

The MARYLAND
HEALTH SERVICES COST REVIEW COMMISSION



REPORT TO THE GOVERNOR

FISCAL YEAR 2010

MARTIN O'MALLEY

GOVERNOR

**STATE OF MARYLAND
HEALTH SERVICES COST REVIEW COMMISSION**

Commissioners as of June 30, 2010

	<u>Appointed</u>	<u>Term Expires</u>
Donald A. Young, M.D. Chairman	July 1, 2007 (Replaced Chairman Irvin W. Kues)	June 30, 2010
Joseph Antos, Ph.D.	July 1, 2004 July 1, 2008*	June 30, 2008 June 30, 2012
Trudy R. Hall, M.D., P.A.	July 1, 2002 July 1, 2006*	June 30, 2006 June 30, 2010
Steven B. Larsen, J.D.	June 15, 2009 (Resigned on May 6, 2010)	June 30, 2013
C. James Lowthers	July 1, 2007	June 30, 2011
Kevin J. Sexton	July 1, 2003 (Appointed Vice Chairman October, 2005) July 1, 2007*	June 30, 2007 June 30, 2011
Herbert S. Wong, Ph.D.	March 25, 2008** July 1, 2009*	June 30, 2009 June 30, 2013

*Reappointed

**Effective March 25, 2008, Herbert S. Wong, Ph.D., replaced William Munn, Commissioner.

STATE OF MARYLAND
HEALTH SERVICES COST REVIEW COMMISSION
ANNUAL REPORT TO THE GOVERNOR

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This Governor's Report focuses on activities of the Health Services Cost Review Commission ("HSCRC," or "Commission") for the Fiscal Year (FY) 2010. Audited hospital data throughout the report, however, are for the most recent fiscal year available, which in most cases is FY 2009.

I. OVERVIEW

Continuing to build on the significant change that began in FY 2000 with the redesign of the hospital rate setting system that had been place for 25 years, the HSCRC further refined changes to the system in FY 2010. The redesigned system has demonstrated its effectiveness in achieving the founding principles of the Maryland system - they are the principles of access, cost containment, equity, public accountability, and solvency. In recent years, the HSCRC has also devoted considerable resources toward improving the overall quality of hospital care.

A. Maryland Hospital Cost Performance

The HSCRC's FY 2009 Disclosure Statement reported that the average amount paid for a hospital admission in Maryland rose from \$10,443 in FY 2008 to \$10,767 in FY 2009. This 3% growth in Maryland is below the anticipated national average increase of 4.5 % for the same period.

The rate setting system has retained other unique benefits, such as keeping the mark-up, i.e., the difference between hospital costs and charges, in Maryland hospitals the lowest in the nation at 22%, compared to the average mark-up of 188% for hospitals nationally, according to the most recent data from the American Hospital Association (AHA). In Maryland, the payment systems builds the cost of uncompensated care into the rates, and all payers in Maryland pay the

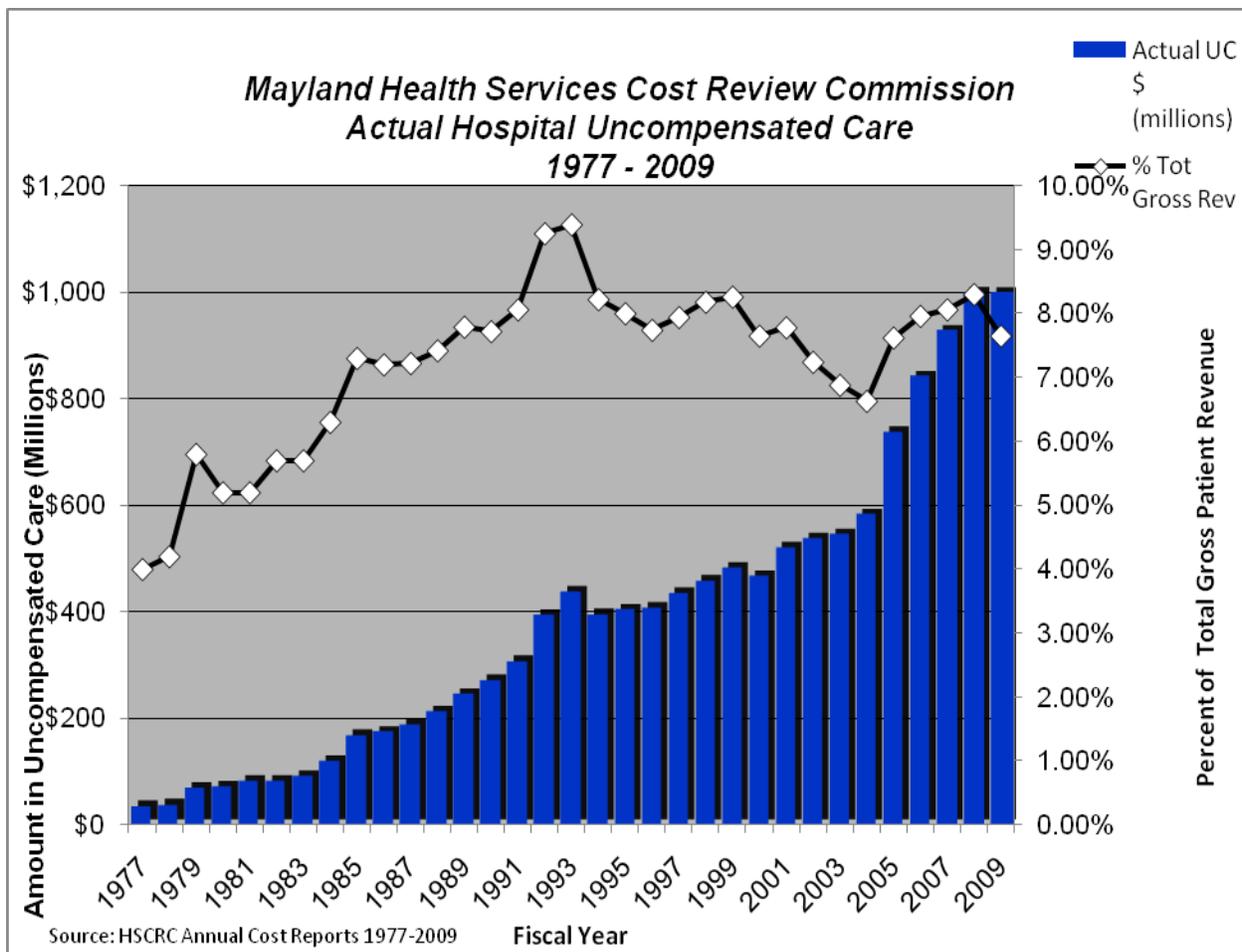
same rates for hospital care (For details, please see section entitled “Uncompensated Care” below). In the absence of rate setting, hospitals outside of Maryland must artificially mark up their charges by 100-200 percent in an effort to compensate for shortfalls in uncompensated care, discounts to large managed care organizations (e.g., HMOs), and low reimbursement from Medicare and Medicaid. These marked-up charges make payment especially difficult for “self-pay” patients and other third-party payers not granted discounts and present a serious dilemma in healthcare today.

In addition, an analysis of hospital costs (i.e., what hospitals expend to provide their services) shows that the average cost per admission at Maryland hospitals increased by only 2 percent compared to an estimated 4.5 percent increase for the rest of the nation for FY 2009. In FY 1976, the cost per adjusted admission to a Maryland hospital was 26 percent above the national average. In FY 2008, the year for which the most recent data are available from AHA, the average cost per adjusted admission in Maryland was at the national average. From 1977 through 2008, Maryland hospitals experienced the lowest cumulative growth in cost per adjusted admission of any state in the nation.

B. Uncompensated Care

The Commission’s annual Disclosure Report showed that the uncompensated care financed through the rate setting system decreased from \$1 billion in FY 2008 to \$999 million in FY 2009 (**see chart below**).

Since its inception, the HSCRC has recognized reasonable levels of bad debt and charity care (uncompensated care) in hospital rates as a means to enhance access to services for those citizens who cannot pay for care. As hospital uncompensated care (UC) has increased in both relative and absolute terms, the General Assembly and the HSCRC have been actively involved



in efforts to modify and improve the UC funding mechanism. In FY 2009, the Commission moved to a more equitable method to finance UC in the rate setting system.

Prior to FY 2009, UC was funded through a “partial” pooling approach where a UC fund or pool was created from an assessment of 0.75% on each hospital. This fund was then reallocated to the subset of hospitals with the highest levels of UC in their rates. Those “high” UC hospitals then would finance their UC burdens in part through their rate structure (UC provisions in their rates up to some pre-determined threshold level) and in part from payments from the UC pool. The Commission moved to “full” or 100% pooling of all hospital UC in FY 2009. This funding mechanism incorporates the State-wide average level of hospital UC into the rate structures of all facilities. Hospitals with approved UC provisions that are less than the

State-wide average level of UC will be remit funds to the UC pool equal to the difference between their approved UC provision and the State-wide average UC. Conversely, hospitals with approved UC provisions in excess of the State-wide average level of UC would receive payment from the UC fund equal to the difference between their approved provisions and the State-wide average UC.

In addition to the move to 100% pooling in FY 2009, the Commission approved the inclusion of The University of Maryland Shock Trauma Center's UC in the existing UC pool.

C. Averted Bad Debt

Chapter 7 of the 2007 Special Session enacted the "Working Families and Small Business Health Coverage Act," which expands access to health care in the following ways:

1. Expands Medicaid eligibility to parents and caretaker relatives with household income up to 116 percent of federal poverty level (FPL), which will be implemented in fiscal 2009;
2. Contingent on available funding, incrementally expands the Primary Adult Care program benefits over three years to childless adults with household income up to 116 percent FPL, which will phase in from fiscal 2010 through 2013; and
3. Establishes a Small Employer Health Insurance Premium Subsidy Program, which will be administered by the Maryland Health Care Commission (MHCC) and funded with \$15 million in fiscal 2009.

Special funds, including savings from averted uncompensated care and matching federal funds, will cover a portion of the costs of the expansion. Chapters 244/245 from 2008 requires the Commission to implement a uniform assessment on hospital rates to reflect the aggregate reduction in hospital uncompensated care from the expansion of health care coverage under Chapter 7. The assessment is to be broad-based, prospective, and uniform and will reflect averted uncompensated care realized from the expansion of the Medicaid Program under Chapter

7. The legislation authorizes the Commission to implement the assessment provided that it does not exceed the actual averted uncompensated care.

During FY 2008, the Medicaid Program and HSCRC estimated the total FY 2009 Medicaid expenditures for the expansion population to be \$95.2 million. This amount was then adjusted to account for the following:

- The percentage of expenditures that will be spent in-state, 94%, calculated using a three year average of Medicaid claims data;
- Medicaid pays 94% of charges;
- The percentage of expenditures that would go to hospitals (61%) calculated based on the Medicaid HealthChoice reimbursement process that breaks out payment rates into hospital, drug, and other components;
- The estimated share of the spending that went to individuals who had coverage previously (known as “crowd out”) was 28% based on available literature and confirmed by surveys issued through Medicaid; and
- The lower use rate of the uninsured, approximately 82%, based on the available literature.

Using these adjustments, the original estimated hospital averted bad debt from Medicaid expansion in FY 2009 was calculated to be \$34.3 million.

As reported by the Department of Health and Mental Hygiene (“DHMH”), the average enrollment in Medicaid as a result of Medicaid expansion and the per member per month costs in FY 2009 were higher than expected when the uniform assessment was originally calculated for FY 2009. Factoring in these increases and making adjustments based on experience, the amount of averted bad debt in FY 2009 was \$16.5 million greater than originally expected. This amount was included in the uniform assessment calculation for FY 2010.

The FY 2010 assessment was based on an anticipated average enrollment of 55,000 and a per member/per month cost of \$539. The total expected Medicaid expenditures for this

population is \$324.4 million. After making the same adjustments made for FY 2009, the total expected hospital averted bad debt in FY 2010 was \$103.4 million, and the uniform assessment for FY 2010 was \$90 million – providing a savings to purchasers of hospital care of about 7.4% or \$13 million.

The aforementioned \$16.5 million from the underestimation in FY 2009 was added to this amount, so that the total assessment amount for the parents/caretakers expansion in FY 2010 was \$106.5 million.

D. Financial Condition of Maryland Hospitals

In addition to its other statutory obligations, the Commission concerns itself with the financial performance of Maryland hospitals.

Over the years, the Commission and the hospital industry have monitored performance relative to certain targets as a means of assessing the overall financial condition of the Maryland hospital industry. In utilizing these targets, however, the Commission and the industry note that no one target, financial or operating, should be viewed as dominant. All targets should be evaluated in conjunction with each other before conclusions can be drawn as to the financial condition of the industry. As the Commission and Maryland hospitals continue the work to attain and balance these targeted levels, it is expected that improved levels of industry financial health will be realized.

In FY 2009, Maryland general acute hospitals' profits on regulated activities rose from 5.2% in FY 2008 to 5.9% in FY 2009. Profits on regulated and unregulated operations increased slightly from 2.3%% in FY 2008 to 2.6% in FY 2009. Total excess profits (which include profits and losses from regulated and unregulated operating and non-operating activities) decreased from

1.35% in FY 2008 to 0.65% in FY 2009, largely due to investment losses associated with debt financing obligations of hospitals.

E. Medicare Waiver

Although the State remains in no immediate danger of losing the waiver, we continue to closely monitor our performance on the waiver test and continue to provide both positive and negative incentives to hospitals to improve Medicare utilization. In November 1990, the State was successful in modifying the language of Section 1814(b) of the Social Security Act, which determines the ability of Maryland to continue its all-payer hospital reimbursement system. The change in the law allows for a more equitable comparison between Maryland's performance and that of the nation by taking into account savings that have been achieved since January 1, 1981. Language was also incorporated into the waiver test that would allow Maryland three years to come back into compliance with the test if, in the unlikely event, Maryland were ever to fail the rate of increase test.

The most recent waiver test information indicates that payment per admission for Medicare patients nationally increased 345% from January 1, 1981, through June 30, 2009, compared to a 306% increase in Maryland over the same time period. The Commission will continue to take whatever appropriate steps are necessary to assure continuation of our all-payer system.

F. FY 2010 Budget

The HSCRC is supported by a non-lapsing Special Fund which is derived from user fees that are added to the rates of Maryland hospitals. Due to the technical nature of the work of the Commission, expenses are driven primarily by personnel costs and contracts. In FY 2009, the Commission employed 31 full-time staff.

In a November 2000 preliminary sunset evaluation of the HSCRC conducted under the Maryland Program Evaluation Act, the Department of Legislative Services (DLS) recommended that the Commission maintain a fund balance of 10% of its annual budget. The Commission has strived to reach this level, but the Commission's reliance on personnel and contracts has created challenges from year to year. State imposed hiring freezes and the targeted recruitment of specialized personnel frequently result in longer than expected recruitment periods which, in turn, produce unanticipated surpluses at the end of the year.

After refunding a portion of user fee assessments in an attempt to attain an end-of-year reserve of 10%, the total user fee assessment in FY 2010 was \$4,755,799 million. Due to prudent spending and vacancies that occurred during the last quarter of the fiscal year, the fund balance at the end of fiscal year 2010 was \$838,562 (or 18% of expenditures). User fees will continue to be adjusted throughout the year as necessary to achieve a reasonable reserve threshold.

G. Quality Initiative

The considerable attention paid to hospital quality measurement nationally in recent years has identified quality-related measures in use or on the horizon, which can serve as the basis for the development of financial incentives to dramatically improve the overall quality of Maryland hospital care. Pay for performance (P4P) and value-based purchasing (VBP) are interchangeable terms for a payment system that links providers' payment to their performance on selected quality of care measures and that uses financial incentives to encourage providers to meet defined quality, efficiency, or other targets (Agency of Healthcare Research and Quality 2008).

HSCRC's Quality Initiatives work includes designing, implementing and managing statewide, all-payer hospital reimbursement adjustments based upon hospital performance on a

comprehensive set of quality metrics. To date, HSCRC has engaged in a three-pronged approach, including:

1. Quality Based Reimbursement (QBR) Initiative - Implemented in July 2008, performance is measured and reported on a set of effectiveness/process of care measures; patient experience of care measures will also be considered in the near term for addition to this initiative.
2. Maryland Hospital Acquired Conditions (MHAC) Initiative - Implemented in July 2009, actual versus expected rates of performance on a broad set of 49 risk/severity adjusted potentially preventable complications are measured. During fiscal year 2010, these hospital-based preventable complications were present in approximately 60 ,000 of the State's total 761,000 inpatient cases and represented approximately \$580 million in potentially preventable hospital payments.
3. Maryland Hospital Preventable Readmissions (MHPR) Initiative - Initiative initially entails measuring actual versus expected rates of performance, adjusted for specific hospital and patient characteristics, on potentially preventable readmissions within a specified time period(s), e.g., 30 days. In Maryland in 2009, there was approximately \$700M in associated charges for readmissions within 30 days. This initiative is currently under development and is expected to be implemented in early 2011. In addition, the planning discussions held with the industry for the MHPR initiative have spurred additional ideas around potential models to consider for bundling hospital payments that include initial admissions and readmissions. HSCRC will continue to pursue these discussions.

The overall mission of the HSCRC Quality Initiatives is to help create a health care environment where Maryland hospitals provide high quality patient care in an efficient manner. The overarching goals of the HSCRC Quality Initiatives are to:

1. Work with Maryland hospitals to enhance the quality of patient care by providing financial support and rewards/incentives consistent with evidence-based health services research and improved patient outcomes;
2. Utilize a broad set of quality measures that appropriately reflect the delivery of quality health care services provided at Maryland hospitals;
3. Collect data that will support the generation of accurate and reliable quality measures;
4. Better understand the relationship between quality and cost; and
5. Become a model for enhancing health care quality in the hospital setting while remaining consistent with broader quality initiatives.

H. Patient Safety

During the 2001 Legislative Session, the General Assembly passed the "Patients' Safety Act of 2001" charging the Maryland Health Care Commission, in consultation with the Department of Health and Mental Hygiene, with studying the feasibility of developing a system for reducing incidences of preventable adverse medical events in Maryland. In 2004, the MHCC selected the Maryland Hospital Association (MHA) and the Delmarva Foundation for Medical Care (Delmarva) to operate a Maryland Patient Safety Center in Maryland. The MPSC is now a 501(C)(3) not for profit organization.

Each year since its inception, the Commission, in recognition of the potential for improved quality and safety resulting in reduced costs related to adverse events, approved recommendations that, in effect, increase rates to payers to cover a portion of the reasonable budgeted costs of the Center. For FY 2010, the fifth year of such funding, \$1.64 million has been included in the rates of certain hospitals for this purpose.

I. Community Benefit Report

In June 2010, the Commission released its fifth annual report on hospital community benefit activities in Maryland. The process of collecting hospital community benefit information from individual hospitals to compile into a publicly available statewide report was introduced by the Maryland legislature in 2001. This year, the Commission began collecting both quantitative and qualitative information regarding their community benefit programs and community needs assessments.

Maryland hospitals provided approximately \$946 million in community benefit activities for FY 2009. The various categories of activities include community health services at \$67.4

million, health professions education at \$306 million, over \$209 million in mission driven health services, research activities of over \$3 million, financial contributions of \$17.4 million, community building activities of \$17.7 million, over \$5.2 million in community benefit operations, approximately \$8.5 million in foundation initiatives, and just over \$309 million in charity care was provided to the patients of Maryland hospitals.

Charity Care, Nurse Support Program I, and Direct Medical Education costs are reported as community benefit costs but are included in hospital rates. When offsetting these amounts from the amount of community benefits reported:

- A total of \$453 million in net community benefits was provided in FY 2009; and
- The average percentage of operating expenses dedicated to charity care drops from 7.22% to 3.64%.

The HSCRC has viewed the Community Benefit reporting requirement as an opportunity for each Maryland hospital to critically review and report its community benefit activities. The development of the process has been a collaborative effort among Maryland hospitals, the HSCRC, and many interested parties within Maryland. In an effort to continue providing a useful tool for reporting community benefit activities, the HSCRC will continue the process of refining the reporting requirements and improving its evaluation method to provide adequate feedback to the hospitals on their activities.

II. REVIEW OF RATE REGULATION ACTIVITIES

A. Closed Docket Proceedings

Disposition of those applications acted upon by the Commission in Fiscal Year 2010 is summarized below. Copies of the applications, staff recommendations, as well as the complete file in these proceedings may be obtained by contacting the Commission's offices.

CATEGORY OF RATE APPLICATION	NUMBER OF APPLICATIONS	DESCRIPTION OF TYPE OF APPLICATION
Full Rate Applications	1	There was one request for approval of an increase to all rates Approved:1
Partial Rate Applications	12	
	4	Four requests for approval of a rate for a new service Approved: 4
	6	One request for a rebundled rate, i.e., a rate for a service furnished by an off-site provider only to hospital inpatients, and five requests for approval to replace a rebundled rate with a rate for a service provided by the hospital to both inpatients and outpatients. Approved:6
	2	Two requests for approval to combine two rate centers in a revenue neutral fashion. Approved: 2

Applications for Alternative Method of Rate Determination*	28	
	22	Twenty-two requests for approval to participate in global fixed price alternative payment arrangements** Approved: 22
	6	Six requests for approval to participate in capitation alternative payments arrangements*** Approved:6

*Alternative Method of Rate Determination - COMAR 10.37.10.06

Under its law, Health-General Article, §19-219, the Commission may promote and approve alternative payment methodologies that are consistent with the fundamental principles inherent in its legislative mandate. This regulation effectuates the statutory authority granted and sets forth the process, reporting requirements, and penalties associated with alternative rate setting.

** Global Fixed Price Arrangement - is an arrangement that fixes a price to be charged to a payer for the combined physician and hospital services for patients who receive a specific service, e. g. transplants or cardiology services.

*** Capitation Arrangement - is an arrangement in which a fixed monthly payment is made by a payer to cover the costs of all or a specific segment of the health care services for a designated population.

B. Annual Unit Rate and Charge per Case Target Updates

During Fiscal Year 2010, forty-four (44) acute care hospitals and one (1) chronic specialty hospital participated in the Charge per Case Target (“CPC”) rate setting methodology. On July 1, 2009, an update factor of 1.49% was applied to Charge per Case Targets, 100% inpatient unit rates, and ancillary unit rates of each hospital.

