishing new facilities or services, changing ownership, acquiring certain equipment, or terminating certain services ([CGS § 19a-638 et seq.](#)).

Cost and Market Impact Reviews

As part of the CON program, HSPU conduct cost and market impact reviews for applications to transfer hospital ownership if the purchaser is (1) an in- or out-of-state hospital or hospital system that had net patient revenue exceeding \$1.5 billion for FY 13 or (2) organized or operated for profit ([CGS § 19a-639f](#)).

Hospital and Large Group Practice Data Filings

According to OHS, HSPU collects certain notification and data filings from hospitals and large group practices (i.e. eight or more physicians), including the following:

1. affiliate filings;
2. annual reporting and 12-month actual filings;
3. facility fees filings;

4. group practice filings;
5. hospital pricemaster/chargemaster filings;
6. specialty hospital filings;
7. medical foundation notifications;
8. notice of material changes;
9. trauma activation filings; and
10. outpatient surgery data reporting (see [CGS §§ 19a-644, 19a-508c](#), as amended by [PA 25-94](#), § 10, and [19a-681](#), & [Conn. Agencies Regs., § 19a-643-206](#)).

Hospital Financial Stability Analysis

According to OHS, HSPU staff publish reports that analyze the financial stability of Connecticut's hospitals and (1) highlight industry trends and (2) report individual hospital profiles, including the following:

1. [Annual Report](#) on the Financial Status of Connecticut's Short Term Acute Care Hospitals ([CGS § 19a-670](#));
2. [Reports](#) on Trauma Activation Fee Information (see [CGS § 19a-644](#) and this [2025 OHS Presentation](#)); and
3. Annual Facility Fee Data [Report](#) ([CGS §§ 19a-508c\(c\),\(k\),\(l\), and \(m\)](#), as amended by [PA 25-94](#), § 10).

Patient Hospital Billing Assistance

In certain situations, HSPU staff help patients obtain hospital bills for actual or anticipated services. By law hospitals must file their current pricemaster (detailed schedule of charges) with HSPU. The unit may request, on a patient's behalf, a copy of the patient's detailed bill. If the billing detail by line item on a patient's bill conflicts with the information filed with HSPU, the hospital is subject to a civil penalty of \$500 per occurrence. (The hospital has 15 business days to contest the penalty.) HSPU may also order the hospital to adjust the bill to be consistent with the charges on file ([CGS § 19a-681](#)).

3. What was the pay schedule for 2025? What is the current 2026 hospital pay schedule?

OHS provided the hospital funding allocation schedules for state fiscal years 2025 and 2026 shown in Figures 1 and 2 below.