Currently, two hospitals, Garrett County Memorial Hospital, and Edward W. McCready Memorial Hospital do not participate in the Charge per Case rate setting methodology. These hospitals petitioned the Commission and obtained approval to participate in the Total Patient Revenue (“TPR”) unit rate setting methodology.

In order to qualify for the TPR methodology a hospital must be a sole community provider with a defined population service area, with little or no competition from other acute

care hospitals. The Hospital’s annual revenue budget is calculated and capped for the rate year, and its costs are considered 100% fixed. These hospitals also qualified for a 1.49% update factor.

C. Full Rate Reviews

A full rate review is an extensive analysis of a hospital’s unit rate structure, Charge per Case Target, and underlying costs as compared to the averages of its peer group. A hospital may file an application for a full review, or the Commission may initiate the review. These reviews are extremely technical, incorporating multiple Commission policies, and must be completed in the specific time frame established by law and regulation. Typically, a hospital files a full rate application to increase its revenue structure. The hospital must submit a detailed description of its request with supporting calculations documenting its efficiency relative to its peer group. Additionally, the hospital requesting the full rate review may attempt to demonstrate why the annual update factor is insufficient to meet its individual financial requirements.

During fiscal year 2010, one hospital filed and received a full rate review. The following table summarizes the result.

FULL RATE REVIEW - FISCAL YEAR 2010

HOSPITAL	EFFECTIVE DATE	OVERALL RATE CHANGE
Garrett County Memorial Hospital	July 1, 2009	5.28%

D. Spend Down Hospitals

Every hospital’s volume and revenue by rate center are monitored monthly to ensure compliance with the currently approved rate order. Twice a year, all acute care hospitals are subject to the Reasonableness of Charges (“ROC”) calculation. Any hospital with charges

exceeding its peer group average by three percent (3%) or more is identified as a high cost hospital and must negotiate a Spend Down Agreement with the Commission. These hospital specific agreements detail the reductions the identified hospital must achieve over a specified time period, usually two years.

A provision of the staff's modified recommendation on "The Transition to APR-DRGs and Related Methodology Changes," unanimously adopted by the Commission at its June 1, 2005 public meeting, was a moratorium on the Reasonableness of Charges calculation and any resultant spend downs for the next two years, subsequently extended for two years. During rate year 2010, a work group was established to review the ROC methodology. This group proposed revisions to some of the highly technical methodologies that measure ROC performance. Additionally, the group proposed issuing the ROC annually, with no hospital being identified as high cost for 2010. Consequently, no hospitals were placed on a Spend Down in fiscal year 2010.

III. SYSTEM REFINEMENTS AND CHANGES IN METHODOLOGY

The Research and Methodology Division of the HSCRC is responsible for the research policy development and information systems activities of the Commission. The staff devotes considerable time to developing, analyzing, and implementing policy changes to the existing payment system; coordinating activities related to policy development; developing and analyzing alternative methods of rate determination; developing data reporting requirements to ensure that the information needed for policy development and research are available; and conducting research that has policy implications for the Commission and is of general interest to the health services research community. Recent changes, refinements, and reviews are described in the

following sections.

A. Changes to the ICC and ROC

The Inter-hospital Cost Comparison (ICC) methodology was developed as a tool for the Commission to assess the adequacy of a hospital's rates in the context of a full review of a hospital's rate structure. As the primary tool in a full rate review, the ICC begins by comparing the current CPC targets, adjusting for allowable cost differences across facilities. HSCRC staff compares the adjusted target to a group of peer hospitals to determine if a hospital is eligible for a rate increase during a full rate review. Hospitals with adjusted targets that are more than two percent below the group average are eligible for an increase to raise their rates to two percent below the group average. The subject hospital is also allowed to raise special issues unique to that facility.

Under the ICC methodology, outpatient rates are adjusted for differences in markup, profits, the two percent productivity deduction, and labor market differences before a standard is established for each center in a hospital's peer group. The standard is the median of the adjusted outpatient rates within each outpatient center.

The inpatient portion of the ICC has also been adopted as the tool for identifying hospitals with relatively high charges. Under this version of the ICC policy, charges – not costs – are the subject of the review. While the ICC removes profits from approved charges and imposes a two-percent efficiency standard for hospitals undergoing a full rate review, neither of these adjustments is made under the ROC comparison. Under this policy, hospitals that were three percent above their peer group average were identified as having high charges and targeted for a spend down agreement to reduce their charges relative to their peers.

The HSCRC refines the ICC/ROC methodology annually based on input from a workgroup comprised of representatives of the Maryland hospital industry. The ICC/ROC Workgroup met several times between October 2008 and January 2009 and agreed on the following revisions to the ICC/ROC methodology:

1. Blend the inpatient charge per case (CPC) target and outpatient charge per visit (CPV) target into a single comprehensive charge target (CCT) to be used as the starting point for the ICC/ROC adjustments.
2. Refine the regression based adjustment for costs associated with indirect medical education (IME) and include a regression based adjustment for disproportionate share (DSH) – additional resource use associated with treating a large share of poor patients).
3. Adjust for the direct costs of medical education programs by removing 100% of the compensation associated with residents and fellows (in the past, 75% of these costs were directly adjusted for in the ROC)
4. Adjust for capital costs based on 50% of the hospital's capital costs and 50% of the statewide standard (instead of a peer group standard).

In October 2003, the Commission modified its ICC policy to recognize the need for capital in Maryland's hospitals. The new policy permits hospitals to apply for additional capital costs on a Certificate of Need (CON) approved project through the partial rate application process. The partial rate application allows a study hospital with a reasonable rate structure rate relief associated exclusively with capital, but requires that staff run a modified ICC analysis (both inpatient and outpatient) to limit any additional rate relief to the study hospital. Hospitals that have high charges would likely not pass even a less rigorous ICC standard and, therefore, would not be eligible for this partial rate relief. The ICC standard is applied in the case of a partial rate review for capital but without the 2% productivity adjustment. This result generates rate relief for a hospital with low charges relative to its peers and/or hospitals that have not undergone a major capital project in a number of years. There is no Phase II ICC analysis

associated with this application because the analysis is not a full analysis of the hospital's rates. The subject hospital must request a full rate review under the standard ICC process to have such issues considered.

The HSCRC's methodology allows the subject hospital to project capital costs as reflected by the depreciation and interest associated with the CON approved project and the projected routine annual capital replacement over the project period. Additionally, the Commission requires that the hospital:

1. acquire an approved CON for the requested project expenditures;
2. keep its request limited to the regulated expenditures for which the CON was granted;
3. be provided a "ceiling amount" of rate relief that could be granted through the partial rate application; and
4. meet the HSCRC ROC criteria.

If the study hospital meets the above criteria, it would be able to receive 50% of its own capital costs and 50% of its peer group capital.

B. Outpatient Charge per Visit Methodology

In FY 2008, the Commission approved the Charge per Visit (CPV) methodology for implementation in FY 2009 as a means to limit the rate of increase in the revenue per outpatient visit at each Maryland hospital. The limit was adjusted for outpatient rate increases, for an intensity allowance to allow for changes in technology, and for changes in case-mix intensity. This methodology uses the Enhanced Ambulatory Patient Groups (EAPGs), developed by 3M, to measure outpatient case-mix.

In FY 2010, the Commission approved refinements to the CPV methodology that brought in 80% of the outpatient revenue under the CPV. The revisions included:

1. Exclusion of cycle-billed visits based on number of visits;
2. Continued exclusion of radiation therapy visits;
3. Inclusion of infusion therapy APGs based on the associated drug APGs;
4. Revision of the case mix methodology to reflect additional resources utilized in visits with multiple significant procedures;
5. Revision of the case mix methodology to include APGs and case mix weight for radiology procedures performed in the emergency room or clinic; and
6. Development of separate weights to reflect added resource use in visits that include Observation services.

A CPV target was established using FY 2009 data as the base year, and was used to set allowable revenue for an outpatient case in FY 2010. However, Commission staff recommended withholding CPV targets for the purpose of compliance for FY 2010 due to inconsistencies in the reporting and coding of outpatient discharge data across hospitals. Revenue for visits included under the CPV was calculated for the Reasonableness of Charges (ROC) methodology.

C. Uncompensated Care Regression and Policy

The principal objective of the HSCRC's uncompensated care (UCC) policy is to provide reasonable rates to hospitals to cover the cost of care for patients who cannot pay their bills. The UCC policy is the lynchpin of the system for providing access to care for all Maryland citizens.

In conformance with a specific methodology that takes into account both actual hospital UCC and expected levels of UCC based on hospital characteristics, the Commission sets a prospective amount to be built into hospital rates for the next fiscal year. The UCC policy in place for FY 2009 utilized a 50/50 blend of a hospital's three-year moving average of actual

UCC and a predicted UCC amount based on the following explanatory regression variables:

1. The proportion of a hospital's total charges from inpatient non-Medicare admissions through the emergency room;
2. The proportion of a hospital's total charges from outpatient Medicaid, self-pay, and charity visits to the emergency room;
3. The proportion of a hospital's total charges from outpatient Medicaid, self-pay, and charity visits to the emergency room; and
4. The proportion of a hospital's total charges that are outpatient charges.

In the last year, public news reports raised the issue of whether Maryland hospitals provide sufficient levels of charity care, given a regulatory policy that provides uncompensated care in rates. Commission staff has begun a review of the existing uncompensated care policy in terms of its equivalent treatment of bad debt and charity care and will develop a methodology that will adjust the amount of UCC in rates based on the amount of charity care provided by each hospital.

D. Nurse Support Programs (NSP I and NSP II)

To facilitate and encourage the implementation of hospital-based initiatives designed to increase the number of nursing professionals providing patient care in the State, the HSCRC initiated the five-year Nurse Support Program I (NSP I) effective July 1, 2001. Hospitals are eligible to receive up to 0.1% of their gross patient revenue per year, to be provided through hospital rate adjustments for approved projects that address the individual needs of the hospitals as they relate to nurse recruitment and retention.

On April 11, 2007 the HSCRC approved a new five-year NSP I funding cycle and several NSP I updates, including a streamlined application process, redefined categories of projects eligible for funding, and standardized annual reporting formats to improve accountability. Each

year an Evaluation Committee composed of nurse leaders, a payer, Maryland Hospital Association, Maryland Higher Education Commission (MHEC), and HSCRC staff met to review the applications. Over the past 4 years or the new funding cycle, funding has been provided to 50 acute care and specialty hospitals in Maryland for NSP I projects in the amount of:

- FY 07- approx. \$9.5 million;
- FY 2008 –approx \$9.7 million;
- FY 2009- approx \$10.8 million; and
- FY 2010- approx \$11.9 million.

This funding is used for creative projects in nursing retention and recruitment, educational attainment, and improvement of nursing practice environment, which are areas recommended by nurse experts as most valuable in increasing and retaining the supply of nurses.

The NSP I program exposed the inability of nursing programs to accept large numbers of new nursing students because of limited capacity due to nursing faculty shortages. The Maryland Board of Nursing estimated that approximately 1,900 qualified students were denied admission in academic year 2003-2004 due to insufficient nursing faculty. In May 2005, the HSCRC approved funding of 0.1% of regulated patient revenue for use in expanding the pool of nurses in the State by increasing the capacity of Maryland nursing programs, by developing more nursing faculty, and creating a pipeline for future nursing faculty. This funding represents an average of \$10 million devoted to the Nurse Support Program II (NSP II) on an annual basis over the next ten years. The HSCRC has contracted with the Maryland Higher Education Commission to administer NSP II. Under the NSP II Program, funding will support two types of initiatives: Competitive Institutional Grants and Statewide Initiatives. Institutions seeking Competitive

Institutional Grants are encouraged to coordinate their proposals with the Statewide Grants which provide: (1) Graduate Nursing Faculty Scholarships and Living Expenses Grants; (2) New Nursing Faculty Grants; and (3) State Nursing Scholarships and Living Expenses Grants.

During the first 4 years of NSP II, the HSCRC has issued 40 Competitive Institutional Grant awards. The projects receiving awards were deemed by the Commission's review panels to best address the multiple aspects of the nursing shortage by accelerating the number of associate degree in nursing (ADN) graduates, expanding the pipeline of ADN to Bachelor of Science in nursing (BSN) students, and creating pathways to nursing faculty positions through Master of Science in nursing (MSN) and doctoral programs. The 40 projects include an additional 60 hospital and higher education institution partners and consortium members.

The total funding over the lifetime of the 40 Competitive Institutional Grant projects is nearly \$35 million. An additional \$5.47 million was awarded for Statewide Initiatives in the first 4 years, for a total of \$40.5 million in awards for the NSP II.

E. Hospital Discharge Data

1. Inpatient Discharge Database:

The HSCRC Inpatient Discharge Database is considered to be one of the most accurate, complete, and timely statewide hospital discharge data sets in the country. Maryland hospitals are required to submit inpatient discharge data to the HSCRC within 45 days following the close of each quarter. The data include demographic, clinical, and charge information on all inpatients discharged from Maryland general acute hospitals. The database is used extensively for hospital rate setting purposes, by other state agencies for health planning, program development, and

evaluation functions, and is also used by individuals throughout the State and the country for various research projects.

2. Outpatient Database:

Since October 1987, the Commission has collected patient level ambulatory surgery data from hospitals. The ambulatory surgery database includes demographic, clinical, and charge information for all patients that receive hospital-based outpatient surgery services. The Ambulatory Care Data Reporting Regulations, effective April 1, 1997, allow the Commission to collect demographic, clinical, and charge information on hospital-based clinic and emergency department services. The collection of this data supports the HSCRC's development of an outpatient rate setting tool based on the clinical classification of data.

The Outpatient Database Reporting Regulations, effective June 4, 2007, allow for the consolidating of the Commission's current ambulatory surgery and ambulatory care data set into one uniform outpatient hospital data set. These new regulations will expand and refine the outpatient hospital data set to include collection of all hospital outpatient services, including emergency department visits, ambulatory surgery and referred ancillary services. The additional data will also enhance the Health Services Cost Review Commission's ability to analyze and monitor hospital based outpatient case-mix related issues, compare hospital outpatient service cost, and set case rates for hospital outpatient services. Hospitals submit outpatient care data to the HSCRC within 60 days following the close of a quarter.

3. Chronic Care Database:

The Chronic Care Data Reporting Regulations, effective January 1, 2003, allow the Commission to collect demographic, clinical, and charge information on hospital-based chronic

care services. Hospitals submit chronic care data to the HSCRC within 45 days following the close of a quarter. The HSCRC anticipates the development of a chronic care rate setting methodology based on the data collected in this database.

IV. AUDITING AND COMPLIANCE ACTIVITIES

A. Auditing Activities

A set of specific audit procedures prescribed by the Commission, known as the “Special Audit,” is performed annually at each hospital by an independent certified public accounting firm. The Special Audit tests the various data submitted by the hospitals to the Commission in their Annual Reports of Revenue, Expenses and Volumes, Annual Wage and Salary Survey, Statement of Changes in Building and Equipment Fund Balances, Monthly Reports of Achieved Volumes, and Quarterly Uniform Hospital Discharge Abstract Data Set. The Special Audit is designed to assure the Commission that the data are being reported in a uniform and consistent format, and that the reports are accurate.

B. Monitoring Activities

During Fiscal Year 2010, the Commission staff continued to use the Monthly Report of Rate Compliance (Schedule CS) as its primary tool for monitoring hospital charging compliance. An expanded Quarterly Financial Statement Summary (Schedule FS) and the hospitals’ audited financial statements continue to be used to monitor hospital solvency. The Commission continued the policy of reviewing the performance of the Maryland hospital industry on an ongoing basis.

In addition, significant transactions between hospitals and related entities continue to be

reported to the Commission on an annual basis. Both the policy of reviewing the financial performance of the Maryland hospital industry and the reporting of transactions between hospitals and related entities were adopted in response to recommendations made by a joint Commission and Maryland Hospital Association committee established to study the financial condition of Maryland hospitals.

V. ACTIVITIES AFFECTING HEALTH SERVICES COST REVIEW COMMISSION'S REGULATIONS

Over the past fiscal year, the Commission proposed and adopted amendments to a number of existing regulations.

COMAR 10.37.01

This regulation concerns the Commission's *Uniform Accounting and Reporting System for Hospitals*. During the past fiscal year, the Commission proposed and adopted several amendments to this chapter. First, on March 3, 2010, the Commission adopted an amendment to Regulation .02, which was proposed for adoption on October 14, 2009. The purpose of this amendment is to update the Commission's manual entitled "Accounting and Budget Manual for Fiscal and Operating Management" (August, 1987), which has been incorporated by reference.

On September 2, 2009, the Commission adopted amendments to Regulation .03, which were proposed for adoption on July 17, 2009. The purpose of this action is to require nonprofit hospitals to file with the Commission their most recent Form 990 filed with the Internal Revenue Service in compliance with recently enacted legislation.

Finally, on November 4, 2009, the Commission adopted amendments to Regulation .03, which were proposed for adoption on July 1, 2009. The purpose of this action is to correct

erroneous references to “quarterly” reporting requirements when, in fact, these requirements are, and have been, monthly in nature.

COMAR 10.37.10

This regulation concerns the Commission's *Rate Application and Approval Procedures*. During the past fiscal year, the Commission proposed and adopted several amendments to this chapter. First, on September 2, 2009, the Commission adopted amendments to Regulation .03, entitled “Uncompensated Care Policy—Medicaid Day Limits,” which were proposed for adoption on May 13, 2009. The purpose of this action is to assure that the State’s a ll-payer Medicare waiver is not jeopardized, and that any potential action taken by the Commission in response to the establishment of hospital day limits is in the public interest.

On September 2, 2009, the Commission adopted amendments to Regulations .26A and B, which were proposed for adoption on May 13, 2009. The purpose of this action is to comply with recently enacted legislation. These regulatory amendments change the interest or late payment charges that a hospital may add to its self-pay patients; set forth the minimum provisions required in hospital financial assistance policies; require hospitals to develop an information sheet; and set forth those requirements to be included in hospital credit and collection policies.

Later in the fiscal year, on March 3, 2010, the Commission adopted amendments to Regulation .26B (5), entitled “ Hospital Financial Assistance Responsibilities,” which were proposed for adoption on October 14, 2009. The purpose of this action is to raise the current income threshold for receiving free hospital care to patients with family income at or below 200% of the federal poverty level and establish a standard reduced cost care threshold between 200 and 300 % of the federal poverty level, unless the increase would yield undue financial

hardship to a given hospital.

Finally, on June 9, 2010, the Commission proposed for adoption additional amendments to Regulation .26. The purpose of this action is to alter the requirements for hospital financial assistance and debt collection policies and to make the requirements applicable to chronic hospitals that are subject to HSCRC rate-setting. These proposed amendments conform to recently enacted legislation (Chs. 60 and 61, Acts of 2010) and to Commission-approved recommendations for providing incentives to hospitals to provide free and reduced-cost care and certain protections to patients without means to pay their hospital bills.

VI. LEGISLATION AFFECTING THE HEALTH SERVICES COST REVIEW COMMISSION'S ENABLING ACT

A number of bills of interest to the Commission were introduced during the 2010 session of the General Assembly:

House Bill 147

This bill, companion to SB 314, entitled *Health Insurance - Assignment of Benefits and Reimbursement of Nonpreferred Providers*, would provide that an insured of certain health insurance carriers may not be liable to on-call physicians for specified services under certain circumstances; prohibit specified on-call physicians from taking certain actions against an insured under specified circumstances; authorize the on-call physicians to collect specified payments from an insured under given circumstances; etc. (*Failed*)

House Bill 525

This bill, companion to SB 279, entitled *Maryland False Health Claims Act of 2010*, would prohibit specified actions constituting false claims against a State health plan or a State health

program; provide penalties for making false claims against a State health plan or a State health program; authorize the State or a person on behalf of the State to file a civil action against a person who makes a false claim against a State health plan or a State health program under particular circumstances; provide for the procedures to be followed and remedies in a civil action; etc. (*Failed*)

House Bill 699

This bill, companion to SB 593, entitled *Health Facilities - Freestanding Medical Facilities – Rates*, would have certain emergency services include services provided at specified facilities for the purposes of hospital rate setting; require the Health Services Cost Review Commission to set rates for hospital services provided at certain freestanding medical facilities; and require specified payers to pay claims submitted by freestanding medical facilities at rates set by the Commission. (*Returned Passed*)

House Bill 929

This bill, companion to SB 855, entitled *Patient Centered Medical Home*, would require the MHCC to establish a Maryland Patient Centered Medical Home Program under certain circumstances; require particular health insurance carriers to participate in the Program; require the Department to ensure that participation in the Program of managed care organizations and specified enrollees will support certain standards; authorize the MHCC to authorize a health insurance carrier to implement a specified single carrier patient centered medical home program; etc. (*Became Law- Ch.6*)

House Bill 933

This bill, companion to SB 328, entitled *Hospitals - Financial Assistance and Debt Collection*, would require chronic care hospitals to develop a financial assistance policy for free and reduced-cost care to patients; require a hospital financial assistance policy to provide reduced-cost medically necessary care to patients who have a financial hardship; require a hospital to apply a reduction that is most favorable to a patient; establish requirements for continued eligibility for reduced-cost care due to a financial hardship; alter the requirements for a notice that a hospital must post; etc. (*Became Law- Ch.61*)

House Bill 1410

This bill, companion to SB 1005, entitled *Health Services Cost Review Commission - Podiatric Medical Examiners Residency Program*, would authorize an accredited hospital to apply to the Health Services Cost Review Commission for funding to establish a podiatric medical examiners residency program; require the Commission to select one accredited hospital that applied for funding and transfer funds sufficient for the accredited hospital to provide a residency program to a particular number of podiatric medical residents each year for a specific number of years; etc. (*Failed*)

Senate Bill 279

This bill, companion to HB 525, entitled *Maryland False Health Claims Act of 2010*, would prohibit actions constituting false claims against a State health plan or a State health program; provide penalties for making false claims against a State health plan or a State health program; require the court to consider and give special attention to factors in determining the

finer and penalties provided for in the Act; authorize the State or a person on behalf of the State to file a civil action against a person who makes a false claim against a State health plan or a State health program; etc. (*Became Law- Ch. 24*)

Senate Bill 314

This bill, companion to HB 147, entitled *Health Insurance - Assignment of Benefits and Reimbursement of Nonpreferred Providers*, would provide that the difference between specified coinsurance percentages may not be greater than 20 percentage points under certain circumstances; prohibit provisions in a preferred provider insurance policy from applying to specified on-call physicians or hospital-based physicians; provide that an insured of certain health insurers may not be liable to specified on-call physicians or hospital-based physicians for certain services under given circumstances; etc. (*Passed Enrolled*)

Senate Bill 328

This bill, companion to HB 933, entitled *Hospitals - Financial Assistance and Debt Collection*, would require chronic care hospitals to develop a financial assistance policy for free and reduced-cost care to patients; require a hospital financial assistance policy to provide reduced-cost medically necessary care to patients who have a financial hardship; require a hospital to apply a reduction that is most favorable to a patient; establish requirements for continued eligibility for reduced-cost care due to a financial hardship; alter the requirements for a notice that a hospital must post; etc. (*Became Law: Ch.60*)

Senate Bill 593

This bill, companion to HB 699, entitled *Health Facilities - Freestanding Medical Facilities – Rates*, would have emergency services include services provided at certain facilities for the purposes of hospital rate setting; require the Health Services Cost Review Commission to set rates for hospital services provided at specified freestanding medical facilities; and require payers to pay claims submitted by freestanding medical facilities at rates set by the Commission. *(Passed Enrolled)*

Senate Bill 855

This bill, companion to HB 929, entitled *Patient Centered Medical Home*, would require the MHCC to establish a Maryland Patient Centered Medical Home Program under particular circumstances; require health insurance carriers to participate in the Program; require the Department to ensure that participation in the Program by managed care organizations and specified enrollees will support certain standards; have the MHCC authorize a health insurance carrier to implement a single carrier patient centered medical home program; etc. *(Became Law-Ch.5)*

Senate Bill 1005

This bill, companion to HB 1410, entitled *Health Services Cost Review Commission - Podiatric Medical Examiners Residency Program*, would authorize an accredited hospital to apply to the HSCRC for funding to establish a podiatric medical examiners residency program; require the Commission to select one accredited hospital that applied for funding and transfer

funds sufficient for the accredited hospital to provide a residency program to a specified number of podiatric medical residents each year for a certain number of years; etc. *(No Action Taken)*

Senate Bill 1075

This bill, entitled *Health Services Cost Review Commission - Membership*, would increase the number of members on the Health Services Cost Review Commission; would have members of the Commission represent specified interests; require members of the Commission to devote full-time duties to the office; require the Governor, to the extent practicable, when making appointments to the Commission, to assure geographic balance and promote diversity in the Commission membership; authorize the Governor to remove a member under specific circumstances; etc. *(Failed)*

VII. STATUS OF LITIGATION INVOLVING THE HEALTH SERVICES COST REVIEW COMMISSION

Over the past fiscal year, the Commission and hospitals were able to resolve all disagreements within the administrative process.