Figure 1. SFY 2025 Hospital Allocation Funding by Hospital

SFY 2025 ALLOCATION OF HSP FUNDING BY HOSPITAL							
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
	FY 2023 ACTUAL NET REVENUE	FY 2025 ALLOCATION OF HSP FUNDING	CREDIT / DEBIT TO BE APPLIED TO THE 12/31/2024 ASSESSMENT	FY 2025 ASSESSMENT DUE 12/31/2024	FY 2025 ASSESSMENT DUE 03/31/2025	FY 2025 ASSESSMENT DUE 06/30/2025	FY 2025 ASSESSMENT DUE 09/30/2025
HOSPITALS	Report 600 SECT II.A AFTER LINE 2	C.1/C.1 Total X C.2 Total	BUDGETED VS ACTUAL HSP EXPENSES-ATT B	C.2/4 + C3 (SEE NOTE)	C.2/4 (SEE NOTE)	C.2/4 (SEE NOTE)	C.2/4 (SEE NOTE)
BRIDGEPORT HOSPITAL	\$770,861,994.00	\$317,611.27	(\$45,099.22)	\$34,303.60	\$79,402.82	\$79,402.82	\$79,402.82
BRISTOL HOSPITAL	\$162,666,204.00	\$67,021.88	(\$9,189.20)	\$7,566.27	\$16,755.47	\$16,755.47	\$16,755.47
CHARLOTTE HUNGERFORD HOSPITAL	\$173,286,999.35	\$71,397.87	(\$9,909.54)	\$7,939.93	\$17,849.47	\$17,849.47	\$17,849.47
CT CHILDREN'S MEDICAL CENTER	\$467,816,565.00	\$192,750.21	(\$25,240.86)	\$22,946.69	\$48,187.55	\$48,187.55	\$48,187.55
DANBURY HOSPITAL	\$785,064,000.00	\$323,462.79	(\$43,293.17)	\$37,572.53	\$80,865.70	\$80,865.70	\$80,865.70
DAY KIMBALL HOSPITAL	\$110,233,467.00	\$45,418.49	(\$6,454.54)	\$4,900.08	\$11,354.62	\$11,354.62	\$11,354.62
GREENWICH HOSPITAL	\$484,920,841.00	\$199,797.53	(\$30,161.99)	\$19,787.39	\$49,949.38	\$49,949.38	\$49,949.38
GRIFFIN HOSPITAL	\$228,355,124.00	\$94,087.09	(\$13,152.40)	\$10,369.37	\$23,521.77	\$23,521.77	\$23,521.77
HARTFORD HOSPITAL	\$1,827,488,412.00	\$752,963.46	(\$104,053.11)	\$84,187.76	\$188,240.86	\$188,240.86	\$188,240.86
JOHN DEMPSEY HOSPITAL	\$590,258,174.00	\$243,198.72	(\$32,334.48)	\$28,465.20	\$60,799.68	\$60,799.68	\$60,799.68
JOHNSON MEMORIAL HOSPITAL	\$58,335,000.00	\$24,035.24	(\$4,020.15)	\$1,988.66	\$6,008.81	\$6,008.81	\$6,008.81
LAWRENCE AND MEMORIAL HOSPITAL	\$451,562,001.00	\$186,052.99	(\$25,603.30)	\$20,909.95	\$46,513.25	\$46,513.25	\$46,513.25
MANCHESTER MEMORIAL HOSPITAL	\$204,862,569.00	\$84,407.66	(\$12,377.64)	\$8,724.27	\$21,101.92	\$21,101.92	\$21,101.92
MIDDLESEX HOSPITAL	\$483,456,628.00	\$199,194.24	(\$27,237.15)	\$22,561.41	\$49,798.56	\$49,798.56	\$49,798.56
MIDSTATE MEDICAL CENTER	\$359,841,959.70	\$148,262.42	(\$21,000.93)	\$16,064.67	\$37,065.60	\$37,065.60	\$37,065.60
NORWALK HOSPITAL	\$354,913,349.00	\$146,231.72	(\$20,282.43)	\$16,275.50	\$36,557.93	\$36,557.93	\$36,557.93
ROCKVILLE GENERAL HOSPITAL	\$30,707,093.00	\$12,651.96	(\$1,766.10)	\$1,396.90	\$3,162.99	\$3,162.99	\$3,162.99
SAINT FRANCIS HOSPITAL AND MEDICAL CENTER	\$861,830,000.00	\$355,091.99	(\$54,609.91)	\$34,163.09	\$88,773.00	\$88,773.00	\$88,773.00
SAINT MARY'S HOSPITAL	\$313,555,000.00	\$129,191.22	(\$19,702.42)	\$12,595.38	\$32,297.80	\$32,297.80	\$32,297.80
SAINT VINCENT'S MEDICAL CENTER	\$548,175,560.00	\$225,859.80	(\$29,152.33)	\$27,312.62	\$56,464.95	\$56,464.95	\$56,464.95
SHARON HOSPITAL	\$47,656,579.00	\$19,635.51	(\$2,931.77)	\$1,977.11	\$4,908.88	\$4,908.88	\$4,908.88
STAMFORD HOSPITAL	\$771,864,954.00	\$318,024.51	(\$44,689.49)	\$34,816.63	\$79,506.13	\$79,506.13	\$79,506.13
THE HOSPITAL OF CENTRAL CONNECTICUT	\$614,375,808.00	\$253,135.69	(\$32,816.24)	\$30,467.68	\$63,283.92	\$63,283.92	\$63,283.92
WATERBURY HOSPITAL	\$241,603,495.00	\$99,545.69	(\$14,825.66)	\$10,060.76	\$24,886.42	\$24,886.42	\$24,886.42
WILLIAM W. BACKUS HOSPITAL	\$442,951,132.00	\$182,505.13	(\$24,933.97)	\$20,692.31	\$45,626.28	\$45,626.28	\$45,626.28
WINDHAM COMMUNITY MEMORIAL HOSPITAL	\$118,430,316.00	\$48,795.77	(\$7,492.09)	\$4,706.85	\$12,198.94	\$12,198.94	\$12,198.94
YALE-NEW HAVEN HOSPITAL	\$3,616,712,999.00	\$1,490,161.42	(\$208,177.10)	\$164,363.26	\$372,540.35	\$372,540.35	\$372,540.35
Total	\$15,121,786,223.05	\$6,230,492.27	(\$870,507.19)	\$687,115.88	\$1,557,623.07	\$1,557,623.07	\$1,557,623.07

Note : Quarterly Assessment Amount excludes any Previous Assessments and Late Fees owed

Figure 2. SFY 2026 Hospital Allocation Funding by Hospital

SFY 2026 ALLOCATION OF HSP FUNDING BY HOSPITAL							
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
	FY 2024 ACTUAL NET REVENUE	FY 2026 ALLOCATION OF HSP FUNDING	CREDIT / DEBIT TO BE APPLIED TO THE 12/31/2025 ASSESSMENT	FY 2026 ASSESSMENT DUE 12/31/2025	FY 2026 ASSESSMENT DUE 03/31/2026	FY 2026 ASSESSMENT DUE 06/30/2026	FY 2026 ASSESSMENT DUE 09/30/2026
HOSPITALS	Report 600 SECT II.A AFTER LINE 2	C.1/C.1 Total X C.2 Total	BUDGETED VS ACTUAL HSP EXPENSES-ATT B	C.2/4 + C3 (SEE NOTE)	C.2/4 (SEE NOTE)	C.2/4 (SEE NOTE)	C.2/4 (SEE NOTE)
BRIDGEPORT HOSPITAL	\$840,181,994.00	\$332,263.26	\$11,849.63	\$94,915.44	\$83,065.82	\$83,065.82	\$83,065.82
BRISTOL HOSPITAL	\$164,513,055.00	\$65,059.29	\$2,500.49	\$18,765.31	\$16,264.82	\$16,264.82	\$16,264.82
CHARLOTTE HUNGERFORD HOSPITAL	\$188,512,747.00	\$74,550.35	\$2,663.75	\$21,301.34	\$18,637.59	\$18,637.59	\$18,637.59
CT CHILDREN`S MEDICAL CENTER	\$497,668,983.00	\$196,811.07	\$7,191.24	\$56,394.01	\$49,202.77	\$49,202.77	\$49,202.77
DANBURY HOSPITAL	\$818,843,000.00	\$323,824.42	\$12,067.94	\$93,024.05	\$80,956.10	\$80,956.10	\$80,956.10
DAY KIMBALL HOSPITAL	\$110,954,775.00	\$43,878.82	\$1,694.50	\$12,664.21	\$10,969.71	\$10,969.71	\$10,969.71
GREENWICH HOSPITAL	\$521,546,322.00	\$206,253.74	\$7,454.16	\$59,017.60	\$51,563.44	\$51,563.44	\$51,563.44
GRIFFIN HOSPITAL	\$240,430,765.00	\$95,082.15	\$3,510.26	\$27,280.79	\$23,770.54	\$23,770.54	\$23,770.54
HARTFORD HOSPITAL	\$1,995,038,537.00	\$788,969.55	\$28,092.01	\$225,334.40	\$197,242.39	\$197,242.39	\$197,242.39
JOHN DEMPSEY HOSPITAL	\$660,401,437.00	\$261,166.20	\$9,073.40	\$74,364.95	\$65,291.55	\$65,291.55	\$65,291.55
JOHNSON MEMORIAL HOSPITAL	\$71,300,000.00	\$28,196.71	\$896.72	\$7,945.90	\$7,049.18	\$7,049.18	\$7,049.18
LAWRENCE AND MEMORIAL HOSPITAL	\$480,463,000.00	\$190,006.69	\$6,941.38	\$54,443.05	\$47,501.67	\$47,501.67	\$47,501.67
MANCHESTER MEMORIAL HOSPITAL	\$225,663,275.00	\$89,242.11	\$3,149.13	\$25,459.66	\$22,310.53	\$22,310.53	\$22,310.53
MIDDLESEX HOSPITAL	\$501,352,710.00	\$198,267.86	\$7,431.66	\$56,998.62	\$49,566.97	\$49,566.97	\$49,566.97
MIDSTATE MEDICAL CENTER	\$403,718,120.00	\$159,656.72	\$5,531.46	\$45,445.64	\$39,914.18	\$39,914.18	\$39,914.18
NORWALK HOSPITAL	\$374,135,377.00	\$147,957.75	\$5,455.70	\$42,445.14	\$36,989.44	\$36,989.44	\$36,989.44
ROCKVILLE GENERAL HOSPITAL	\$29,616,868.00	\$11,712.46	\$472.03	\$3,400.14	\$2,928.11	\$2,928.11	\$2,928.11
SAINT FRANCIS HOSPITAL AND MEDICAL CENTER	\$808,928,000.00	\$319,903.37	\$13,247.98	\$93,223.83	\$79,975.84	\$79,975.84	\$79,975.84
SAINT MARY`S HOSPITAL	\$340,005,000.00	\$134,460.36	\$4,819.94	\$38,435.03	\$33,615.09	\$33,615.09	\$33,615.09
SAINT VINCENT`S MEDICAL CENTER	\$573,844,694.00	\$226,935.96	\$8,426.51	\$65,160.50	\$56,733.99	\$56,733.99	\$56,733.99
SHARON HOSPITAL	\$51,350,373.00	\$20,307.32	\$732.57	\$5,809.40	\$5,076.83	\$5,076.83	\$5,076.83
STAMFORD HOSPITAL	\$851,683,027.00	\$336,811.53	\$11,260.40	\$95,463.28	\$84,202.88	\$84,202.88	\$84,202.88
THE HOSPITAL OF CENTRAL CONNECTICUT	\$665,144,589.00	\$263,041.95	\$9,444.14	\$75,204.62	\$65,760.49	\$65,760.49	\$65,760.49
WATERBURY HOSPITAL	\$235,582,856.60	\$93,164.97	\$3,713.91	\$27,005.15	\$23,291.24	\$23,291.24	\$23,291.24
WILLIAM W. BACKUS HOSPITAL	\$490,698,146.00	\$194,054.34	\$6,809.01	\$55,322.60	\$48,513.59	\$48,513.59	\$48,513.59
WINDHAM COMMUNITY MEMORIAL HOSPITAL	\$110,864,115.00	\$43,842.97	\$1,820.50	\$12,781.24	\$10,960.74	\$10,960.74	\$10,960.74
YALE-NEW HAVEN HOSPITAL	\$3,986,332,999.00	\$1,576,458.45	\$55,595.83	\$449,710.44	\$394,114.61	\$394,114.61	\$394,114.61
Total	\$16,238,774,764.60	\$6,421,880.37	\$231,846.26	\$1,837,316.35	\$1,605,470.09	\$1,605,470.09	\$1,605,470.09