VIII. ACTIVITIES ASSOCIATED WITH IMPLEMENTATION OF HEALTH SERVICES COST REVIEW COMMISSION ALTERNATIVE METHODS OF RATE DETERMINATION

During the past fiscal year, the Commission had the opportunity to consider proposals from hospitals seeking alternative methods of rate determination, pursuant to the provisions of Health-General Article, § 19-219, Annotated Code of Maryland and COMAR 10.37.10.06. Under its law, the Commission may promote and approve experimental payment methodologies that are consistent with the fundamental principles inherent in the Commission's legislative mandate. The applications for alternative methods of rate determination fell into one of four

general categories: 1) ambulatory surgery procedure-based pricing; 2) global pricing or case rate arrangements for selected inpatient procedures; 3) partial capitation or risk sharing arrangements; and 4) full capitation.

FORMER COMMISSIONERS

<u>Former Commissioners</u>	<u>Appointed</u>	<u>Term Expired</u>
John A. Whitney, Esq.	July 19, 1971	June 30, 1972
Sidney A. Green	July 19, 1971	June 30, 1978 (Resigned)
George J. Weems M.D.	July 19, 1971	June 30, 1978 (Resigned)
Mancur Olson, Ph.D	July 19, 1971	June 30, 1977
Bernard Kapiloff, M.D.	July 19, 1971	June 30, 1977
P. Mitchell Coale ¹	March 31, 1976	June 30, 1978 (Resigned)
W. Orville Wright	January 25, 1972	June 30, 1979
Alvin M. Powers	July 19, 1971	June 30, 1979
Natalie Bouquet	October 31, 1972	June 30, 1980
Gary W. Grove	June 29, 1979	June 30, 1983
John T. Parran ²	July 8, 1977	June 30, 1982
Stephen W. McNierney ³	February 8, 1983	June 30, 1986 (Resigned)
Carville M. Akehurst ⁴	June 29, 1979	June 30, 1983
David P. Scheffenacker	September 6, 1977	June 30, 1985
Roland T. Smoot, M.D. ⁵	July 12, 1978	June 30, 1986
Carl J. Schramm, Esq. ⁶	July 8, 1977	June 30, 1985
Richard M. Woodfin ⁷	August 28, 1983	June 30, 1986
Don S. Hillier ⁸	February 24, 1982	June 30, 1987
Earl J. Smith ⁹	August 29, 1983	June 30, 1987
Virginia Layfield	June 30, 1980	June 30, 1988
Walter Sondheim, Jr.	July 1, 1987	June 30, 1991 (Resigned)

¹ Appointed to fill unexpired term of Sidney Green, resigned.

² Appointed to fill unexpired term of George J. Weems, M.D., resigned.

³ Appointed to replace John T. Parran, who continued to serve beyond his appointment.

⁴ Carville M. Akehurst was appointed by the Governor to Chair the Maryland Health Resources Planning Commission and by law had to leave the Health Services Cost Review Commission.

⁵ Appointed to fill the unexpired term of P. Mitchell Coale.

⁶ Carl J. Schramm, Esq. continued to serve as Acting Chairman beyond his appointment.

⁷ Appointed to fill the unexpired term of Stephen W. McNierney.

⁸ Appointed to fill the unexpired term of Gary W. Grove.

⁹ Appointed to fill the unexpired term of Carville M. Akehurst.

Ernest Crofoot	September 6, 1985	June 30, 1989
Richard G. Frank, Ph.D.	October 6, 1989	June 30, 1995 (Resigned)
Barry Kuhne	July 1, 1987	June 30, 1994
William B. Russell, M.D.	July 3, 1986	June 30, 1994
James R. Wood	July 1, 1987	June 30, 1995
Susan R. Guarnieri, M.D.	March 16, 1988	June 30, 1996
Charles O. Fisher, Sr.	April 28, 1986	June 30, 1997
C. James Lowthers	July 16, 1990	June 30, 2001
Willarda V. Edwards, M.D.	July 1, 1994	June 30, 2002
Dean Farley, Ph.D. ¹⁰	July 1, 1994	June 30, 2003
Philip B. Down	July 1, 1995	June 30, 2003
Don S. Hillier	July 1, 1996	June 30, 2004
Dale O. Troll	July 1, 1994	June 30, 2003
Larry L. Grosser	July 1, 2001	June 30, 2005
Samuel Lin, M.D., Ph.D.	July 1, 1997	June 30, 2005
Irvin W. Kues	July 1, 2005	June 30, 2007
William Munn	July 1, 2005	December 31, 2007 (Resigned)
Michael J. Eusebio	July 1, 2003	June 30, 2007
Raymond J. Brusca	July 1, 2005	June 30, 2005
Donald A. Young, M.D. ¹¹	July 1, 2007	June 30, 2010
Trudy R. Hall, M.D., P.A.	July 1, 2002	June 30, 2010
Steven B. Larsen	August 1, 2009	May 10, 2010 (Resigned)

¹⁰ Dean Farley, Ph.D., continued to serve as Vice Chairman beyond his appointment.

¹¹ Donald A. Young, M.D., appointed by the Governor to replace Chairman Irvin W. Kues

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Frederick W. Puddester
Chairman

Kevin J. Sexton
Vice Chairman

Joseph R. Antos, Ph.D.

George H. Bone, M.D.

C. James Lowthers

Herbert S. Wong, Ph.D.



Robert Murray
Executive Director

Stephen Ports
Principal Deputy Director
Policy & Operations

Gerard J. Schmith
Deputy Director
Hospital Rate Setting

HEALTH SERVICES COST REVIEW COMMISSION

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For further information call:
Robert B. Murray
410-764-2605

For release 1:30 p.m. EST
November 3, 2010

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DISCLOSURE OF

HOSPITAL FINANCIAL AND STATISTICAL DATA

The average amount paid for a hospital stay in Maryland rose below the national level of increase in Fiscal Year (FY) 2009. According to figures released today by the Health Services Cost Review Commission (HSCRC), patients at Maryland's hospitals paid, on average, \$10,767 for a hospital admission in FY 2009, up 3% from the \$10,443 paid in FY 2008. The average amount paid by a patient nationally for a hospital stay was estimated to have risen by 4.5%, based on data from the Colorado Data Bank, a survey tool utilized by the hospital industry nation-wide to assess overall hospital performance. Maryland's rate of growth is also below the Consumer Price Index for Hospital and Related Services of 6.5 percent nationally.

Also, the mark-up in Maryland hospitals, the difference between hospital costs and what hospitals ultimately charge patients, remained the lowest in the nation at 22 percent compared with the average mark-up of 188 percent for hospitals nationally, according to the most recent data from the American Hospital Association (AHA). In the absence of rate setting, non-Maryland hospitals must artificially mark-up their charges by over 180 percent in order to cover shortfalls due to uncompensated care, discounts to large HMOs, and low payments from Medicare and Medicaid.

In Maryland, the payment system builds the cost of uncompensated care into the rates, and all payers pay the same rates for hospital care.

In addition, an analysis of hospital costs shows that the average cost per admission in Maryland hospitals increased by 2 percent during FY 2009. In FY 1976, the cost per adjusted admission to a Maryland hospital was 26 percent above the national average. In FY 2008, the year for which the most recent data are available from AHA, the average cost per adjusted admission in Maryland was at the national average. From 1977 through 2008, Maryland experienced the lowest cumulative growth in cost per adjusted admission of any state in the nation.

The HSCRC, established to regulate rates for all those who purchase hospital care, is this country's pioneer hospital rate review agency.

The HSCRC began regulating hospital rates in 1974 and has assisted Maryland hospitals for the majority of the intervening years in remaining well below the national rate of hospital cost increases.

Equivalent Inpatient Admissions (EIPAs) is a statistic that equals inpatient admissions plus a conversion of outpatient visits into equivalent admissions.

The new financial disclosure shows that for Maryland acute hospitals in FY 2009:

- 1) The average *charge* per admission for regulated activities increased 3 percent to \$12,582 in FY 2009 from \$12,221 in FY 2008.
- 2) The average *cost* per EIPA for regulated activities increased 2 percent to \$10,243 in FY 2009 from \$10,031 in FY 2008.
- 3) The average *payment* received by Maryland hospitals per EIPA for regulated activities increased by 3 percent to \$10,767 in FY 2009 from \$10,443 in FY 2008.
- 4) Profits on regulated activities increased in FY 2009, from \$561 million (5.2 percent of regulated net operating revenue) in FY 2008 to \$669 million (or 5.9 percent of regulated net operating revenue).
- 5) Profits on operations (which include profits and losses from regulated and *unregulated* day-to-day activities) increased from \$271 million (or 2.3 percent of total net operating revenue) in FY 2008 to \$319 million in FY 2009 (or 2.6 percent of total net operating revenue), largely due to increased losses sustained by hospitals for physician related-activity.
- 6) Total excess profits (which include profits and losses from regulated and unregulated operating and non-operating activities) decreased substantially from \$157 million in FY 2008 (or 1.4 percent of the total revenue) to \$79 million in FY 2009 (or 0.65 percent of the total revenue), largely due to investment losses, both realized and unrealized, and paper losses associated with debt financing obligations of hospitals.

- 7) Total regulated net patient revenue rose from approximately \$10.6 billion in FY 2008 to \$11.2 billion in FY 2009, an increase of 5.8 percent, due, in part, to a one percent increase in admissions.

Outpatient gross revenue was \$4.2 billion. This represented an increase of 9 percent in FY 2009 compared with an increase of 12.4 percent in FY 2008. As a percentage of total revenue, outpatient revenue remained at 32.21 percent in FY 2009.

Regulated hospital admissions increased from 695,602 in FY 2008 to 703,323 in FY 2009, or 1 percent. In addition, hospital emergency room and clinic visits increased from 4,104,908 in FY 2008 to 4,340,139 in FY 2009, or 5.7 percent.

A unique feature of the Maryland hospital rate system is its coverage of the reasonable cost of providing care to those who cannot pay -- i.e., uncompensated care. Maryland continues to be the only state in the nation that assures its citizens that they can receive care at any hospital regardless of their ability to pay. In Maryland alone, uncompensated care is financed by all payers, including Medicare and Medicaid. As a result, there are no charity hospitals in Maryland; patients who are unable to pay are not transferred into hospitals of "last resort." In 2009, Maryland hospitals incurred \$999 million of uncompensated care, approximately eight cents of uncompensated care cost for every dollar of gross patient revenue; approximately 84 percent of the statewide uncompensated care expenditure originated in the State's metropolitan areas.

The HSCRC was established by the General Assembly in 1971. It is an independent Commission functioning within the Department of Health and Mental Hygiene. It consists of seven members who are appointed by the Governor. The Commission's rate review authority includes assuring the public that: (a) a hospital's

total costs are reasonable; (b) a hospital's aggregate rates are reasonably related to its aggregate costs; and (c) rates are set equitably among all purchasers of care without undue discrimination or preference.

**DISCLOSURE OF HOSPITAL FINANCIAL AND
STATISTICAL INFORMATION
FOR HOSPITALS WITH FISCAL YEARS ENDING
June 30, 2009, August 31, 2009
and December 31, 2009**

By:

HEALTH SERVICES COST REVIEW COMMISSION

October 13, 2010

Introduction

Historically, the Commission has published an annual comparison of Maryland hospitals' regulated cost per adjusted admission with the national average cost per adjusted admission in the Executive Summary of its Disclosure of Financial and Statistical Data (Report). In the past, the Commission believed that cost per adjusted admission represented the best measure of hospital costs affected by rate regulation and within a hospital's control. Beginning with the 2003 report, the Commission shifted its primary attention from cost per adjusted admission to net revenue per adjusted admission. The Commission did so because net revenue per adjusted admission better indicates what Maryland citizens pay for hospital care.

In 2004, the Commission made several additional changes to the Report. The first major change was the expansion of the Report to include both regulated and unregulated operating data. Also, the chronology of the data presented in the Report was changed to include all annual data for the fiscal year ended in that calendar year, e.g., data from hospitals with fiscal years that end December 31, 2009 are included with data from hospitals with June 30 and August 31, 2009 fiscal year ends. The Commission implemented these changes so that Maryland hospitals' data would be consistent with the manner in which national hospital data are published by the American Hospital Association.

The Commission will continue to use cost per adjusted admission as a secondary measure of hospital performance in the Report. Because of the importance of per capita costs in determining health care premiums and taxes, the Commission will explore estimates of this measure, which involve the use of migration, case mix, and population data.

Contents of Report

Under its mandate to “cause the public disclosure of the financial operations of all hospitals” the Commission has prepared comparative statements from information made available by the respective hospitals.

Gross Patient Revenue, Net Patient Revenue, Other Operating Revenue, Net Operating Revenue, % Uncollectible Accounts, Total Operating Costs, Operating Profit / Loss, Non-Operating Income and Expense, and Excess Profit / Loss, as itemized in this Report, were derived from the Annual Report of Revenue, Expenses and Volumes (Annual Report) submitted to the Commission. The Annual Report is reconciled with audited financial statements of the respective institutions.

This year’s Disclosure Statement also includes the following seven Exhibits:

Exhibit I - Change in Cost per EIPA (Regulated Operations)

Exhibit II - Change in Revenue per Admission (Regulated Operations)

Exhibit III - Change in Uncompensated Care (Regulated Operations)

Exhibit IV - Change in Net Patient Revenue per EIPA (Regulated Operations)

Exhibit V - Change in Net Operating Revenue (Regulated Operations)

Exhibit VI - Change in Total Operating Profit / Loss (Regulated and Unregulated Operations)

The following explanations are submitted in order to facilitate the reader’s understanding of this report:

Gross Patient Revenue means all regulated and unregulated patient care revenue and should be accounted for at established rates, regardless of whether the hospital expects to collect the full amount. Such revenues should also be reported on an accrual basis in the period during

which service is provided; other accounting methods, such as the “discharge method” are not acceptable. For historical consistency, uncollectible accounts (bad debts) and charity care are included in gross patient revenue.

Net Patient Revenue means all regulated and unregulated patient care revenue realized by the hospital. Net patient revenue is arrived at by reducing gross patient revenue by contractual allowances, charity care, bad debts, and payer denials. Such revenues should be reported on an accrual basis in the period in which the service is provided.

Other Operating Revenue includes regulated and unregulated revenue associated with normal day-to-day operations from services other than health care provided to patients. These include sales and services to non-patients, revenue from miscellaneous sources, e.g., rental of hospital space, sale of cafeteria meals, gift shop sales, research, Part B physician services, etc. Such revenue is common in the regular operations of a hospital, but should be accounted for separately from regulated patient revenue.

Net Operating Revenue is the total of net patient revenue and other operating revenue.

Uncompensated Care is composed of charity and bad debts. This is the percentage difference between billings at established rates and the amount collected from charity patients and patients who pay less than their total bill, if at all. For historical consistency, uncollectible accounts are treated as a reduction in revenue.

Total Operating Expenses equal the costs of Commission regulated and unregulated inpatient and outpatient care, plus costs associated with Other Operating Revenue. Operating expenses are presented in the Report in accordance with generally accepted accounting principles with the exception of bad debts. For historical consistency, bad debts are treated as a reduction in gross patient revenue.

Equivalent Admission (EIPA) is a statistic formulated by the Commission which equals admissions plus a conversion of outpatient visits into equivalent admissions calculated as follows:

$$\text{EIPAs} = \text{Admissions} \quad \times \quad \frac{\text{Total Gross Patient Care Revenues}}{\text{Gross Inpatient Care Revenues}}$$

Average Cost per EIPA is operating costs divided by EIPAs.

Operating Profit / Loss is the profit or loss from ordinary, normal recurring regulated and unregulated operations of the entity during the period. Operating Profit / Loss also includes restricted donations for specific operating purposes if such funds were expended for the purpose intended by the donor during the fiscal year being reported upon (i.e., June 30, 2007 and December 31, 2007).

Non-Operating Profit / Loss includes investment income, extraordinary gains, and other non-operating gains and losses.

Excess Profit / Loss represents the bottom line figure from the Audited Financial Statement of the institution. It is the total of the Operating Profit / Loss and Non-Operating Profit / Loss. (Provisions for income tax are excluded from the calculation of profit or loss for proprietary hospitals.)

Financial information contained in the Report provides only an overview of the total financial status of the institutions. Additional information concerning the hospitals, in the form of Audited Financial Statements and reports filed pursuant to the regulations of the Health Services Cost Review Commission, is available at the Commission's offices for public inspection between the hours of 8:30 a.m. and 4:30 p.m. and in PDF on the HSCRC website at www.hscrc.state.md.us, under HSCRC Policy Documents and Reports/Annual Reports.

Notes to the Financial and Statistical Data

1. Admissions include infants transferred to Neo-Natal Intensive Care units in the hospital in which they were born.
2. Revenues and expenses applicable to physician Part B professional services are only included in regulated hospital data in hospitals which had Commission approved physician rates on June 30, 1985 and that have not subsequently requested that those rates be abolished so that the physicians may bill fee-for-service.
3. The Specialty Hospitals in this Report are: Adventist Behavioral Health Care-Rockville, Adventist Rehabilitation Hospital of Maryland, Brook Lane Health Services, Adventist Behavioral Health-Eastern Shore, Brook Lane Psychiatric Center, Levindale Hospital, Mt. Washington Pediatric Hospital, Sheppard Pratt Hospital, St. Luke Institute, and University Specialty Hospital.
4. Effective February 1, 2007, Sacred Heart Hospital changed its name to Braddock Hospital.

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEARS 2009 - 2007

ACUTE HOSPITALS TOTAL:

FISCAL YEAR ENDING	Year 2009	Year 2008	Year 2007
Gross Patient Revenue:			
Regulated Services	13,053,765,718	12,357,637,229	11,502,492,521
Unregulated Services	1,351,841,962	1,293,587,454	1,170,603,808
Total	14,405,607,680	13,651,224,683	12,673,096,329
Net Patient Revenue(NPR):			
Regulated Services	11,171,235,695	10,559,199,171	9,833,602,955
Unregulated Services	688,135,796	665,302,388	625,938,528
Total	11,859,371,491	11,224,501,559	10,459,541,483
Other Operating Revenue:			
Regulated Services	124,576,383	145,139,226	149,298,510
Unregulated Services	341,341,500	300,642,001	305,458,831
Total	465,917,883	445,781,227	454,757,341
Net Operating Revenue(NOR)			
Regulated Services	11,295,812,078	10,704,338,397	9,982,901,465
Unregulated Services	1,029,477,296	965,944,389	931,397,459
Total	12,325,289,374	11,670,282,786	10,914,298,924
Total Operating Expenses:			
Regulated Services	10,627,077,598	10,143,272,472	9,446,725,486
Total	12,005,981,064	11,399,480,954	10,585,191,368
Equivalent Inpatient ADMs (EIPA) :			
Regulated Services	1,037,501	1,011,171	979,544
Total	1,109,990	1,083,395	1,050,037
NPR per EIPA			
Regulated Services	10,767.45	10,442.55	10,038.96
Total	10,684.21	10,360.49	9,961.12
NOR per EIPA			
Regulated Services	10,877.52	10,586.08	10,191.38
Total	11,103.96	10,771.96	10,394.20
Operating Expenses per EIPA			
Regulated Services	10,242.96	10,031.21	9,644.00
Total	10,816.30	10,522.00	10,080.78
Net Operating Profit (Loss):			
Regulated Services	668,734,480	561,065,925	536,175,979
Unregulated Services	(349,426,169)	(290,264,092)	(207,068,523)
Total	319,308,311	270,801,833	329,107,456
Total Non-Operating Profit (Loss):	(240,541,204)	(113,346,967)	253,382,927
Non-Operating Revenue	(158,723,050)	11,087,375	274,824,675
Non-Operating Expense	81,818,154	124,434,342	21,441,748
Total Excess Profit	78,767,107	157,454,866	582,490,383
% Change in NPR per EIPA - Regulated	3.11	4.02	6.34
% Change in NOR per EIPA - Regulated	2.75	3.87	6.59
% Change in Operating Expense per EIPA - Regulated	2.11	4.02	6.19
% Change in Net Operating Profit - Regulated	19.19	4.64	16.18
% Net Operating Profit of Regulated NOR	5.92	5.24	5.37
% Change in Net Operating Profit- Total	17.91	(17.72)	20.39
% Net Total Operating Profit of Total NOR	2.59	2.32	3.02
% Change in Total Excess Profit	(49.97)	(72.97)	25.71
% Total Excess Profit of Total Revenue	0.65	1.35	5.21

CHANGE IN COST PER EQUIVALANT ADMISSION(EIPA): EXHIBIT I-a
 REGULATED OPERATIONS
 Listed by Alphabetical Order

Hospital	2008				2009				% Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
All Acute Hospitals	695,602	1,011,171	10,143,272,472	10,031.22	703,323	1,037,501	10,627,077,598	10,242.95	2.11%
Anne Arundel Medical Center	23,192	35,227	297,433,067	8,443.26	24,545	37,124	323,481,921	8,713.45	3.20%
Atlantic General Hospital	3,724	7,259	54,458,617	7,502.22	3,781	7,631	59,338,561	7,776.37	3.65%
Baltimore Washington Medical Center	19,020	29,258	232,400,584	7,943.12	19,662	29,941	263,483,958	8,800.22	10.79%
Bon Secours Hospital	6,522	9,539	83,627,741	8,766.98	7,297	10,932	87,326,019	7,988.24	(8.88%)
Braddock Hospital	9,329	17,703	124,455,861	7,030.02	9,407	17,988	132,631,877	7,373.43	4.88%
Calvert Memorial Hospital	8,013	13,562	85,314,807	6,290.91	8,333	14,749	90,842,718	6,159.18	(2.09%)
Carroll Hospital Center	16,036	21,413	149,106,455	6,963.34	16,178	21,787	161,702,356	7,422.12	6.59%
Chester River Hospital Center	3,604	6,141	51,171,682	8,332.98	3,446	6,595	51,011,116	7,734.50	(7.18%)
Civista Medical Center	7,691	11,375	89,777,024	7,892.33	7,776	11,783	88,810,903	7,536.91	(4.50%)
Doctors' Community Hospital	11,698	19,267	143,922,416	7,469.82	11,932	19,714	153,617,218	7,792.45	4.32%
Dorchester General Hospital	3,542	6,220	39,694,261	6,381.51	3,686	6,344	43,095,616	6,793.32	6.45%
Edward McCready Memorial Hospital	740	2,319	11,456,983	4,940.02	668	1,801	9,891,535	5,491.63	11.17%
Fort Washington Medical Center	3,015	5,928	36,903,906	6,225.47	3,140	6,295	36,925,172	5,865.82	(5.78%)
Franklin Square Hospital Center	27,643	38,639	306,094,837	7,921.97	28,001	39,391	322,365,732	8,183.76	3.30%
Frederick Memorial Hospital	17,720	26,773	205,133,756	7,662.01	17,503	27,652	221,636,962	8,015.20	4.61%
Garrett County Memorial Hospital	2,733	4,830	28,380,547	5,875.94	2,597	4,936	29,787,595	6,034.77	2.70%
Good Samaritan Hospital	17,122	22,601	212,539,046	9,403.86	17,381	23,949	227,853,252	9,514.13	1.17%
Greater Baltimore Medical Center	21,388	37,150	316,188,935	8,511.22	21,550	36,623	325,771,985	8,895.40	4.51%
Harbor Hospital	13,781	18,190	156,929,854	8,627.32	13,776	18,443	165,072,123	8,950.48	3.75%
Harford Memorial Hospital	7,989	12,664	75,087,925	5,929.42	7,235	11,686	75,803,751	6,486.92	9.40%
Holy Cross Hospital	26,865	35,896	293,545,246	8,177.58	27,980	38,000	309,458,016	8,143.55	(0.42%)
Howard County General Hospital	13,638	20,922	179,292,066	8,569.43	14,354	22,589	187,698,057	8,309.19	(3.04%)
James Lawrence Kernan Hospital	3,366	5,063	88,121,888	17,405.71	3,316	5,087	91,630,182	18,012.24	3.48%
Johns Hopkins Bayview Medical Center	21,976	32,999	413,255,263	12,523.12	21,959	33,167	427,307,515	12,883.58	2.88%
Johns Hopkins Hospital	46,297	67,513	1,298,299,098	19,230.44	46,887	69,843	1,359,674,406	19,467.66	1.23%
Laurel Regional Medical Center	6,637	9,766	79,839,494	8,175.18	6,450	10,045	83,281,501	8,290.46	1.41%
Maryland General Hospital	11,648	15,031	135,532,597	9,016.82	11,363	14,862	142,361,768	9,579.23	6.24%
Memorial Hosp and Med Ctr of Cumberla	7,817	11,634	82,700,644	7,108.75	7,660	11,167	83,282,630	7,457.92	4.91%
Memorial Hospital at Easton	9,750	16,140	125,451,524	7,772.60	10,015	16,349	134,106,845	8,202.96	5.54%
Mercy Medical Center	17,777	32,666	286,723,944	8,777.35	18,437	33,604	304,063,622	9,048.31	3.09%
Montgomery General Hospital	10,225	14,058	110,107,267	7,832.14	10,263	14,591	115,736,158	7,931.97	1.27%
Northwest Hospital Center	12,901	21,496	154,091,772	7,168.56	12,782	20,971	159,137,100	7,588.35	5.86%
Peninsula Regional Medical Center	21,022	30,094	279,212,502	9,278.07	21,266	31,193	303,144,053	9,718.48	4.75%

CHANGE IN COST PER EQUIVALANT ADMISSION(EIPA): EXHIBIT I-a
 REGULATED OPERATIONS
 Listed by Alphabetical Order

Hospital	2008				2009				% Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
Prince George's Hospital Center	13,980	17,385	198,288,498	11,405.58	14,355	18,250	212,101,859	11,622.32	1.90%
Saint Agnes Hospital	19,687	28,454	260,314,417	9,148.54	21,596	30,686	275,685,027	8,983.98	(1.80%)
Saint Joseph Medical Center	23,361	30,498	322,940,196	10,588.95	23,448	31,752	322,090,976	10,143.82	(4.20%)
Saint Mary's Hospital	9,694	16,309	88,622,956	5,433.96	9,861	17,592	97,770,605	5,557.75	2.28%
Shady Grove Adventist Hospital	21,170	31,064	256,440,113	8,255.10	22,102	33,450	270,417,774	8,084.28	(2.07%)
Sinai Hospital of Baltimore	26,491	40,344	485,322,263	12,029.54	26,119	39,792	500,512,326	12,578.16	4.56%
Southern Maryland Hospital Center	17,726	25,911	170,857,254	6,594.10	17,095	23,928	179,924,919	7,519.40	14.03%
Suburban Hospital	14,786	19,822	186,617,041	9,414.49	14,602	19,929	195,403,393	9,805.19	4.15%
Union Hospital of Cecil County	8,605	15,891	93,647,500	5,893.19	8,521	15,761	99,599,700	6,319.36	7.23%
Union Memorial Hospital	20,746	27,433	317,897,600	11,588.12	20,587	27,166	326,289,867	12,011.07	3.65%
University MIEMSS	7,507	7,801	128,907,439	16,523.96	7,315	7,614	140,611,809	18,467.48	11.76%
University UMCC	1,292	2,862	51,929,971	18,144.31	1,270	2,583	66,041,802	25,571.20	40.93%
University of Maryland Medical Center	25,599	33,724	774,992,564	22,980.39	26,629	35,291	760,178,731	21,540.43	(6.27%)
Upper Chesapeake Medical Center	16,739	23,768	164,803,083	6,933.74	15,407	24,221	171,205,099	7,068.37	1.94%
Washington Adventist Hospital	17,316	22,570	229,896,023	10,185.76	17,570	23,034	236,950,644	10,286.96	0.99%
Washington County Hospital	16,482	24,077	185,543,944	7,706.25	16,220	24,851	200,960,847	8,086.52	4.93%

CHANGE IN COST PER EQUIVALANT ADMISSION(EIPA): EXHIBIT I-b
 REGULATED OPERATIONS
 Listed by Percentage Change of Cost per EIPA

Hospital	2008				2009				% Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
University UMCC	1,292	2,862	51,929,971	18,144.31	1,270	2,583	66,041,802	25,571.20	40.93%
Southern Maryland Hospital Center	17,726	25,911	170,857,254	6,594.10	17,095	23,928	179,924,919	7,519.40	14.03%
University MIEMSS	7,507	7,801	128,907,439	16,523.96	7,315	7,614	140,611,809	18,467.48	11.76%
Edward McCready Memorial Hospital	740	2,319	11,456,983	4,940.02	668	1,801	9,891,535	5,491.63	11.17%
Baltimore Washington Medical Center	19,020	29,258	232,400,584	7,943.12	19,662	29,941	263,483,958	8,800.22	10.79%
Harford Memorial Hospital	7,989	12,664	75,087,925	5,929.42	7,235	11,686	75,803,751	6,486.92	9.40%
Union Hospital of Cecil County	8,605	15,891	93,647,500	5,893.19	8,521	15,761	99,599,700	6,319.36	7.23%
Carroll Hospital Center	16,036	21,413	149,106,455	6,963.34	16,178	21,787	161,702,356	7,422.12	6.59%
Dorchester General Hospital	3,542	6,220	39,694,261	6,381.51	3,686	6,344	43,095,616	6,793.32	6.45%
Maryland General Hospital	11,648	15,031	135,532,597	9,016.82	11,363	14,862	142,361,768	9,579.23	6.24%
Northwest Hospital Center	12,901	21,496	154,091,772	7,168.56	12,782	20,971	159,137,100	7,588.35	5.86%
Memorial Hospital at Easton	9,750	16,140	125,451,524	7,772.60	10,015	16,349	134,106,845	8,202.96	5.54%
Washington County Hospital	16,482	24,077	185,543,944	7,706.25	16,220	24,851	200,960,847	8,086.52	4.93%
Memorial Hosp and Med Ctr of Cumberla	7,817	11,634	82,700,644	7,108.75	7,660	11,167	83,282,630	7,457.92	4.91%
Braddock Hospital	9,329	17,703	124,455,861	7,030.02	9,407	17,988	132,631,877	7,373.43	4.88%
Peninsula Regional Medical Center	21,022	30,094	279,212,502	9,278.07	21,266	31,193	303,144,053	9,718.48	4.75%
Frederick Memorial Hospital	17,720	26,773	205,133,756	7,662.01	17,503	27,652	221,636,962	8,015.20	4.61%
Sinai Hospital of Baltimore	26,491	40,344	485,322,263	12,029.54	26,119	39,792	500,512,326	12,578.16	4.56%
Greater Baltimore Medical Center	21,388	37,150	316,188,935	8,511.22	21,550	36,623	325,771,985	8,895.40	4.51%
Doctors' Community Hospital	11,698	19,267	143,922,416	7,469.82	11,932	19,714	153,617,218	7,792.45	4.32%
Suburban Hospital	14,786	19,822	186,617,041	9,414.49	14,602	19,929	195,403,393	9,805.19	4.15%
Harbor Hospital	13,781	18,190	156,929,854	8,627.32	13,776	18,443	165,072,123	8,950.48	3.75%
Atlantic General Hospital	3,724	7,259	54,458,617	7,502.22	3,781	7,631	59,338,561	7,776.37	3.65%
Union Memorial Hospital	20,746	27,433	317,897,600	11,588.12	20,587	27,166	326,289,867	12,011.07	3.65%
James Lawrence Kernan Hospital	3,366	5,063	88,121,888	17,405.71	3,316	5,087	91,630,182	18,012.24	3.48%
Franklin Square Hospital Center	27,643	38,639	306,094,837	7,921.97	28,001	39,391	322,365,732	8,183.76	3.30%
Anne Arundel Medical Center	23,192	35,227	297,433,067	8,443.26	24,545	37,124	323,481,921	8,713.45	3.20%
Mercy Medical Center	17,777	32,666	286,723,944	8,777.35	18,437	33,604	304,063,622	9,048.31	3.09%
Johns Hopkins Bayview Medical Center	21,976	32,999	413,255,263	12,523.12	21,959	33,167	427,307,515	12,883.58	2.88%
Garrett County Memorial Hospital	2,733	4,830	28,380,547	5,875.94	2,597	4,936	29,787,595	6,034.77	2.70%
Saint Mary's Hospital	9,694	16,309	88,622,956	5,433.96	9,861	17,592	97,770,605	5,557.75	2.28%
All Acute Hospitals	695,602	1,011,171	10,143,272,472	10,031.22	703,323	1,037,501	10,627,077,598	10,242.95	2.11%
Upper Chesapeake Medical Center	16,739	23,768	164,803,083	6,933.74	15,407	24,221	171,205,099	7,068.37	1.94%
Prince George's Hospital Center	13,980	17,385	198,288,498	11,405.58	14,355	18,250	212,101,859	11,622.32	1.90%

CHANGE IN COST PER EQUIVALANT ADMISSION(EIPA): EXHIBIT I-b
 REGULATED OPERATIONS
 Listed by Percentage Change of Cost per EIPA

Hospital	2008				2009				% Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
Laurel Regional Medical Center	6,637	9,766	79,839,494	8,175.18	6,450	10,045	83,281,501	8,290.46	1.41%
Montgomery General Hospital	10,225	14,058	110,107,267	7,832.14	10,263	14,591	115,736,158	7,931.97	1.27%
Johns Hopkins Hospital	46,297	67,513	1,298,299,098	19,230.44	46,887	69,843	1,359,674,406	19,467.66	1.23%
Good Samaritan Hospital	17,122	22,601	212,539,046	9,403.86	17,381	23,949	227,853,252	9,514.13	1.17%
Washington Adventist Hospital	17,316	22,570	229,896,023	10,185.76	17,570	23,034	236,950,644	10,286.96	0.99%
Holy Cross Hospital	26,865	35,896	293,545,246	8,177.58	27,980	38,000	309,458,016	8,143.55	(0.42%)
Saint Agnes Hospital	19,687	28,454	260,314,417	9,148.54	21,596	30,686	275,685,027	8,983.98	(1.80%)
Shady Grove Adventist Hospital	21,170	31,064	256,440,113	8,255.10	22,102	33,450	270,417,774	8,084.28	(2.07%)
Calvert Memorial Hospital	8,013	13,562	85,314,807	6,290.91	8,333	14,749	90,842,718	6,159.18	(2.09%)
Howard County General Hospital	13,638	20,922	179,292,066	8,569.43	14,354	22,589	187,698,057	8,309.19	(3.04%)
Saint Joseph Medical Center	23,361	30,498	322,940,196	10,588.95	23,448	31,752	322,090,976	10,143.82	(4.20%)
Civista Medical Center	7,691	11,375	89,777,024	7,892.33	7,776	11,783	88,810,903	7,536.91	(4.50%)
Fort Washington Medical Center	3,015	5,928	36,903,906	6,225.47	3,140	6,295	36,925,172	5,865.82	(5.78%)
University of Maryland Medical Center	25,599	33,724	774,992,564	22,980.39	26,629	35,291	760,178,731	21,540.43	(6.27%)
Chester River Hospital Center	3,604	6,141	51,171,682	8,332.98	3,446	6,595	51,011,116	7,734.50	(7.18%)
Bon Secours Hospital	6,522	9,539	83,627,741	8,766.98	7,297	10,932	87,326,019	7,988.24	(8.88%)

CHANGE IN REVENUE PER ADMISSION: EXHIBIT II-a
REGULATED OPERATIONS
Listed by Alphabetical Order

Hospital	2008			2009			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Anne Arundel Medical Center	23,192	237,889,800	10,257.41	24,545	259,508,000	10,572.74	5.83%	3.07%
Atlantic General Hospital	3,724	37,673,500	10,116.41	3,781	37,898,500	10,023.41	1.53%	(0.92%)
Baltimore Washington Medical Center	19,020	184,778,200	9,714.94	19,662	203,144,700	10,331.84	3.38%	6.35%
Bon Secours Hospital	6,522	69,861,800	10,711.71	7,297	81,531,400	11,173.28	11.88%	4.31%
Braddock Hospital	9,329	81,123,100	8,695.80	9,407	87,266,700	9,276.78	0.84%	6.68%
Calvert Memorial Hospital	8,013	60,472,200	7,546.76	8,333	62,949,000	7,554.18	3.99%	0.10%
Carroll Hospital Center	16,036	139,490,000	8,698.55	16,178	145,658,300	9,003.48	0.89%	3.51%
Chester River Hospital Center	3,604	32,537,200	9,028.08	3,446	31,827,400	9,236.04	(4.38%)	2.30%
Civista Medical Center	7,691	67,655,500	8,796.71	7,776	68,380,300	8,793.76	1.11%	(0.03%)
Doctors' Community Hospital	11,698	105,930,700	9,055.45	11,932	114,226,400	9,573.11	2.00%	5.72%
Dorchester General Hospital	3,542	27,330,800	7,716.21	3,686	30,640,600	8,312.70	4.07%	7.73%
Edward McCready Memorial Hospital	740	5,451,953	7,367.50	668	6,237,916	9,338.20	(9.73%)	26.75%
Fort Washington Medical Center	3,015	24,202,246	8,027.28	3,140	23,564,891	7,504.74	4.15%	(6.51%)
Franklin Square Hospital Center	27,643	287,363,400	10,395.52	28,001	294,993,700	10,535.11	1.30%	1.34%
Frederick Memorial Hospital	17,720	162,036,600	9,144.28	17,503	168,905,000	9,650.06	(1.22%)	5.53%
Garrett County Memorial Hospital	2,733	18,590,100	6,802.09	2,597	19,368,300	7,457.95	(4.98%)	9.64%
Good Samaritan Hospital	17,122	201,067,400	11,743.22	17,381	207,780,200	11,954.44	1.51%	1.80%
Greater Baltimore Medical Center	21,388	206,753,700	9,666.81	21,550	231,350,500	10,735.52	0.76%	11.06%
Harbor Hospital	13,781	146,993,400	10,666.38	13,776	150,075,100	10,893.95	(0.04%)	2.13%
Harford Memorial Hospital	7,989	62,006,900	7,761.53	7,235	59,583,000	8,235.38	(9.44%)	6.11%
Holy Cross Hospital	26,865	286,746,400	10,673.61	27,980	290,448,900	10,380.59	4.15%	(2.75%)
Howard County General Hospital	13,638	138,385,200	10,147.03	14,354	146,585,900	10,212.20	5.25%	0.64%
James Lawrence Kernan Hospital	3,366	64,685,400	19,217.29	3,316	68,951,200	20,793.49	(1.49%)	8.20%
Johns Hopkins Bayview Medical Center	21,976	328,222,100	14,935.48	21,959	339,973,800	15,482.21	(0.08%)	3.66%
Johns Hopkins Hospital	46,297	1,050,930,100	22,699.75	46,887	1,087,731,000	23,198.99	1.27%	2.20%
Laurel Regional Medical Center	6,637	63,304,800	9,538.16	6,450	58,840,300	9,122.53	(2.82%)	(4.36%)
Maryland General Hospital	11,648	139,976,800	12,017.24	11,363	139,055,000	12,237.53	(2.45%)	1.83%
Memorial Hosp and Med Ctr of Cumberla	7,817	67,989,600	8,697.66	7,660	72,844,300	9,509.70	(2.01%)	9.34%
Memorial Hospital at Easton	9,750	87,055,600	8,928.78	10,015	98,034,400	9,788.76	2.72%	9.63%
Mercy Medical Center	17,777	192,233,000	10,813.58	18,437	209,676,600	11,372.60	3.71%	5.17%
Montgomery General Hospital	10,225	98,291,000	9,612.81	10,263	98,908,000	9,637.34	0.37%	0.26%
Northwest Hospital Center	12,901	120,758,100	9,360.37	12,782	129,040,400	10,095.48	(0.92%)	7.85%
Peninsula Regional Medical Center	21,022	256,345,800	12,194.17	21,266	262,668,700	12,351.58	1.16%	1.29%
Prince George's Hospital Center	13,980	194,542,400	13,915.77	14,355	204,968,200	14,278.52	2.68%	2.61%
Saint Agnes Hospital	19,687	230,781,400	11,722.53	21,596	252,575,400	11,695.47	9.70%	(0.23%)
Saint Joseph Medical Center	23,361	278,674,600	11,929.05	23,448	294,531,800	12,561.06	0.37%	5.30%
Saint Mary's Hospital	9,694	68,148,400	7,029.96	9,861	69,564,200	7,054.48	1.72%	0.35%

CHANGE IN REVENUE PER ADMISSION: EXHIBIT II-a
 REGULATED OPERATIONS
 Listed by Alphabetical Order

Hospital	2008			2009			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Shady Grove Adventist Hospital	21,170	207,410,990	9,797.40	22,102	218,890,107	9,903.63	4.40%	1.08%
Sinai Hospital of Baltimore	26,491	395,509,500	14,929.96	26,119	411,736,200	15,763.86	(1.40%)	5.59%
Southern Maryland Hospital Center	17,726	155,004,300	8,744.46	17,095	160,627,000	9,396.14	(3.56%)	7.45%
Suburban Hospital	14,786	164,832,900	11,147.90	14,602	167,237,800	11,453.07	(1.24%)	2.74%
Union Hospital of Cecil County	8,605	63,052,200	7,327.39	8,521	68,542,000	8,043.89	(0.98%)	9.78%
Union Memorial Hospital	20,746	312,625,300	15,069.18	20,587	313,625,300	15,234.14	(0.77%)	1.09%
University MIEMSS	7,507	172,807,900	23,019.57	7,315	148,744,200	20,334.14	(2.56%)	(11.67%)
University UMCC	1,292	27,186,800	21,042.41	1,270	26,011,300	20,481.34	(1.70%)	(2.67%)
University of Maryland Medical Center	25,599	665,929,600	26,013.89	26,629	709,361,500	26,638.68	4.02%	2.40%
Upper Chesapeake Medical Center	16,739	138,667,700	8,284.11	15,407	139,662,300	9,064.86	(7.96%)	9.42%
Washington Adventist Hospital	17,316	214,370,568	12,379.91	17,570	216,819,418	12,340.32	1.47%	(0.32%)
Washington County Hospital	16,482	157,356,800	9,547.19	16,220	158,613,400	9,778.88	(1.59%)	2.43%
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	695,602	8,501,033,757	12,221.12	703,323	8,849,158,532	12,581.93	1.11%	2.95%