Note : Quarterly Assessment Amount excludes any Previous Assessments and Late Fees owed

4. Which HSPU staff positions are supported by the hospital assessment?

According to OHS, the following positions are gross funded through an appropriation, and the assessment for the activities performed is deposited into the General Fund:

1. Administrative Assistant
2. Agency Legal Director*
3. Associate Healthcare Analyst+
4. Associate Research Analyst+
5. Commissioner*
6. Director of Communications 1*
7. Executive Assistant 2
8. Executive Secretary
9. Fiscal/Administrative Supervisor*
10. Grants and Contracts Specialist*
11. HCA Director of Operations
12. Health Care Analyst+
13. Lead Planning Analyst
14. Legislative & Regulations Specialist
15. Manager of Research & Planning
16. Paralegal Specialist
17. Planning Analyst*
18. Planning Specialist
19. Principal Health Care Analyst+
20. Research Analyst

21. Staff Attorney 2

22. Staff Attorney 3+

(* means partial General Fund funding and + means multiple full-time employees in that job class)

5. How is the hospital assessment calculated?

Each short-term acute care general hospital and children's hospital is assessed annually for the amount the state appropriates to cover HSPU's costs. HSPU must recalculate the proposed assessment at the end of each fiscal year, based on its costs, using actual expenditures during that fiscal year and actual expenditures from the Capital Equipment Purchase Fund ([CGS § 19a-631](#)). State law sets the method for calculating the assessment as described below.