CHANGE IN REVENUE PER ADMISSION: EXHIBIT II-b
REGULATED OPERATIONS

Listed by Percentage Change of Revenue per Admission

Hospital	2008			2009			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Edward McCready Memorial Hospital	740	5,451,953	7,367.50	668	6,237,916	9,338.20	(9.73%)	26.75%
Greater Baltimore Medical Center	21,388	206,753,700	9,666.81	21,550	231,350,500	10,735.52	0.76%	11.06%
Union Hospital of Cecil County	8,605	63,052,200	7,327.39	8,521	68,542,000	8,043.89	(0.98%)	9.78%
Garrett County Memorial Hospital	2,733	18,590,100	6,802.09	2,597	19,368,300	7,457.95	(4.98%)	9.64%
Memorial Hospital at Easton	9,750	87,055,600	8,928.78	10,015	98,034,400	9,788.76	2.72%	9.63%
Upper Chesapeake Medical Center	16,739	138,667,700	8,284.11	15,407	139,662,300	9,064.86	(7.96%)	9.42%
Memorial Hosp and Med Ctr of Cumberla	7,817	67,989,600	8,697.66	7,660	72,844,300	9,509.70	(2.01%)	9.34%
James Lawrence Kernan Hospital	3,366	64,685,400	19,217.29	3,316	68,951,200	20,793.49	(1.49%)	8.20%
Northwest Hospital Center	12,901	120,758,100	9,360.37	12,782	129,040,400	10,095.48	(0.92%)	7.85%
Dorchester General Hospital	3,542	27,330,800	7,716.21	3,686	30,640,600	8,312.70	4.07%	7.73%
Southern Maryland Hospital Center	17,726	155,004,300	8,744.46	17,095	160,627,000	9,396.14	(3.56%)	7.45%
Braddock Hospital	9,329	81,123,100	8,695.80	9,407	87,266,700	9,276.78	0.84%	6.68%
Baltimore Washington Medical Center	19,020	184,778,200	9,714.94	19,662	203,144,700	10,331.84	3.38%	6.35%
Harford Memorial Hospital	7,989	62,006,900	7,761.53	7,235	59,583,000	8,235.38	(9.44%)	6.11%
Doctors' Community Hospital	11,698	105,930,700	9,055.45	11,932	114,226,400	9,573.11	2.00%	5.72%
Sinai Hospital of Baltimore	26,491	395,509,500	14,929.96	26,119	411,736,200	15,763.86	(1.40%)	5.59%
Frederick Memorial Hospital	17,720	162,036,600	9,144.28	17,503	168,905,000	9,650.06	(1.22%)	5.53%
Saint Joseph Medical Center	23,361	278,674,600	11,929.05	23,448	294,531,800	12,561.06	0.37%	5.30%
Mercy Medical Center	17,777	192,233,000	10,813.58	18,437	209,676,600	11,372.60	3.71%	5.17%
Bon Secours Hospital	6,522	69,861,800	10,711.71	7,297	81,531,400	11,173.28	11.88%	4.31%
Johns Hopkins Bayview Medical Center	21,976	328,222,100	14,935.48	21,959	339,973,800	15,482.21	(0.08%)	3.66%
Carroll Hospital Center	16,036	139,490,000	8,698.55	16,178	145,658,300	9,003.48	0.89%	3.51%
Anne Arundel Medical Center	23,192	237,889,800	10,257.41	24,545	259,508,000	10,572.74	5.83%	3.07%
Suburban Hospital	14,786	164,832,900	11,147.90	14,602	167,237,800	11,453.07	(1.24%)	2.74%
Prince George's Hospital Center	13,980	194,542,400	13,915.77	14,355	204,968,200	14,278.52	2.68%	2.61%
Washington County Hospital	16,482	157,356,800	9,547.19	16,220	158,613,400	9,778.88	(1.59%)	2.43%
University of Maryland Medical Center	25,599	665,929,600	26,013.89	26,629	709,361,500	26,638.68	4.02%	2.40%
Chester River Hospital Center	3,604	32,537,200	9,028.08	3,446	31,827,400	9,236.04	(4.38%)	2.30%
Johns Hopkins Hospital	46,297	1,050,930,100	22,699.75	46,887	1,087,731,000	23,198.99	1.27%	2.20%
Harbor Hospital	13,781	146,993,400	10,666.38	13,776	150,075,100	10,893.95	(0.04%)	2.13%
Maryland General Hospital	11,648	139,976,800	12,017.24	11,363	139,055,000	12,237.53	(2.45%)	1.83%
Good Samaritan Hospital	17,122	201,067,400	11,743.22	17,381	207,780,200	11,954.44	1.51%	1.80%
Franklin Square Hospital Center	27,643	287,363,400	10,395.52	28,001	294,993,700	10,535.11	1.30%	1.34%
Peninsula Regional Medical Center	21,022	256,345,800	12,194.17	21,266	262,668,700	12,351.58	1.16%	1.29%

CHANGE IN REVENUE PER ADMISSION: EXHIBIT II-b
 REGULATED OPERATIONS
 Listed by Percentage Change of Revenue per Admission

Hospital	2008			2009			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Union Memorial Hospital	20,746	312,625,300	15,069.18	20,587	313,625,300	15,234.14	(0.77%)	1.09%
Shady Grove Adventist Hospital	21,170	207,410,990	9,797.40	22,102	218,890,107	9,903.63	4.40%	1.08%
Howard County General Hospital	13,638	138,385,200	10,147.03	14,354	146,585,900	10,212.20	5.25%	0.64%
Saint Mary's Hospital	9,694	68,148,400	7,029.96	9,861	69,564,200	7,054.48	1.72%	0.35%
Montgomery General Hospital	10,225	98,291,000	9,612.81	10,263	98,908,000	9,637.34	0.37%	0.26%
Calvert Memorial Hospital	8,013	60,472,200	7,546.76	8,333	62,949,000	7,554.18	3.99%	0.10%
Civista Medical Center	7,691	67,655,500	8,796.71	7,776	68,380,300	8,793.76	1.11%	(0.03%)
Saint Agnes Hospital	19,687	230,781,400	11,722.53	21,596	252,575,400	11,695.47	9.70%	(0.23%)
Washington Adventist Hospital	17,316	214,370,568	12,379.91	17,570	216,819,418	12,340.32	1.47%	(0.32%)
Atlantic General Hospital	3,724	37,673,500	10,116.41	3,781	37,898,500	10,023.41	1.53%	(0.92%)
University UMCC	1,292	27,186,800	21,042.41	1,270	26,011,300	20,481.34	(1.70%)	(2.67%)
Holy Cross Hospital	26,865	286,746,400	10,673.61	27,980	290,448,900	10,380.59	4.15%	(2.75%)
Laurel Regional Medical Center	6,637	63,304,800	9,538.16	6,450	58,840,300	9,122.53	(2.82%)	(4.36%)
Fort Washington Medical Center	3,015	24,202,246	8,027.28	3,140	23,564,891	7,504.74	4.15%	(6.51%)
University MIEMSS	7,507	172,807,900	23,019.57	7,315	148,744,200	20,334.14	(2.56%)	(11.67%)
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	695,602	8,501,033,757	12,221.12	703,323	8,849,158,532	12,581.93	1.11%	2.95%

CHANGE IN UNCOMPENSATED CARE (UCC) : EXHIBIT III-a

REGULATED OPERATIONS

Listed in Alphabetical Order by Region

Hospital Area	Hospital	2008			2009			% Change UCC Amount
		Gross Patient Revenue	Charity & Bad Debts	% UCC	Gross Patient Revenue	Charity & Bad Debts	% UCC	
M E T R O	Anne Arundel Medical Center	361,340,400	17,663,190	4.89	392,507,100	16,811,415	4.28	-4.82
	Baltimore Washington Medical Center	284,240,600	23,278,800	8.19	309,341,800	24,774,236	8.01	6.42
	Bon Secours Hospital	102,178,500	19,048,251	18.64	122,144,200	21,903,253	17.93	14.99
	Doctors' Community Hospital	174,473,200	19,450,982	11.15	188,720,500	18,127,922	9.61	-6.80
	Fort Washington Medical Center	47,584,845	6,926,051	14.56	47,242,143	6,935,582	14.68	0.14
	Franklin Square Hospital Center	401,669,900	34,048,723	8.48	414,987,900	30,124,835	7.26	-11.52
	Good Samaritan Hospital	265,411,400	17,966,002	6.77	286,296,100	15,172,695	5.30	-15.55
	Greater Baltimore Medical Center	359,118,800	10,189,402	2.84	393,162,100	11,296,260	2.87	10.86
	Harbor Hospital	194,020,200	19,248,174	9.92	200,915,200	17,234,100	8.58	-10.46
	Holy Cross Hospital	383,143,400	30,563,338	7.98	394,466,500	29,871,516	7.57	-2.26
	Howard County General Hospital	212,299,000	11,857,943	5.59	230,685,500	13,151,663	5.70	10.91
	James Lawrence Kernan Hospital	97,293,600	6,049,283	6.22	105,778,700	7,976,879	7.54	31.86
	Johns Hopkins Bayview Medical Center	492,861,500	53,714,000	10.90	513,495,600	53,870,000	10.49	0.29
	Johns Hopkins Hospital	1,532,521,600	105,318,900	6.87	1,620,280,400	106,940,061	6.60	1.54
	Laurel Regional Medical Center	93,150,500	12,708,453	13.64	91,640,000	10,567,812	11.53	-16.84
	Maryland General Hospital	180,632,100	26,702,289	14.78	181,868,000	23,902,302	13.14	-10.49
	Mercy Medical Center	353,240,000	27,129,611	7.68	382,169,900	30,487,033	7.98	12.38
	Montgomery General Hospital	135,140,700	8,174,200	6.05	140,619,400	8,463,900	6.02	3.54
	Northwest Hospital Center	201,205,800	16,645,700	8.27	211,714,700	17,538,800	8.28	5.37
	Prince George's Hospital Center	241,928,700	40,506,188	16.74	260,576,400	40,695,557	15.62	0.47
	Saint Agnes Hospital	333,555,200	22,892,619	6.86	358,890,700	22,549,287	6.28	-1.50
	Saint Joseph Medical Center	363,810,300	13,761,953	3.78	398,844,400	16,297,867	4.09	18.43
	Shady Grove Adventist Hospital	304,350,850	21,358,565	7.02	331,274,906	22,940,583	6.92	7.41
	Sinai Hospital of Baltimore	602,337,500	50,857,400	8.44	627,278,200	48,565,300	7.74	-4.51
	Southern Maryland Hospital Center	226,574,600	22,233,546	9.81	224,831,800	18,092,278	8.05	-18.63
	Suburban Hospital	220,977,300	11,722,500	5.30	228,243,300	11,622,100	5.09	-0.86
	Union Memorial Hospital	413,393,800	31,470,920	7.61	413,847,100	25,786,533	6.23	-18.06
	University MIEMSS	179,581,300	48,600,055	27.06	154,824,600	38,156,591	24.65	-21.49
	University UMCC	60,224,500	8,889,610	14.76	52,896,400	7,735,748	14.62	-12.98
	University of Maryland Medical Cente	877,294,500	90,996,290	10.37	940,100,100	86,346,170	9.18	-5.11
	Upper Chesapeake Medical Center	196,899,000	11,690,712	5.94	219,562,700	15,294,900	6.97	30.83
	Washington Adventist Hospital	279,418,776	29,425,021	10.53	284,247,984	24,567,884	8.64	-16.51
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M E T R O		10,171,872,371	871,088,672	8.56	10,723,454,333	843,801,062	7.87	-3.13

CHANGE IN UNCOMPENSATED CARE (UCC) : EXHIBIT III-a

REGULATED OPERATIONS

Listed in Alphabetical Order by Region

Hospital Area	Hospital	2008			2009			% Change UCC Amount
		Gross Patient Revenue	Charity & Bad Debts	% UCC	Gross Patient Revenue	Charity & Bad Debts	% UCC	
R U R A L	Atlantic General Hospital	73,435,000	4,259,100	5.80	76,484,900	4,750,100	6.21	11.53
	Braddock Hospital	153,946,000	7,712,000	5.01	166,869,000	8,389,000	5.03	8.78
	Calvert Memorial Hospital	102,346,100	6,076,193	5.94	111,417,900	6,528,075	5.86	7.44
	Carroll Hospital Center	186,262,700	10,942,073	5.87	196,154,700	8,748,590	4.46	-20.05
	Chester River Hospital Center	55,440,200	6,617,380	11.94	60,914,200	6,454,293	10.60	-2.46
	Civista Medical Center	100,064,600	8,309,900	8.30	103,621,000	6,237,400	6.02	-24.94
	Dorchester General Hospital	47,996,300	3,275,480	6.82	52,734,300	4,365,261	8.28	33.27
	Edward McCready Memorial Hospital	17,086,858	1,794,825	10.50	16,819,985	1,747,845	10.39	-2.62
	Frederick Memorial Hospital	244,818,200	14,261,162	5.83	266,844,200	15,403,081	5.77	8.01
	Garrett County Memorial Hospital	32,853,800	3,070,080	9.34	36,812,400	3,364,672	9.14	9.60
	Harford Memorial Hospital	98,289,100	11,829,416	12.04	96,235,600	11,314,200	11.76	-4.36
	Memorial Hosp and Med Ctr of Cumberl	101,185,500	5,635,500	5.57	106,194,800	4,831,300	4.55	-14.27
	Memorial Hospital at Easton	144,112,600	8,592,699	5.96	160,032,300	7,928,623	4.95	-7.73
	Peninsula Regional Medical Center	366,969,200	24,880,100	6.78	385,277,000	24,844,400	6.45	-0.14
	Saint Mary's Hospital	114,652,300	7,555,971	6.59	124,100,600	6,718,040	5.41	-11.09
	Union Hospital of Cecil County	116,438,100	9,882,300	8.49	126,780,200	12,808,400	10.10	29.61
	Washington County Hospital	229,868,300	19,187,400	8.35	243,018,300	20,694,200	8.52	7.85
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R U R A L		2,185,764,858	153,881,579	7.04	2,330,311,385	155,127,480	6.66	0.81
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		12,357,637,229	1,024,970,251	8.29	13,053,765,718	998,928,542	7.65	-2.54

CHANGE IN UNCOMPENSATED CARE (UCC) : EXHIBIT III-b
 REGULATED OPERATIONS
 Listed by Percentage of Uncompensated Care by Region

Hospital Area	Hospital	2008			2009			% Change UCC Amount
		Gross Revenues	Charity & Bad Debts	UCC %	Gross Revenues	Charity & Bad Debts	UCC %	
M E T R O	University MIEMSS	179,581,300	48,600,055	27.06	154,824,600	38,156,591	24.65	-21.49
	Bon Secours Hospital	102,178,500	19,048,251	18.64	122,144,200	21,903,253	17.93	14.99
	Prince George's Hospital Center	241,928,700	40,506,188	16.74	260,576,400	40,695,557	15.62	0.47
	Fort Washington Medical Center	47,584,845	6,926,051	14.56	47,242,143	6,935,582	14.68	0.14
	University UMCC	60,224,500	8,889,610	14.76	52,896,400	7,735,748	14.62	-12.98
	Maryland General Hospital	180,632,100	26,702,289	14.78	181,868,000	23,902,302	13.14	-10.49
	Laurel Regional Medical Center	93,150,500	12,708,453	13.64	91,640,000	10,567,812	11.53	-16.84
	Johns Hopkins Bayview Medical Center	492,861,500	53,714,000	10.90	513,495,600	53,870,000	10.49	0.29
	Doctors' Community Hospital	174,473,200	19,450,982	11.15	188,720,500	18,127,922	9.61	-6.80
	University of Maryland Medical Cente	877,294,500	90,996,290	10.37	940,100,100	86,346,170	9.18	-5.11
	Washington Adventist Hospital	279,418,776	29,425,021	10.53	284,247,984	24,567,884	8.64	-16.51
	Harbor Hospital	194,020,200	19,248,174	9.92	200,915,200	17,234,100	8.58	-10.46
	Northwest Hospital Center	201,205,800	16,645,700	8.27	211,714,700	17,538,800	8.28	5.37
	Southern Maryland Hospital Center	226,574,600	22,233,546	9.81	224,831,800	18,092,278	8.05	-18.63
	Baltimore Washington Medical Center	284,240,600	23,278,800	8.19	309,341,800	24,774,236	8.01	6.42
	Mercy Medical Center	353,240,000	27,129,611	7.68	382,169,900	30,487,033	7.98	12.38
	Sinai Hospital of Baltimore	602,337,500	50,857,400	8.44	627,278,200	48,565,300	7.74	-4.51
	Holy Cross Hospital	383,143,400	30,563,338	7.98	394,466,500	29,871,516	7.57	-2.26
	James Lawrence Kernan Hospital	97,293,600	6,049,283	6.22	105,778,700	7,976,879	7.54	31.86
	Franklin Square Hospital Center	401,669,900	34,048,723	8.48	414,987,900	30,124,835	7.26	-11.52
	Upper Chesapeake Medical Center	196,899,000	11,690,712	5.94	219,562,700	15,294,900	6.97	30.83
	Shady Grove Adventist Hospital	304,350,850	21,358,565	7.02	331,274,906	22,940,583	6.92	7.41
	Johns Hopkins Hospital	1,532,521,600	105,318,900	6.87	1,620,280,400	106,940,061	6.60	1.54
	Saint Agnes Hospital	333,555,200	22,892,619	6.86	358,890,700	22,549,287	6.28	-1.50
	Union Memorial Hospital	413,393,800	31,470,920	7.61	413,847,100	25,786,533	6.23	-18.06
	Montgomery General Hospital	135,140,700	8,174,200	6.05	140,619,400	8,463,900	6.02	3.54
	Howard County General Hospital	212,299,000	11,857,943	5.59	230,685,500	13,151,663	5.70	10.91
	Good Samaritan Hospital	265,411,400	17,966,002	6.77	286,296,100	15,172,695	5.30	-15.55
	Suburban Hospital	220,977,300	11,722,500	5.30	228,243,300	11,622,100	5.09	-0.86
	Anne Arundel Medical Center	361,340,400	17,663,190	4.89	392,507,100	16,811,415	4.28	-4.82
	Saint Joseph Medical Center	363,810,300	13,761,953	3.78	398,844,400	16,297,867	4.09	18.43
	Greater Baltimore Medical Center	359,118,800	10,189,402	2.84	393,162,100	11,296,260	2.87	10.86
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M E T R O		10,171,872,371	871,088,672	8.56	10,723,454,333	843,801,062	7.87	-3.13

CHANGE IN UNCOMPENSATED CARE (UCC) : EXHIBIT III-b
 REGULATED OPERATIONS
 Listed by Percentage of Uncompensated Care by Region

Hospital Area	Hospital	2008			2009			% Change UCC Amount
		Gross Revenues	Charity & Bad Debts	UCC %	Gross Revenues	Charity & Bad Debts	UCC %	
R U R A L	Harford Memorial Hospital	98,289,100	11,829,416	12.04	96,235,600	11,314,200	11.76	-4.36
	Chester River Hospital Center	55,440,200	6,617,380	11.94	60,914,200	6,454,293	10.60	-2.46
	Edward McCreedy Memorial Hospital	17,086,858	1,794,825	10.50	16,819,985	1,747,845	10.39	-2.62
	Union Hospital of Cecil County	116,438,100	9,882,300	8.49	126,780,200	12,808,400	10.10	29.61
	Garrett County Memorial Hospital	32,853,800	3,070,080	9.34	36,812,400	3,364,672	9.14	9.60
	Washington County Hospital	229,868,300	19,187,400	8.35	243,018,300	20,694,200	8.52	7.85
	Dorchester General Hospital	47,996,300	3,275,480	6.82	52,734,300	4,365,261	8.28	33.27
	Peninsula Regional Medical Center	366,969,200	24,880,100	6.78	385,277,000	24,844,400	6.45	-0.14
	Atlantic General Hospital	73,435,000	4,259,100	5.80	76,484,900	4,750,100	6.21	11.53
	Civista Medical Center	100,064,600	8,309,900	8.30	103,621,000	6,237,400	6.02	-24.94
	Calvert Memorial Hospital	102,346,100	6,076,193	5.94	111,417,900	6,528,075	5.86	7.44
	Frederick Memorial Hospital	244,818,200	14,261,162	5.83	266,844,200	15,403,081	5.77	8.01
	Saint Mary's Hospital	114,652,300	7,555,971	6.59	124,100,600	6,718,040	5.41	-11.09
	Braddock Hospital	153,946,000	7,712,000	5.01	166,869,000	8,389,000	5.03	8.78
	Memorial Hospital at Easton	144,112,600	8,592,699	5.96	160,032,300	7,928,623	4.95	-7.73
	Memorial Hosp and Med Ctr of Cumberl	101,185,500	5,635,500	5.57	106,194,800	4,831,300	4.55	-14.27
	Carroll Hospital Center	186,262,700	10,942,073	5.87	196,154,700	8,748,590	4.46	-20.05
=====		=====	=====	=====	=====	=====	=====	=====
R U R A L		2,185,764,858	153,881,579	7.04	2,330,311,385	155,127,480	6.66	0.81
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		12,357,637,229	1,024,970,251	8.29	13,053,765,718	998,928,542	7.65	-2.54

CHANGE IN NET PATIENT REVENUE(NPR) PER EIPA: EXHIBIT IV-a
 REGULATED OPERATIONS
 Listed by Alphabetical Order

Hospital	2008			2009			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
All Acute Hospitals	10,559,199,171	1,011,171	10,442.55	11,171,235,695	1,037,501	10,767.44	3.11
Anne Arundel Medical Center	322,026,051	35,227	9,141.39	344,010,185	37,124	9,266.41	1.37
Atlantic General Hospital	64,089,800	7,259	8,829.01	66,120,200	7,631	8,665.10	-1.86
Baltimore Washington Medical Center	241,660,282	29,258	8,259.61	262,470,466	29,941	8,766.37	6.14
Bon Secours Hospital	79,785,576	9,539	8,364.19	93,446,808	10,932	8,548.15	2.20
Braddock Hospital	132,321,300	17,703	7,474.30	142,005,200	17,988	7,894.52	5.62
Calvert Memorial Hospital	89,356,335	13,562	6,588.93	97,651,503	14,749	6,620.81	0.48
Carroll Hospital Center	163,557,665	21,413	7,638.22	172,583,312	21,787	7,921.56	3.71
Chester River Hospital Center	44,720,120	6,141	7,282.38	50,049,509	6,595	7,588.70	4.21
Civista Medical Center	83,291,229	11,375	7,322.16	88,273,027	11,783	7,491.26	2.31
Doctors' Community Hospital	144,755,979	19,267	7,513.08	156,598,647	19,714	7,943.69	5.73
Dorchester General Hospital	41,070,915	6,220	6,602.83	44,424,176	6,344	7,002.74	6.06
Edward McCready Memorial Hospital	13,780,080	2,319	5,941.69	13,674,977	1,801	7,592.14	27.78
Fort Washington Medical Center	38,076,625	5,928	6,423.30	38,272,727	6,295	6,079.89	-5.35
Franklin Square Hospital Center	338,447,374	38,639	8,759.27	355,664,346	39,391	9,029.09	3.08
Frederick Memorial Hospital	212,190,095	26,773	7,925.58	228,268,395	27,652	8,255.02	4.16
Garrett County Memorial Hospital	27,513,600	4,830	5,696.44	31,258,085	4,936	6,332.68	11.17
Good Samaritan Hospital	223,688,794	22,601	9,897.19	245,593,552	23,949	10,254.89	3.61
Greater Baltimore Medical Center	327,568,381	37,150	8,817.53	351,006,608	36,623	9,584.44	8.70
Harbor Hospital	161,116,541	18,190	8,857.48	169,691,122	18,443	9,200.93	3.88
Harford Memorial Hospital	79,516,660	12,664	6,279.14	78,372,221	11,686	6,706.72	6.81
Holy Cross Hospital	326,703,070	35,896	9,101.29	332,740,684	38,000	8,756.24	-3.79
Howard County General Hospital	188,616,540	20,922	9,015.10	202,845,676	22,589	8,979.76	-0.39
James Lawrence Kernan Hospital	86,853,388	5,063	17,155.16	93,226,825	5,087	18,326.10	6.83
Johns Hopkins Bayview Medical Center	414,509,200	32,999	12,561.12	431,873,500	33,167	13,021.25	3.66
Johns Hopkins Hospital	1,324,205,233	67,513	19,614.16	1,412,843,376	69,843	20,228.93	3.13
Laurel Regional Medical Center	77,436,743	9,766	7,929.15	76,473,729	10,045	7,612.76	-3.99
Maryland General Hospital	151,988,277	15,031	10,111.60	156,919,437	14,862	10,558.79	4.42
Memorial Hosp and Med Ctr of Cumberla	84,603,800	11,634	7,272.34	88,316,900	11,167	7,908.74	8.75
Memorial Hospital at Easton	125,016,601	16,140	7,745.65	139,245,218	16,349	8,517.27	9.96
Mercy Medical Center	310,781,321	32,666	9,513.81	334,232,485	33,604	9,946.08	4.54
Montgomery General Hospital	116,767,100	14,058	8,305.86	121,977,000	14,591	8,359.68	0.65
Northwest Hospital Center	170,962,500	21,496	7,953.41	178,142,957	20,971	8,494.63	6.80

CHANGE IN NET PATIENT REVENUE(NPR) PER EIPA: EXHIBIT IV-a
 REGULATED OPERATIONS
 Listed by Alphabetical Order

Hospital	2008			2009			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
Peninsula Regional Medical Center	318,253,000	30,094	10,575.36	331,729,600	31,193	10,634.91	0.56
Prince George's Hospital Center	197,518,266	17,385	11,361.27	210,964,197	18,250	11,559.98	1.75
Saint Agnes Hospital	284,136,736	28,454	9,985.76	307,252,556	30,686	10,012.70	0.27
Saint Joseph Medical Center	322,493,187	30,498	10,574.30	339,694,906	31,752	10,698.23	1.17
Saint Mary's Hospital	96,521,141	16,309	5,918.24	105,768,160	17,592	6,012.37	1.59
Shady Grove Adventist Hospital	261,642,638	31,064	8,422.58	283,847,908	33,450	8,485.78	0.75
Sinai Hospital of Baltimore	512,803,742	40,344	12,710.71	536,920,130	39,792	13,493.11	6.16
Southern Maryland Hospital Center	183,726,110	25,911	7,090.76	188,617,307	23,928	7,882.67	11.17
Suburban Hospital	192,441,500	19,822	9,708.32	199,185,500	19,929	9,994.98	2.95
Union Hospital of Cecil County	98,597,600	15,891	6,204.70	105,285,300	15,761	6,680.09	7.66
Union Memorial Hospital	352,995,022	27,433	12,867.51	353,456,109	27,166	13,011.09	1.12
University MIEMSS	125,795,245	7,801	16,125.02	125,289,009	7,614	16,455.03	2.05
University UMCC	48,156,890	2,862	16,826.00	41,266,652	2,583	15,978.33	-5.04
University of Maryland Medical Center	765,351,210	33,724	22,694.50	819,239,930	35,291	23,213.99	2.29
Upper Chesapeake Medical Center	170,264,950	23,768	7,163.54	187,017,300	24,221	7,721.19	7.78
Washington Adventist Hospital	227,431,160	22,570	10,076.55	233,793,878	23,034	10,149.91	0.73
Washington County Hospital	194,093,600	24,077	8,061.35	203,634,400	24,851	8,194.10	1.65

CHANGE IN NET PATIENT REVENUE(NPR) PER EIPA: EXHIBIT IV-b
Listed by Net Patient Revenues per EIPA

Hospital	2008			2009			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
University of Maryland Medical Center	765,351,210	33,724	22,694.50	819,239,930	35,291	23,213.99	2.29
Johns Hopkins Hospital	1,324,205,233	67,513	19,614.16	1,412,843,376	69,843	20,228.93	3.13
James Lawrence Kernan Hospital	86,853,388	5,063	17,155.16	93,226,825	5,087	18,326.10	6.83
University MIEMSS	125,795,245	7,801	16,125.02	125,289,009	7,614	16,455.03	2.05
University UMCC	48,156,890	2,862	16,826.00	41,266,652	2,583	15,978.33	-5.04
Sinai Hospital of Baltimore	512,803,742	40,344	12,710.71	536,920,130	39,792	13,493.11	6.16
Johns Hopkins Bayview Medical Center	414,509,200	32,999	12,561.12	431,873,500	33,167	13,021.25	3.66
Union Memorial Hospital	352,995,022	27,433	12,867.51	353,456,109	27,166	13,011.09	1.12
Prince George's Hospital Center	197,518,266	17,385	11,361.27	210,964,197	18,250	11,559.98	1.75
All Acute Hospitals	10,559,199,171	1,011,171	10,442.55	11,171,235,695	1,037,501	10,767.44	3.11
Saint Joseph Medical Center	322,493,187	30,498	10,574.30	339,694,906	31,752	10,698.23	1.17
Peninsula Regional Medical Center	318,253,000	30,094	10,575.36	331,729,600	31,193	10,634.91	0.56
Maryland General Hospital	151,988,277	15,031	10,111.60	156,919,437	14,862	10,558.79	4.42
Good Samaritan Hospital	223,688,794	22,601	9,897.19	245,593,552	23,949	10,254.89	3.61
Washington Adventist Hospital	227,431,160	22,570	10,076.55	233,793,878	23,034	10,149.91	0.73
Saint Agnes Hospital	284,136,736	28,454	9,985.76	307,252,556	30,686	10,012.70	0.27
Suburban Hospital	192,441,500	19,822	9,708.32	199,185,500	19,929	9,994.98	2.95
Mercy Medical Center	310,781,321	32,666	9,513.81	334,232,485	33,604	9,946.08	4.54
Greater Baltimore Medical Center	327,568,381	37,150	8,817.53	351,006,608	36,623	9,584.44	8.70
Anne Arundel Medical Center	322,026,051	35,227	9,141.39	344,010,185	37,124	9,266.41	1.37
Harbor Hospital	161,116,541	18,190	8,857.48	169,691,122	18,443	9,200.93	3.88
Franklin Square Hospital Center	338,447,374	38,639	8,759.27	355,664,346	39,391	9,029.09	3.08
Howard County General Hospital	188,616,540	20,922	9,015.10	202,845,676	22,589	8,979.76	-0.39
Baltimore Washington Medical Center	241,660,282	29,258	8,259.61	262,470,466	29,941	8,766.37	6.14
Holy Cross Hospital	326,703,070	35,896	9,101.29	332,740,684	38,000	8,756.24	-3.79
Atlantic General Hospital	64,089,800	7,259	8,829.01	66,120,200	7,631	8,665.10	-1.86
Bon Secours Hospital	79,785,576	9,539	8,364.19	93,446,808	10,932	8,548.15	2.20
Memorial Hospital at Easton	125,016,601	16,140	7,745.65	139,245,218	16,349	8,517.27	9.96
Northwest Hospital Center	170,962,500	21,496	7,953.41	178,142,957	20,971	8,494.63	6.80
Shady Grove Adventist Hospital	261,642,638	31,064	8,422.58	283,847,908	33,450	8,485.78	0.75
Montgomery General Hospital	116,767,100	14,058	8,305.86	121,977,000	14,591	8,359.68	0.65
Frederick Memorial Hospital	212,190,095	26,773	7,925.58	228,268,395	27,652	8,255.02	4.16
Washington County Hospital	194,093,600	24,077	8,061.35	203,634,400	24,851	8,194.10	1.65
Doctors' Community Hospital	144,755,979	19,267	7,513.08	156,598,647	19,714	7,943.69	5.73
Carroll Hospital Center	163,557,665	21,413	7,638.22	172,583,312	21,787	7,921.56	3.71

CHANGE IN NET PATIENT REVENUE(NPR) PER EIPA: EXHIBIT IV-b
Listed by Net Patient Revenues per EIPA

Hospital	2008			2009			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
Memorial Hosp and Med Ctr of Cumberla	84,603,800	11,634	7,272.34	88,316,900	11,167	7,908.74	8.75
Braddock Hospital	132,321,300	17,703	7,474.30	142,005,200	17,988	7,894.52	5.62
Southern Maryland Hospital Center	183,726,110	25,911	7,090.76	188,617,307	23,928	7,882.67	11.17
Upper Chesapeake Medical Center	170,264,950	23,768	7,163.54	187,017,300	24,221	7,721.19	7.78
Laurel Regional Medical Center	77,436,743	9,766	7,929.15	76,473,729	10,045	7,612.76	-3.99
Edward McCready Memorial Hospital	13,780,080	2,319	5,941.69	13,674,977	1,801	7,592.14	27.78
Chester River Hospital Center	44,720,120	6,141	7,282.38	50,049,509	6,595	7,588.70	4.21
Civista Medical Center	83,291,229	11,375	7,322.16	88,273,027	11,783	7,491.26	2.31
Dorchester General Hospital	41,070,915	6,220	6,602.83	44,424,176	6,344	7,002.74	6.06
Harford Memorial Hospital	79,516,660	12,664	6,279.14	78,372,221	11,686	6,706.72	6.81
Union Hospital of Cecil County	98,597,600	15,891	6,204.70	105,285,300	15,761	6,680.09	7.66
Calvert Memorial Hospital	89,356,335	13,562	6,588.93	97,651,503	14,749	6,620.81	0.48
Garrett County Memorial Hospital	27,513,600	4,830	5,696.44	31,258,085	4,936	6,332.68	11.17
Fort Washington Medical Center	38,076,625	5,928	6,423.30	38,272,727	6,295	6,079.89	-5.35
Saint Mary's Hospital	96,521,141	16,309	5,918.24	105,768,160	17,592	6,012.37	1.59

CHANGE IN NET OPERATING REVENUE(NOR) PER EIPA: EXHIBIT V-a
REGULATED OPERATIONS
Listed by Alphabetical Order

Hospital	2008			2009			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
All Acute Hospitals	10,704,338,397	1,011,171	10,586.08	11,295,812,078	1,037,501	10,887.52	2.85
Anne Arundel Medical Center	329,497,859	35,227	9,353.49	349,124,785	37,124	9,404.18	0.54
Atlantic General Hospital	64,164,500	7,259	8,839.30	66,165,700	7,631	8,671.07	-1.90
Baltimore Washington Medical Center	242,333,905	29,258	8,282.63	263,301,691	29,941	8,794.13	6.18
Bon Secours Hospital	80,006,668	9,539	8,387.37	93,804,271	10,932	8,580.85	2.31
Braddock Hospital	132,321,400	17,703	7,474.31	142,005,200	17,988	7,894.52	5.62
Calvert Memorial Hospital	91,338,385	13,562	6,735.08	98,913,228	14,749	6,706.36	-0.43
Carroll Hospital Center	165,163,581	21,413	7,713.21	173,755,553	21,787	7,975.36	3.40
Chester River Hospital Center	48,518,284	6,141	7,900.89	50,448,562	6,595	7,649.20	-3.19
Civista Medical Center	83,585,480	11,375	7,348.03	88,714,018	11,783	7,528.69	2.46
Doctors' Community Hospital	148,958,890	19,267	7,731.22	157,974,419	19,714	8,013.48	3.65
Dorchester General Hospital	41,658,157	6,220	6,697.24	45,070,325	6,344	7,104.60	6.08
Edward McCready Memorial Hospital	13,815,825	2,319	5,957.10	13,688,901	1,801	7,599.87	27.58
Fort Washington Medical Center	38,423,441	5,928	6,481.80	38,687,792	6,295	6,145.82	-5.18
Franklin Square Hospital Center	340,977,840	38,639	8,824.76	357,895,394	39,391	9,085.73	2.96
Frederick Memorial Hospital	215,569,301	26,773	8,051.79	233,970,884	27,652	8,461.24	5.09
Garrett County Memorial Hospital	27,996,929	4,830	5,796.51	31,369,000	4,936	6,355.15	9.64
Good Samaritan Hospital	225,778,715	22,601	9,989.66	247,846,688	23,949	10,348.97	3.60
Greater Baltimore Medical Center	331,769,778	37,150	8,930.62	355,552,503	36,623	9,708.57	8.71
Harbor Hospital	162,762,700	18,190	8,947.98	172,363,135	18,443	9,345.81	4.45
Harford Memorial Hospital	79,647,060	12,664	6,289.44	79,082,621	11,686	6,767.51	7.60
Holy Cross Hospital	328,548,714	35,896	9,152.71	335,161,284	38,000	8,819.94	-3.64
Howard County General Hospital	188,684,571	20,922	9,018.36	202,898,123	22,589	8,982.08	-0.40
James Lawrence Kernan Hospital	91,505,893	5,063	18,074.11	94,113,760	5,087	18,500.45	2.36
Johns Hopkins Bayview Medical Center	422,918,500	32,999	12,815.95	441,163,400	33,167	13,301.35	3.79
Johns Hopkins Hospital	1,336,639,058	67,513	19,798.33	1,425,445,076	69,843	20,409.36	3.09
Laurel Regional Medical Center	77,926,214	9,766	7,979.27	77,224,783	10,045	7,687.53	-3.66
Maryland General Hospital	152,319,113	15,031	10,133.61	158,094,097	14,862	10,637.83	4.98
Memorial Hosp and Med Ctr of Cumberla	84,667,100	11,634	7,277.78	88,733,800	11,167	7,946.07	9.18
Memorial Hospital at Easton	127,338,515	16,140	7,889.51	141,015,514	16,349	8,625.55	9.33
Mercy Medical Center	315,462,821	32,666	9,657.12	337,994,222	33,604	10,058.02	4.15
Montgomery General Hospital	118,176,400	14,058	8,406.11	123,134,800	14,591	8,439.03	0.39
Northwest Hospital Center	172,909,500	21,496	8,043.99	179,366,557	20,971	8,552.98	6.33

CHANGE IN NET OPERATING REVENUE(NOR) PER EIPA: EXHIBIT V-a
REGULATED OPERATIONS
Listed by Alphabetical Order

Hospital	2008			2009			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
Peninsula Regional Medical Center	318,224,500	30,094	10,574.41	332,602,500	31,193	10,662.89	0.84
Prince George's Hospital Center	199,000,845	17,385	11,446.55	211,849,168	18,250	11,608.47	1.41
Saint Agnes Hospital	287,101,949	28,454	10,089.97	310,842,634	30,686	10,129.69	0.39
Saint Joseph Medical Center	323,272,073	30,498	10,599.84	340,774,543	31,752	10,732.23	1.25
Saint Mary's Hospital	97,685,347	16,309	5,989.62	107,208,560	17,592	6,094.25	1.75
Shady Grove Adventist Hospital	263,513,488	31,064	8,482.80	286,491,123	33,450	8,564.80	0.97
Sinai Hospital of Baltimore	529,518,483	40,344	13,125.01	547,144,141	39,792	13,750.04	4.76
Southern Maryland Hospital Center	184,084,845	25,911	7,104.60	188,844,854	23,928	7,892.18	11.09
Suburban Hospital	199,348,300	19,822	10,056.76	204,241,200	19,929	10,248.67	1.91
Union Hospital of Cecil County	100,465,900	15,891	6,322.27	106,494,800	15,761	6,756.83	6.87
Union Memorial Hospital	357,309,722	27,433	13,024.79	357,374,722	27,166	13,155.34	1.00
University MIEMSS	132,559,245	7,801	16,992.06	128,199,844	7,614	16,837.33	-0.91
University UMCC	48,191,890	2,862	16,838.23	41,370,168	2,583	16,018.41	-4.87
University of Maryland Medical Center	788,111,505	33,724	23,369.40	838,431,058	35,291	23,757.79	1.66
Upper Chesapeake Medical Center	170,594,201	23,768	7,177.39	187,905,400	24,221	7,757.86	8.09
Washington Adventist Hospital	229,596,810	22,570	10,172.50	236,361,478	23,034	10,261.38	0.87
Washington County Hospital	194,949,500	24,077	8,096.90	205,595,800	24,851	8,273.02	2.18

CHANGE IN NET OPERATING REVENUE(NOR) PER EIPA: EXHIBIT V-b
Listed by Net Operating Revenues per EIPA

Hospital	2008			2009			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
University of Maryland Medical Center	788,111,505	33,724	23,369.40	838,431,058	35,291	23,757.79	1.66
Johns Hopkins Hospital	1,336,639,058	67,513	19,798.33	1,425,445,076	69,843	20,409.36	3.09
James Lawrence Kernan Hospital	91,505,893	5,063	18,074.11	94,113,760	5,087	18,500.45	2.36
University MIEMSS	132,559,245	7,801	16,992.06	128,199,844	7,614	16,837.33	-0.91
University UMCC	48,191,890	2,862	16,838.23	41,370,168	2,583	16,018.41	-4.87
Sinai Hospital of Baltimore	529,518,483	40,344	13,125.01	547,144,141	39,792	13,750.04	4.76
Johns Hopkins Bayview Medical Center	422,918,500	32,999	12,815.95	441,163,400	33,167	13,301.35	3.79
Union Memorial Hospital	357,309,722	27,433	13,024.79	357,374,722	27,166	13,155.34	1.00
Prince George's Hospital Center	199,000,845	17,385	11,446.55	211,849,168	18,250	11,608.47	1.41
All Acute Hospitals	10,704,338,397	1,011,171	10,586.08	11,295,812,078	1,037,501	10,887.52	2.85
Saint Joseph Medical Center	323,272,073	30,498	10,599.84	340,774,543	31,752	10,732.23	1.25
Peninsula Regional Medical Center	318,224,500	30,094	10,574.41	332,602,500	31,193	10,662.89	0.84
Maryland General Hospital	152,319,113	15,031	10,133.61	158,094,097	14,862	10,637.83	4.98
Good Samaritan Hospital	225,778,715	22,601	9,989.66	247,846,688	23,949	10,348.97	3.60
Washington Adventist Hospital	229,596,810	22,570	10,172.50	236,361,478	23,034	10,261.38	0.87
Suburban Hospital	199,348,300	19,822	10,056.76	204,241,200	19,929	10,248.67	1.91
Saint Agnes Hospital	287,101,949	28,454	10,089.97	310,842,634	30,686	10,129.69	0.39
Mercy Medical Center	315,462,821	32,666	9,657.12	337,994,222	33,604	10,058.02	4.15
Greater Baltimore Medical Center	331,769,778	37,150	8,930.62	355,552,503	36,623	9,708.57	8.71
Anne Arundel Medical Center	329,497,859	35,227	9,353.49	349,124,785	37,124	9,404.18	0.54
Harbor Hospital	162,762,700	18,190	8,947.98	172,363,135	18,443	9,345.81	4.45
Franklin Square Hospital Center	340,977,840	38,639	8,824.76	357,895,394	39,391	9,085.73	2.96
Howard County General Hospital	188,684,571	20,922	9,018.36	202,898,123	22,589	8,982.08	-0.40
Holy Cross Hospital	328,548,714	35,896	9,152.71	335,161,284	38,000	8,819.94	-3.64
Baltimore Washington Medical Center	242,333,905	29,258	8,282.63	263,301,691	29,941	8,794.13	6.18
Atlantic General Hospital	64,164,500	7,259	8,839.30	66,165,700	7,631	8,671.07	-1.90
Memorial Hospital at Easton	127,338,515	16,140	7,889.51	141,015,514	16,349	8,625.55	9.33
Bon Secours Hospital	80,006,668	9,539	8,387.37	93,804,271	10,932	8,580.85	2.31
Shady Grove Adventist Hospital	263,513,488	31,064	8,482.80	286,491,123	33,450	8,564.80	0.97
Northwest Hospital Center	172,909,500	21,496	8,043.99	179,366,557	20,971	8,552.98	6.33
Frederick Memorial Hospital	215,569,301	26,773	8,051.79	233,970,884	27,652	8,461.24	5.09
Montgomery General Hospital	118,176,400	14,058	8,406.11	123,134,800	14,591	8,439.03	0.39
Washington County Hospital	194,949,500	24,077	8,096.90	205,595,800	24,851	8,273.02	2.18
Doctors' Community Hospital	148,958,890	19,267	7,731.22	157,974,419	19,714	8,013.48	3.65
Carroll Hospital Center	165,163,581	21,413	7,713.21	173,755,553	21,787	7,975.36	3.40