Initial and Recalculated Assessments

When calculating a hospital's assessment, HSPU must first determine, by September 1 annually, each hospital's total net revenue using data hospitals report under existing law ([CGS §§ 19a-649](#), [-659\(14\)](#), and [-676](#)). The hospital's assessment is calculated by multiplying the hospital's percentage share of the total net revenue for all hospitals by the HSPU's operating cost ([CGS § 19a-632\(a\)](#)).

Under the law, HSPU's operating costs include the total of the following estimates by the comptroller for the fiscal year: (1) the amount appropriated for HSPU's operation, (2) the costs of fringe benefits for HSPU staff, (3) expenses for central state services HSPU provides, and (4) expenditures from the Capital Equipment Purchase Fund made on HSPU's behalf ([CGS § 19a-632\(b\)](#)).

The law requires HSPU to recalculate the assessment at the end of each fiscal year to reconcile HSPU's appropriated expenses and its actual expenses. By each August 31, HSPU must give each hospital (1) an expense report for the prior fiscal year that shows HSPU's actual versus budgeted expenses and (2) a statement showing the difference between the recalculated assessment and the amount previously paid ([CGS § 19a-632\(d\)](#)). OHS notes that when preparing these documents, HSPU contacts the Department of Public Health's Fiscal Services Office to help determine its actual expenses.

By September 30 annually, HSPU must then make adjustments to these statements based on hospitals' objections and give an adjusted assessment, if any, to affected hospitals ([CGS § 19a-632\(d\)](#)).

Hospital Payments

Hospitals must pay their assessment in quarterly payments. The first payment is due by each December 31st and includes any credits or amounts due based on the recalculated assessment for the prior fiscal year. Hospitals pay the remaining 75% of their assessment (i.e. 75% of the amount appropriated for HSPU's operating expenses for that fiscal year) in three equal installments by each March 31st, June 30th, and September 30th ([CGS § 19a-632\(c\)](#)).

If hospitals fail to make these payments, OHS charges the following late fees: (1) 2% for payments late by up to five days, (2) 5% for payments late by six to 15 days, and (3) 10% for payments over 15 days late. For payments overdue by more than 30 days, the OHS commissioner has the option to further impose a civil penalty of up to \$1,000 per day for each day after the initial 30 days the assessment is not paid ([CGS § 19a-632\(e\)](#)).

Additionally, the law requires hospitals to pay their assessments by an approved method of electronic funds transfer and those who fail to do so are subject to a 10% penalty ([CGS § 19a-632a](#)).

6. How is this annual hospital assessment different from CON application fees, which range from \$1,000 to \$10,000 under existing law?

The annual hospital assessment is a recurring charge imposed on Connecticut hospitals to support HSPU's operating costs, whereas CON application fees are charges assessed only when a health care entity seeks approval under the CON program. The CON program's application fee schedule and requirements are set in statute (see [CGS § 19a-639a](#)).

7. Why are only hospitals assessed when other health care entities, such as ambulatory surgery centers, imaging centers, and other entities, also engage in CON activities?

According to OHS, other health care entities are not included in the assessment because (1) existing law limits the assessment to short-term acute care and children's hospitals (see [CGS § 19a-631](#)) and (2) HSPU's activities extend beyond administering the CON program, as noted above.

8. Provide a five-year breakdown of CON applications by short-term acute care and children’s hospitals versus non-hospital entities.

According to OHS, 114 CON applications were filed from 2021 through 2025 as shown in Table 1 below.

Table 1: CON Applications 2021-2025

Type of License	Number of Applications*
Children’s Hospitals	3
Short-Term Acute Care Hospitals	28
Health System Level or Hospital Acquisitions	3
Non-Hospital Entities**	80
Total	114

* Includes applications filed but later withdrawn

** Includes Middlesex Hospital Cancer Center and medical groups

OHS noted certain limitations with this data. First, the data is based on who the applicant identified as the applying entity, which may obscure some of the data. For example, an applicant may identify the applying entity as an ambulatory surgery center (ASC) filing a transfer of ownership application, however the applicant is a hospital that previously owned 49% of the ASC proposing to take an additional 2% equity so that it would now control that ASC. If the applicant was coded as the ASC, rather than the hospital acquiring the ASC, it would show up in the above data as a “non-hospital entity” rather than as a short-term acute care hospital applicant. Second, certain types of CON applications, such as medical equipment acquisitions, involve both hospital and non-hospital entities.

Additional CON application data is available on the [CON website](#), including a summary of applications by type over the past five years.

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