CHANGE IN NET OPERATING REVENUE(NOR) PER EIPA: EXHIBIT V-b
Listed by Net Operating Revenues per EIPA

Hospital	2008			2009			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
Memorial Hosp and Med Ctr of Cumberla	84,667,100	11,634	7,277.78	88,733,800	11,167	7,946.07	9.18
Braddock Hospital	132,321,400	17,703	7,474.31	142,005,200	17,988	7,894.52	5.62
Southern Maryland Hospital Center	184,084,845	25,911	7,104.60	188,844,854	23,928	7,892.18	11.09
Upper Chesapeake Medical Center	170,594,201	23,768	7,177.39	187,905,400	24,221	7,757.86	8.09
Laurel Regional Medical Center	77,926,214	9,766	7,979.27	77,224,783	10,045	7,687.53	-3.66
Chester River Hospital Center	48,518,284	6,141	7,900.89	50,448,562	6,595	7,649.20	-3.19
Edward McCready Memorial Hospital	13,815,825	2,319	5,957.10	13,688,901	1,801	7,599.87	27.58
Civista Medical Center	83,585,480	11,375	7,348.03	88,714,018	11,783	7,528.69	2.46
Dorchester General Hospital	41,658,157	6,220	6,697.24	45,070,325	6,344	7,104.60	6.08
Harford Memorial Hospital	79,647,060	12,664	6,289.44	79,082,621	11,686	6,767.51	7.60
Union Hospital of Cecil County	100,465,900	15,891	6,322.27	106,494,800	15,761	6,756.83	6.87
Calvert Memorial Hospital	91,338,385	13,562	6,735.08	98,913,228	14,749	6,706.36	-0.43
Garrett County Memorial Hospital	27,996,929	4,830	5,796.51	31,369,000	4,936	6,355.15	9.64
Fort Washington Medical Center	38,423,441	5,928	6,481.80	38,687,792	6,295	6,145.82	-5.18
Saint Mary's Hospital	97,685,347	16,309	5,989.62	107,208,560	17,592	6,094.25	1.75

CHANGE IN TOTAL OPERATING PROFIT/LOSS : EXHIBIT VI-a
REGULATED & UNREGULATED OPERATIONS
Listed by Alphabetical Order

Hospital	2008			2009			% Change Reg. Operating Profit/Loss	% Change Total Net Profit/Loss
	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss		
All Acute Hospitals	561,065,925	-290,264,092	270,801,833	668,734,480	-349,426,169	319,308,311	19.19	17.91
Anne Arundel Medical Center	32,064,792	-10,086,827	21,977,965	25,642,864	-8,708,326	16,934,538	-20.03	-22.95
Atlantic General Hospital	9,705,883	-5,616,604	4,089,280	6,827,139	-6,583,843	243,296	-29.66	-94.05
Baltimore Washington Medical Center	9,933,321	-2,051,168	7,882,152	-182,268	-1,672,295	-1,854,562	-101.83	-123.53
Bon Secours Hospital	-3,621,073	-17,460,147	-21,081,220	6,478,252	-16,366,315	-9,888,063	278.90	53.10
Braddock Hospital	7,865,539	-6,106,539	1,759,000	9,373,323	-5,916,823	3,456,500	19.17	96.50
Calvert Memorial Hospital	6,023,578	-4,875,653	1,147,925	8,070,510	-6,583,384	1,487,126	33.98	29.55
Carroll Hospital Center	16,057,126	-5,511,855	10,545,271	12,053,197	-7,924,085	4,129,112	-24.94	-60.84
Chester River Hospital Center	-2,653,398	864,407	-1,788,991	-562,554	678,862	116,308	78.80	106.50
Civista Medical Center	-6,191,544	-284,942	-6,476,486	-96,885	-2,427,803	-2,524,688	98.44	61.02
Doctors' Community Hospital	5,036,473	1,049,818	6,086,292	4,357,201	860,450	5,217,652	-13.49	-14.27
Dorchester General Hospital	1,963,896	-1,254,994	708,902	1,974,709	-1,072,990	901,718	0.55	27.20
Edward McCready Memorial Hospital	2,358,842	-624,579	1,734,263	3,797,366	-2,281,201	1,516,165	60.98	-12.58
Fort Washington Medical Center	1,519,535	-152,990	1,366,545	1,762,620	-403,582	1,359,038	16.00	-0.55
Franklin Square Hospital Center	34,883,003	-14,365,974	20,517,029	35,529,662	-17,801,107	17,728,555	1.85	-13.59
Frederick Memorial Hospital	10,435,545	-8,730,188	1,705,357	12,333,922	-10,390,830	1,943,092	18.19	13.94
Garrett County Memorial Hospital	-383,618	-139,617	-523,235	1,581,406	330,212	1,911,618	512.23	465.35
Good Samaritan Hospital	13,239,669	-8,720,642	4,519,027	19,993,436	-12,078,459	7,914,976	51.01	75.15
Greater Baltimore Medical Center	15,580,843	-12,922,805	2,658,038	29,780,518	-11,324,454	18,456,064	91.14	594.35
Harbor Hospital	5,832,846	826,012	6,658,858	7,291,012	-1,475,827	5,815,185	25.00	-12.67
Harford Memorial Hospital	4,559,135	-641,380	3,917,755	3,278,870	-848,949	2,429,921	-28.08	-37.98
Holy Cross Hospital	35,003,468	-11,451,228	23,552,240	25,703,268	-6,702,084	19,001,184	-26.57	-19.32
Howard County General Hospital	9,392,505	-4,271,660	5,120,845	15,200,066	-6,734,024	8,466,043	61.83	65.33
James Lawrence Kernan Hospital	3,384,005	-1,577,475	1,806,530	2,483,578	-272,734	2,210,844	-26.61	22.38
Johns Hopkins Bayview Medical Center	9,663,237	-5,042,837	4,620,400	13,855,885	-12,285,451	1,570,434	43.39	-66.01
Johns Hopkins Hospital	38,339,960	3,955,650	42,295,610	65,770,670	-3,635,344	62,135,326	71.55	46.91
Laurel Regional Medical Center	-1,913,281	-5,055,983	-6,969,263	-6,056,718	-5,697,601	-11,754,319	-216.56	-68.66
Maryland General Hospital	16,786,516	-13,977,516	2,809,000	15,732,329	-14,809,467	922,862	-6.28	-67.15
Memorial Hosp and Med Ctr of Cumberla	1,966,456	497,744	2,464,200	5,451,170	-534,270	4,916,900	177.21	99.53
Memorial Hospital at Easton	1,886,991	1,178,469	3,065,460	6,908,669	1,176,434	8,085,103	266.12	163.75
Mercy Medical Center	28,738,877	-1,764,823	26,974,054	33,930,600	-2,604,120	31,326,480	18.07	16.14
Montgomery General Hospital	8,069,133	-3,579,633	4,489,500	7,398,642	-4,259,742	3,138,900	-8.31	-30.08

CHANGE IN TOTAL OPERATING PROFIT/LOSS : EXHIBIT VI-a
REGULATED & UNREGULATED OPERATIONS
Listed by Alphabetical Order

Hospital	2008			2009			% Change Reg. Operating Profit/Loss	% Change Total Net Profit/Loss
	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss		
Northwest Hospital Center	18,817,728	-6,294,532	12,523,196	20,229,457	-7,795,068	12,434,389	7.50	-0.71
Peninsula Regional Medical Center	39,011,998	-10,811,998	28,200,000	29,458,447	-17,422,447	12,036,000	-24.49	-57.32
Prince George's Hospital Center	712,347	-15,379,867	-14,667,521	-252,691	-14,963,185	-15,215,876	-135.47	-3.74
Saint Agnes Hospital	26,787,532	-15,439,962	11,347,570	35,157,607	-17,472,860	17,684,747	31.25	55.85
Saint Joseph Medical Center	331,877	-18,335,994	-18,004,117	18,683,567	-23,508,912	-4,825,345	5529.66	73.20
Saint Mary's Hospital	9,062,391	-2,357,926	6,704,465	9,437,955	-7,636,854	1,801,101	4.14	-73.14
Shady Grove Adventist Hospital	7,073,375	-341,612	6,731,763	16,073,349	-1,160,228	14,913,121	127.24	121.53
Sinai Hospital of Baltimore	44,196,220	-38,866,260	5,329,960	46,631,815	-34,658,451	11,973,364	5.51	124.64
Southern Maryland Hospital Center	13,227,591	-9,100,468	4,127,123	8,919,935	-6,250,996	2,668,939	-32.57	-35.33
Suburban Hospital	12,731,259	1,356,841	14,088,100	8,837,807	-1,065,807	7,772,000	-30.58	-44.83
Union Hospital of Cecil County	6,818,400	-2,354,300	4,464,100	6,895,100	-4,446,700	2,448,400	1.12	-45.15
Union Memorial Hospital	38,836,906	-15,645,132	23,191,774	31,084,855	-20,759,991	10,324,864	-19.96	-55.48
University MIEMSS	3,651,806	-4,130,170	-478,364	-12,411,966	-4,021,765	-16,433,731	-439.89	-3335.40
University UMCC	-3,738,082	-44,744	-3,782,826	-24,671,635	213,645	-24,457,990	-560.01	-546.55
University of Maryland Medical Center	13,118,941	-10,005,363	3,113,578	78,252,327	-14,689,875	63,562,452	496.48	1941.46
Upper Chesapeake Medical Center	5,791,118	-2,252,313	3,538,805	16,700,301	-3,576,701	13,123,600	188.38	270.85
Washington Adventist Hospital	-299,213	-604,963	-904,176	-589,166	-999,567	-1,588,733	-96.90	-75.71
Washington County Hospital	9,405,556	-1,759,456	7,646,100	4,634,953	-861,253	3,773,700	-50.72	-50.65

CHANGE IN TOTAL OPERATING PROFIT/LOSS : EXHIBIT VI-b
REGULATED & UNREGULATED OPERATIONS
Listed by Total Operating Profit

Hospital	2008			2009			% Change Reg. Operating Profit/Loss	% Change Total Net Profit/Loss
	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss		
All Acute Hospitals	561,065,925	-290,264,092	270,801,833	668,734,480	-349,426,169	319,308,311	19.19	17.91
University of Maryland Medical Center	13,118,941	-10,005,363	3,113,578	78,252,327	-14,689,875	63,562,452	496.48	1941.46
Johns Hopkins Hospital	38,339,960	3,955,650	42,295,610	65,770,670	-3,635,344	62,135,326	71.55	46.91
Mercy Medical Center	28,738,877	-1,764,823	26,974,054	33,930,600	-2,604,120	31,326,480	18.07	16.14
Holy Cross Hospital	35,003,468	-11,451,228	23,552,240	25,703,268	-6,702,084	19,001,184	-26.57	-19.32
Greater Baltimore Medical Center	15,580,843	-12,922,805	2,658,038	29,780,518	-11,324,454	18,456,064	91.14	594.35
Franklin Square Hospital Center	34,883,003	-14,365,974	20,517,029	35,529,662	-17,801,107	17,728,555	1.85	-13.59
Saint Agnes Hospital	26,787,532	-15,439,962	11,347,570	35,157,607	-17,472,860	17,684,747	31.25	55.85
Anne Arundel Medical Center	32,064,792	-10,086,827	21,977,965	25,642,864	-8,708,326	16,934,538	-20.03	-22.95
Shady Grove Adventist Hospital	7,073,375	-341,612	6,731,763	16,073,349	-1,160,228	14,913,121	127.24	121.53
Upper Chesapeake Medical Center	5,791,118	-2,252,313	3,538,805	16,700,301	-3,576,701	13,123,600	188.38	270.85
Northwest Hospital Center	18,817,728	-6,294,532	12,523,196	20,229,457	-7,795,068	12,434,389	7.50	-0.71
Peninsula Regional Medical Center	39,011,998	-10,811,998	28,200,000	29,458,447	-17,422,447	12,036,000	-24.49	-57.32
Sinai Hospital of Baltimore	44,196,220	-38,866,260	5,329,960	46,631,815	-34,658,451	11,973,364	5.51	124.64
Union Memorial Hospital	38,836,906	-15,645,132	23,191,774	31,084,855	-20,759,991	10,324,864	-19.96	-55.48
Howard County General Hospital	9,392,505	-4,271,660	5,120,845	15,200,066	-6,734,024	8,466,043	61.83	65.33
Memorial Hospital at Easton	1,886,991	1,178,469	3,065,460	6,908,669	1,176,434	8,085,103	266.12	163.75
Good Samaritan Hospital	13,239,669	-8,720,642	4,519,027	19,993,436	-12,078,459	7,914,976	51.01	75.15
Suburban Hospital	12,731,259	1,356,841	14,088,100	8,837,807	-1,065,807	7,772,000	-30.58	-44.83
Harbor Hospital	5,832,846	826,012	6,658,858	7,291,012	-1,475,827	5,815,185	25.00	-12.67
Doctors' Community Hospital	5,036,473	1,049,818	6,086,292	4,357,201	860,450	5,217,652	-13.49	-14.27
Memorial Hosp and Med Ctr of Cumberla	1,966,456	497,744	2,464,200	5,451,170	-534,270	4,916,900	177.21	99.53
Carroll Hospital Center	16,057,126	-5,511,855	10,545,271	12,053,197	-7,924,085	4,129,112	-24.94	-60.84
Washington County Hospital	9,405,556	-1,759,456	7,646,100	4,634,953	-861,253	3,773,700	-50.72	-50.65
Braddock Hospital	7,865,539	-6,106,539	1,759,000	9,373,323	-5,916,823	3,456,500	19.17	96.50
Montgomery General Hospital	8,069,133	-3,579,633	4,489,500	7,398,642	-4,259,742	3,138,900	-8.31	-30.08
Southern Maryland Hospital Center	13,227,591	-9,100,468	4,127,123	8,919,935	-6,250,996	2,668,939	-32.57	-35.33
Union Hospital of Cecil County	6,818,400	-2,354,300	4,464,100	6,895,100	-4,446,700	2,448,400	1.12	-45.15
Harford Memorial Hospital	4,559,135	-641,380	3,917,755	3,278,870	-848,949	2,429,921	-28.08	-37.98
James Lawrence Kernan Hospital	3,384,005	-1,577,475	1,806,530	2,483,578	-272,734	2,210,844	-26.61	22.38
Frederick Memorial Hospital	10,435,545	-8,730,188	1,705,357	12,333,922	-10,390,830	1,943,092	18.19	13.94
Garrett County Memorial Hospital	-383,618	-139,617	-523,235	1,581,406	330,212	1,911,618	512.23	465.35

CHANGE IN TOTAL OPERATING PROFIT/LOSS : EXHIBIT VI-b
REGULATED & UNREGULATED OPERATIONS
Listed by Total Operating Profit

Hospital	2008			2009			% Change Reg. Operating Profit/Loss	% Change Total Net Profit/Loss
	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss	Regulated Operating Profit/Loss	Unregulated Operating Profit/Loss	Total Operating Profit/Loss		
Saint Mary's Hospital	9,062,391	-2,357,926	6,704,465	9,437,955	-7,636,854	1,801,101	4.14	-73.14
Johns Hopkins Bayview Medical Center	9,663,237	-5,042,837	4,620,400	13,855,885	-12,285,451	1,570,434	43.39	-66.01
Edward McCready Memorial Hospital	2,358,842	-624,579	1,734,263	3,797,366	-2,281,201	1,516,165	60.98	-12.58
Calvert Memorial Hospital	6,023,578	-4,875,653	1,147,925	8,070,510	-6,583,384	1,487,126	33.98	29.55
Fort Washington Medical Center	1,519,535	-152,990	1,366,545	1,762,620	-403,582	1,359,038	16.00	-0.55
Maryland General Hospital	16,786,516	-13,977,516	2,809,000	15,732,329	-14,809,467	922,862	-6.28	-67.15
Dorchester General Hospital	1,963,896	-1,254,994	708,902	1,974,709	-1,072,990	901,718	0.55	27.20
Atlantic General Hospital	9,705,883	-5,616,604	4,089,280	6,827,139	-6,583,843	243,296	-29.66	-94.05
Chester River Hospital Center	-2,653,398	864,407	-1,788,991	-562,554	678,862	116,308	78.80	106.50
Washington Adventist Hospital	-299,213	-604,963	-904,176	-589,166	-999,567	-1,588,733	-96.90	-75.71
Baltimore Washington Medical Center	9,933,321	-2,051,168	7,882,152	-182,268	-1,672,295	-1,854,562	-101.83	-123.53
Civista Medical Center	-6,191,544	-284,942	-6,476,486	-96,885	-2,427,803	-2,524,688	98.44	61.02
Saint Joseph Medical Center	331,877	-18,335,994	-18,004,117	18,683,567	-23,508,912	-4,825,345	5529.66	73.20
Bon Secours Hospital	-3,621,073	-17,460,147	-21,081,220	6,478,252	-16,366,315	-9,888,063	278.90	53.10
Laurel Regional Medical Center	-1,913,281	-5,055,983	-6,969,263	-6,056,718	-5,697,601	-11,754,319	-216.56	-68.66
Prince George's Hospital Center	712,347	-15,379,867	-14,667,521	-252,691	-14,963,185	-15,215,876	-135.47	-3.74
University MIEMSS	3,651,806	-4,130,170	-478,364	-12,411,966	-4,021,765	-16,433,731	-439.89	-3335.40
University UMCC	-3,738,082	-44,744	-3,782,826	-24,671,635	213,645	-24,457,990	-560.01	-546.55

TOTAL EXCESS PROFIT/LOSS : EXHIBIT VII-a
Listed by Alphabetical Order

Hospital	2008 Excess Profit/Loss	2009 Excess Profit/Loss	% Change in Excess Profit/Loss
All Acute Hospitals	157,454,866	78,767,078	-49.97
Anne Arundel Medical Center	13,023,965	-21,638,462	-266.14
Atlantic General Hospital	5,294,040	1,262,394	-76.15
Baltimore Washington Medical Center	8,806,152	-11,088,062	-225.91
Bon Secours Hospital	-22,177,999	-11,267,209	49.20
Braddock Hospital	3,579,600	4,760,700	33.00
Calvert Memorial Hospital	3,294,916	2,193,983	-33.41
Carroll Hospital Center	11,640,271	-2,560,645	-122.00
Chester River Hospital Center	453,503	72,308	-84.06
Civista Medical Center	-5,445,711	-1,487,298	72.69
Doctors' Community Hospital	-4,703,484	-12,362,211	-162.83
Dorchester General Hospital	709,059	913,427	28.82
Edward McCready Memorial Hospital	1,955,581	1,719,163	-12.09
Fort Washington Medical Center	1,376,900	1,364,754	-0.88
Franklin Square Hospital Center	20,823,842	17,969,335	-13.71
Frederick Memorial Hospital	-7,655,432	-12,574,532	-64.26
Garrett County Memorial Hospital	573,525	1,642,779	186.44
Good Samaritan Hospital	7,762,782	9,296,714	19.76
Greater Baltimore Medical Center	4,349,371	16,624,670	282.23
Harbor Hospital	7,029,486	5,989,641	-14.79
Harford Memorial Hospital	-14,843,245	9,690,721	165.29
Holy Cross Hospital	20,591,015	161,784	-99.21
Howard County General Hospital	3,500,003	5,001,457	42.90
James Lawrence Kernan Hospital	2,551,530	787,445	-69.14
Johns Hopkins Bayview Medical Center	1,424,400	3,331,634	133.90
Johns Hopkins Hospital	69,647,886	83,292,063	19.59
Laurel Regional Medical Center	-6,702,002	-11,690,969	-74.44
Maryland General Hospital	3,698,000	-1,364,838	-136.91

TOTAL EXCESS PROFIT/LOSS : EXHIBIT VII-a
Listed by Alphabetical Order

Hospital	2008 Excess Profit/Loss	2009 Excess Profit/Loss	% Change in Excess Profit/Loss
Memorial Hosp and Med Ctr of Cumberla	4,980,800	6,384,400	28.18
Memorial Hospital at Easton	2,455,633	1,932,904	-21.29
Mercy Medical Center	20,083,054	-3,022,584	-115.05
Montgomery General Hospital	348,100	301,700	-13.33
Northwest Hospital Center	6,548,196	3,668,358	-43.98
Peninsula Regional Medical Center	38,306,000	-5,841,000	-115.25
Prince George's Hospital Center	3,211,919	11,477,713	257.35
Saint Agnes Hospital	12,628,017	-19,440,249	-253.95
Saint Joseph Medical Center	-11,734,613	-14,277,963	-21.67
Saint Mary's Hospital	7,600,949	398,559	-94.76
Shady Grove Adventist Hospital	2,433,859	13,657,827	461.16
Sinai Hospital of Baltimore	-14,912,040	-3,081,636	79.33
Southern Maryland Hospital Center	4,776,075	2,719,464	-43.06
Suburban Hospital	14,352,000	4,240,700	-70.45
Union Hospital of Cecil County	11,778,700	-5,517,300	-146.84
Union Memorial Hospital	21,767,075	6,820,843	-68.66
University MIEMSS	1,487,636	-18,600,731	-1350.35
University UMCC	-2,972,826	-25,344,990	-752.56
University of Maryland Medical Center	-56,231,422	8,123,452	114.45
Upper Chesapeake Medical Center	-46,197,195	36,600,600	179.23
Washington Adventist Hospital	-2,430,705	-1,659,936	31.71
Washington County Hospital	8,617,700	-813,800	-109.44
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TOTAL EXCESS PROFIT/LOSS : EXHIBIT VII-b
Listed by Excess Profit/Loss

Hospital	2008 Excess Profit/Loss	2009 Excess Profit/Loss	% Change in Excess Profit/Loss
Johns Hopkins Hospital	69,647,886	83,292,063	19.59
All Acute Hospitals	157,454,866	78,767,078	-49.97
Upper Chesapeake Medical Center	-46,197,195	36,600,600	179.23
Franklin Square Hospital Center	20,823,842	17,969,335	-13.71
Greater Baltimore Medical Center	4,349,371	16,624,670	282.23
Shady Grove Adventist Hospital	2,433,859	13,657,827	461.16
Prince George's Hospital Center	3,211,919	11,477,713	257.35
Harford Memorial Hospital	-14,843,245	9,690,721	165.29
Good Samaritan Hospital	7,762,782	9,296,714	19.76
University of Maryland Medical Center	-56,231,422	8,123,452	114.45
Union Memorial Hospital	21,767,075	6,820,843	-68.66
Memorial Hosp and Med Ctr of Cumberla Harbor Hospital	4,980,800	6,384,400	28.18
Howard County General Hospital	7,029,486	5,989,641	-14.79
Braddock Hospital	3,500,003	5,001,457	42.90
Suburban Hospital	3,579,600	4,760,700	33.00
Northwest Hospital Center	14,352,000	4,240,700	-70.45
Johns Hopkins Bayview Medical Center	6,548,196	3,668,358	-43.98
Southern Maryland Hospital Center	1,424,400	3,331,634	133.90
Calvert Memorial Hospital	4,776,075	2,719,464	-43.06
Memorial Hospital at Easton	3,294,916	2,193,983	-33.41
Edward McCready Memorial Hospital	2,455,633	1,932,904	-21.29
Garrett County Memorial Hospital	1,955,581	1,719,163	-12.09
Fort Washington Medical Center	573,525	1,642,779	186.44
Atlantic General Hospital	1,376,900	1,364,754	-0.88
Dorchester General Hospital	5,294,040	1,262,394	-76.15
James Lawrence Kernan Hospital	709,059	913,427	28.82
Saint Mary's Hospital	2,551,530	787,445	-69.14
Montgomery General Hospital	7,600,949	398,559	-94.76
	348,100	301,700	-13.33

TOTAL EXCESS PROFIT/LOSS : EXHIBIT VII-b
Listed by Excess Profit/Loss

Hospital	2008 Excess Profit/Loss	2009 Excess Profit/Loss	% Change in Excess Profit/Loss
Holy Cross Hospital	20,591,015	161,784	-99.21
Chester River Hospital Center	453,503	72,308	-84.06
Washington County Hospital	8,617,700	-813,800	-109.44
Maryland General Hospital	3,698,000	-1,364,838	-136.91
Civista Medical Center	-5,445,711	-1,487,298	72.69
Washington Adventist Hospital	-2,430,705	-1,659,936	31.71
Carroll Hospital Center	11,640,271	-2,560,645	-122.00
Mercy Medical Center	20,083,054	-3,022,584	-115.05
Sinai Hospital of Baltimore	-14,912,040	-3,081,636	79.33
Union Hospital of Cecil County	11,778,700	-5,517,300	-146.84
Peninsula Regional Medical Center	38,306,000	-5,841,000	-115.25
Baltimore Washington Medical Center	8,806,152	-11,088,062	-225.91
Bon Secours Hospital	-22,177,999	-11,267,209	49.20
Laurel Regional Medical Center	-6,702,002	-11,690,969	-74.44
Doctors' Community Hospital	-4,703,484	-12,362,211	-162.83
Frederick Memorial Hospital	-7,655,432	-12,574,532	-64.26
Saint Joseph Medical Center	-11,734,613	-14,277,963	-21.67
University MIEMSS	1,487,636	-18,600,731	-1350.35
Saint Agnes Hospital	12,628,017	-19,440,249	-253.95
Anne Arundel Medical Center	13,023,965	-21,638,462	-266.14
University UMCC	-2,972,826	-25,344,990	-752.56
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Anne Arundel Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	392,507,100	361,340,400	325,941,900
Unregulated Services	27,404,887	23,114,909	18,499,513
TOTAL	419,911,987	384,455,309	344,441,413
Net Patient Revenue(NPR):			
Regulated Services	344,010,185	322,026,051	291,589,361
Unregulated Services	12,013,871	9,627,116	9,033,987
TOTAL	356,024,056	331,653,167	300,623,348
Other Operating Revenue:			
Regulated Services	5,114,600	7,471,808	8,749,790
Unregulated Services	15,905,882	14,516,990	13,716,810
TOTAL	21,020,482	21,988,798	22,466,600
Net Operating Revenue(NOR)			
Regulated Services	349,124,785	329,497,859	300,339,151
Unregulated Services	27,919,753	24,144,106	22,750,797
Total	377,044,538	353,641,965	323,089,948
Total Operating Expenses:			
Regulated Services	323,481,921	297,433,067	272,430,922
Total	360,110,000	331,664,000	303,889,040
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	37,124	35,227	34,558
Total	37,466	35,910	34,803
NPR per EIPA :			
Regulated Services	9,266.41	9,141.39	8,437.68
Total	9,502.58	9,235.55	8,637.78
NOR per EIPA :			
Regulated Services	9,404.18	9,353.49	8,690.87
Total	10,063.63	9,847.88	9,283.31
Operating Expenses per EIPA :			
Regulated Services	8,713.45	8,443.26	7,883.30
Total	9,611.63	9,235.86	8,731.61
Net Operating Profit(Loss):			
Regulated Services	25,642,864	32,064,792	27,908,229
Unregulated Services	-8,708,326	-10,086,827	-8,707,321
Total	16,934,538	21,977,965	19,200,908
Total Non-Operating Profit(Loss):	-38,573,000	-8,954,000	21,557,000
Non-Operating Revenue	-38,573,000	-8,954,000	21,557,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-21,638,462	13,023,965	40,757,908
% Change in NPR per EIPA - Regulated	1.37	8.34	7.62
% Change in NOR per EIPA - Regulated	0.54	7.62	8.86
% Change in Oper. Expense per EIPA- Regulated	3.20	7.10	7.70
% Change in Net Operating Profit- Regulated	-20.03	14.89	24.56
% Net Operating Profit of Regulated NOR	7.34	9.73	9.29
% Change in Net Operating Profit- Total	-22.95	14.46	47.91
% Net Total Operating Profit of Total NOR	4.49	6.21	5.94
% Change in Total Excess Profit	-266.14	-68.05	64.64
% Total Excess Profit of Total Revenue	-6.39	3.78	11.83

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

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Atlantic General Hospital

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	76,484,900	73,435,000	63,648,000
Unregulated Services	11,979,655	11,391,230	10,911,875
TOTAL	88,464,555	84,826,230	74,559,875
Net Patient Revenue(NPR):			
Regulated Services	66,120,200	64,089,800	55,389,500
Unregulated Services	7,817,255	7,381,030	6,811,675
TOTAL	73,937,455	71,470,830	62,201,175
Other Operating Revenue:			
Regulated Services	45,500	74,700	26,600
Unregulated Services	395,800	383,500	322,000
TOTAL	441,300	458,200	348,600
Net Operating Revenue(NOR)			
Regulated Services	66,165,700	64,164,500	55,416,100
Unregulated Services	8,213,055	7,764,530	7,133,675
Total	74,378,755	71,929,030	62,549,775
Total Operating Expenses:			
Regulated Services	59,338,561	54,458,617	48,706,258
Total	74,135,459	67,839,750	61,073,979
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	7,631	7,259	7,390
Total	8,826	8,385	8,657
NPR per EIPA :			
Regulated Services	8,665.10	8,829.01	7,494.87
Total	8,377.42	8,523.64	7,184.80
NOR per EIPA :			
Regulated Services	8,671.07	8,839.30	7,498.47
Total	8,427.43	8,578.28	7,225.07
Operating Expenses per EIPA :			
Regulated Services	7,776.37	7,502.22	6,590.55
Total	8,399.86	8,090.59	7,054.60
Net Operating Profit(Loss):			
Regulated Services	6,827,139	9,705,883	6,709,842
Unregulated Services	-6,583,843	-5,616,604	-5,234,045
Total	243,296	4,089,280	1,475,796
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,186,645	1,269,914	1,331,977
Non-Operating Expenses	167,547	65,154	61,275
Total Excess Profit	1,262,394	5,294,040	2,746,498
% Change in NPR per EIPA - Regulated			
	-1.86	17.80	4.16
% Change in NOR per EIPA - Regulated			
	-1.90	17.88	4.15
% Change in Oper. Expense per EIPA- Regulated			
	3.65	13.83	-1.83
% Change in Net Operating Profit- Regulated			
	-29.66	44.65	108.53
% Net Operating Profit of Regulated NOR			
	10.32	15.13	12.11
% Change in Net Operating Profit- Total			
	-94.05	177.09	264.88
% Net Total Operating Profit of Total NOR			
	0.33	5.69	2.36
% Change in Total Excess Profit			
	-76.15	92.76	174.46
% Total Excess Profit of Total Revenue			
	1.67	7.23	4.30

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FISCAL YEAR 2007 TO 2009

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Baltimore Washington Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	309,341,800	284,240,600	265,318,900
Unregulated Services	10,732,909	24,259,477	6,500,878
TOTAL	320,074,709	308,500,077	271,819,778
Net Patient Revenue(NPR):			
Regulated Services	262,470,466	241,660,282	226,959,100
Unregulated Services	10,732,909	8,363,092	6,500,878
TOTAL	273,203,375	250,023,374	233,459,978
Other Operating Revenue:			
Regulated Services	831,225	673,623	1,076,186
Unregulated Services	1,465,079	1,606,411	1,603,814
TOTAL	2,296,304	2,280,034	2,680,000
Net Operating Revenue(NOR)			
Regulated Services	263,301,691	242,333,905	228,035,286
Unregulated Services	12,197,989	9,969,503	8,104,692
Total	275,499,679	252,303,408	236,139,978
Total Operating Expenses:			
Regulated Services	263,483,958	232,400,584	217,084,601
Total	277,354,241	244,421,256	228,107,400
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	29,941	29,258	27,740
Total	30,979	31,755	28,419
NPR per EIPA :			
Regulated Services	8,766.37	8,259.61	8,181.71
Total	8,818.86	7,873.46	8,214.79
NOR per EIPA :			
Regulated Services	8,794.13	8,282.63	8,220.51
Total	8,892.98	7,945.26	8,309.09
Operating Expenses per EIPA :			
Regulated Services	8,800.22	7,943.12	7,825.75
Total	8,952.85	7,697.04	8,026.45
Net Operating Profit(Loss):			
Regulated Services	-182,268	9,933,321	10,950,685
Unregulated Services	-1,672,295	-2,051,168	-2,918,107
Total	-1,854,562	7,882,152	8,032,578
Total Non-Operating Profit(Loss):	-9,233,500	924,000	3,133,000
Non-Operating Revenue	-9,233,500	924,000	3,133,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-11,088,062	8,806,152	11,165,578
% Change in NPR per EIPA - Regulated	6.14	0.95	6.14
% Change in NOR per EIPA - Regulated	6.18	0.76	6.20
% Change in Oper. Expense per EIPA- Regulated	10.79	1.50	7.38
% Change in Net Operating Profit- Regulated	-101.83	-9.29	-10.44
% Net Operating Profit of Regulated NOR	-0.07	4.10	4.80
% Change in Net Operating Profit- Total	-123.53	-1.87	-14.29
% Net Total Operating Profit of Total NOR	-0.67	3.12	3.40
% Change in Total Excess Profit	-225.91	-21.13	16.05
% Total Excess Profit of Total Revenue	-4.16	3.48	4.67

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Bon Secours Hospital

FISCAL YEAR ENDING	August 2009	August 2008	August 2007
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Gross Patient Revenue:			
Regulated Services	122,144,200	102,178,500	100,364,100
Unregulated Services	16,537,773	26,780,231	27,340,096
TOTAL	138,681,973	128,958,731	127,704,196
Net Patient Revenue(NPR):			
Regulated Services	93,446,808	79,785,576	77,777,341
Unregulated Services	8,221,786	8,028,169	9,851,849
TOTAL	101,668,594	87,813,745	87,629,190
Other Operating Revenue:			
Regulated Services	357,463	221,092	620,447
Unregulated Services	9,026,292	5,717,012	5,477,938
TOTAL	9,383,755	5,938,104	6,098,385
Net Operating Revenue(NOR)			
Regulated Services	93,804,271	80,006,668	78,397,788
Unregulated Services	17,248,078	13,745,181	15,329,787
Total	111,052,349	93,751,849	93,727,574
Total Operating Expenses:			
Regulated Services	87,326,019	83,627,741	80,544,848
Total	120,940,412	114,833,069	109,079,748
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	10,932	9,539	10,039
Total	10,319	12,021	12,525
NPR per EIPA :			
Regulated Services	8,548.15	8,364.19	7,747.18
Total	9,852.69	7,305.19	6,996.24
NOR per EIPA :			
Regulated Services	8,580.85	8,387.37	7,808.98
Total	10,762.07	7,799.18	7,483.13
Operating Expenses per EIPA :			
Regulated Services	7,988.24	8,766.98	8,022.85
Total	11,720.32	9,552.92	8,708.83
Net Operating Profit(Loss):			
Regulated Services	6,478,252	-3,621,073	-2,147,061
Unregulated Services	-16,366,315	-17,460,147	-13,205,112
Total	-9,888,063	-21,081,220	-15,352,173
Total Non-Operating Profit(Loss):	-1,379,146	-1,096,779	408,211
Non-Operating Revenue	-1,334,281	-822,868	408,211
Non-Operating Expenses	44,865	273,911	0
Total Excess Profit	-11,267,209	-22,177,999	-14,943,962
% Change in NPR per EIPA - Regulated	2.20	7.96	-2.47
% Change in NOR per EIPA - Regulated	2.31	7.41	-1.43
% Change in Oper. Expense per EIPA- Regulated	-8.88	9.28	3.21
% Change in Net Operating Profit- Regulated	278.90	-68.65	-247.60
% Net Operating Profit of Regulated NOR	6.91	-4.53	-2.74
% Change in Net Operating Profit- Total	53.10	-37.32	-760.02
% Net Total Operating Profit of Total NOR	-8.90	-22.49	-16.38
% Change in Total Excess Profit	49.20	-48.41	-1,856.02
% Total Excess Profit of Total Revenue	-10.27	-23.87	-15.87

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Braddock Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	166,869,000	153,946,000	144,555,000
Unregulated Services	20,069,100	17,439,100	17,203,200
TOTAL	186,938,100	171,385,100	161,758,200
Net Patient Revenue(NPR):			
Regulated Services	142,005,200	132,321,300	126,118,600
Unregulated Services	15,873,900	13,344,200	12,853,700
TOTAL	157,879,100	145,665,500	138,972,300
Other Operating Revenue:			
Regulated Services	0	100	104,700
Unregulated Services	1,136,700	1,355,800	1,553,800
TOTAL	1,136,700	1,355,900	1,658,500
Net Operating Revenue(NOR)			
Regulated Services	142,005,200	132,321,400	126,223,300
Unregulated Services	17,010,600	14,700,000	14,407,500
Total	159,015,800	147,021,400	140,630,800
Total Operating Expenses:			
Regulated Services	132,631,877	124,455,861	114,437,502
Total	155,559,300	145,262,400	133,769,600
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	17,988	17,703	16,773
Total	19,033	18,257	17,942
NPR per EIPA :			
Regulated Services	7,894.52	7,474.30	7,519.24
Total	8,295.08	7,978.64	7,745.48
NOR per EIPA :			
Regulated Services	7,894.52	7,474.31	7,525.48
Total	8,354.80	8,052.91	7,837.92
Operating Expenses per EIPA :			
Regulated Services	7,373.43	7,030.02	6,822.80
Total	8,173.19	7,956.56	7,455.51
Net Operating Profit(Loss):			
Regulated Services	9,373,323	7,865,539	11,785,798
Unregulated Services	-5,916,823	-6,106,539	-4,924,598
Total	3,456,500	1,759,000	6,861,200
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,304,200	1,820,600	1,744,500
Non-Operating Expenses	0	0	0
Total Excess Profit	4,760,700	3,579,600	8,605,700
% Change in NPR per EIPA - Regulated	5.62	-0.60	6.10
% Change in NOR per EIPA - Regulated	5.62	-0.68	6.76
% Change in Oper. Expense per EIPA- Regulated	4.88	3.04	0.81
% Change in Net Operating Profit- Regulated	19.17	-33.26	162.86
% Net Operating Profit of Regulated NOR	6.60	5.94	9.34
% Change in Net Operating Profit- Total	96.50	-74.36	218.05
% Net Total Operating Profit of Total NOR	2.17	1.20	4.88
% Change in Total Excess Profit	33.00	-58.40	83.79
% Total Excess Profit of Total Revenue	2.97	2.40	6.04

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Calvert Memorial Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	111,417,900	102,346,100	94,108,300
Unregulated Services	17,563,082	17,422,425	17,580,475
TOTAL	128,980,982	119,768,525	111,688,775
Net Patient Revenue(NPR):			
Regulated Services	97,651,503	89,356,335	81,903,286
Unregulated Services	11,124,424	11,493,515	12,151,767
TOTAL	108,775,927	100,849,850	94,055,053
Other Operating Revenue:			
Regulated Services	1,261,725	1,982,050	1,963,959
Unregulated Services	2,154,803	1,861,904	1,532,553
TOTAL	3,416,528	3,843,954	3,496,512
Net Operating Revenue(NOR)			
Regulated Services	98,913,228	91,338,385	83,867,245
Unregulated Services	13,279,227	13,355,419	13,684,320
Total	112,192,455	104,693,804	97,551,565
Total Operating Expenses:			
Regulated Services	90,842,718	85,314,807	77,074,375
Total	110,705,329	103,545,879	93,946,509
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	14,749	13,562	12,994
Total	16,908	15,652	15,263
NPR per EIPA :			
Regulated Services	6,620.81	6,588.93	6,303.13
Total	6,433.23	6,443.16	6,162.22
NOR per EIPA :			
Regulated Services	6,706.36	6,735.08	6,454.28
Total	6,635.29	6,688.75	6,391.30
Operating Expenses per EIPA :			
Regulated Services	6,159.18	6,290.91	5,931.51
Total	6,547.34	6,615.41	6,155.11
Net Operating Profit(Loss):			
Regulated Services	8,070,510	6,023,578	6,792,870
Unregulated Services	-4,583,384	-4,875,653	-3,187,814
Total	1,487,126	1,147,925	3,605,056
Total Non-Operating Profit(Loss):	706,857	2,146,991	1,690,971
Non-Operating Revenue	721,866	2,146,991	1,952,071
Non-Operating Expenses	15,009	0	261,100
Total Excess Profit	2,193,983	3,294,916	5,296,027
% Change in NPR per EIPA - Regulated	0.48	4.53	3.58
% Change in NOR per EIPA - Regulated	-0.43	4.35	4.51
% Change in Oper. Expense per EIPA- Regulated	-2.09	6.06	4.36
% Change in Net Operating Profit- Regulated	33.98	-11.32	9.25
% Net Operating Profit of Regulated NOR	8.16	6.59	8.10
% Change in Net Operating Profit- Total	29.55	-68.16	-25.25
% Net Total Operating Profit of Total NOR	1.33	1.10	3.70
% Change in Total Excess Profit	-33.41	-37.79	-0.00
% Total Excess Profit of Total Revenue	1.94	3.08	5.32

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Carroll Hospital Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	196,154,700	186,262,700	169,471,500
Unregulated Services	54,410,406	51,808,089	69,425,600
TOTAL	250,565,106	238,070,789	238,897,100
Net Patient Revenue(NPR):			
Regulated Services	172,583,312	163,557,665	149,708,066
Unregulated Services	45,711,404	43,060,055	39,345,821
TOTAL	218,294,716	206,617,720	189,053,887
Other Operating Revenue:			
Regulated Services	1,172,241	1,605,916	1,242,480
Unregulated Services	15,577,658	14,391,389	14,027,601
TOTAL	16,749,899	15,997,305	15,270,081
Net Operating Revenue(NOR)			
Regulated Services	173,755,553	165,163,581	150,950,546
Unregulated Services	61,289,062	57,451,444	53,373,422
Total	235,044,615	222,615,025	204,323,968
Total Operating Expenses:			
Regulated Services	161,702,356	149,106,455	137,509,445
Total	230,915,503	212,069,754	194,131,676
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	21,787	21,413	21,047
Total	27,830	27,369	29,669
NPR per EIPA :			
Regulated Services	7,921.56	7,638.22	7,113.09
Total	7,843.92	7,549.33	6,372.13
NOR per EIPA :			
Regulated Services	7,975.36	7,713.21	7,172.13
Total	8,445.79	8,133.84	6,886.82
Operating Expenses per EIPA :			
Regulated Services	7,422.12	6,963.34	6,533.50
Total	8,297.42	7,748.54	6,543.28
Net Operating Profit(Loss):			
Regulated Services	12,053,197	16,057,126	13,441,101
Unregulated Services	-7,924,085	-5,511,855	-3,248,809
Total	4,129,112	10,545,271	10,192,292
Total Non-Operating Profit(Loss):	-6,689,757	1,095,000	7,761,863
Non-Operating Revenue	2,059,874	6,469,800	11,987,863
Non-Operating Expenses	8,749,631	5,374,800	4,226,000
Total Excess Profit	-2,560,645	11,640,271	17,954,155
% Change in NPR per EIPA - Regulated	3.71	7.38	3.86
% Change in NOR per EIPA - Regulated	3.40	7.54	3.92
% Change in Oper. Expense per EIPA- Regulated	6.59	6.58	2.60
% Change in Net Operating Profit- Regulated	-24.94	19.46	27.31
% Net Operating Profit of Regulated NOR	6.94	9.72	8.90
% Change in Net Operating Profit- Total	-60.84	3.46	47.84
% Net Total Operating Profit of Total NOR	1.76	4.74	4.99
% Change in Total Excess Profit	-122.00	-35.17	40.06
% Total Excess Profit of Total Revenue	-1.08	5.08	8.30

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Chester River Hospital Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	60,914,200	55,440,200	57,015,700
Unregulated Services	2,283,120	2,274,172	1,743,189
TOTAL	63,197,320	57,714,372	58,758,889
Net Patient Revenue(NPR):			
Regulated Services	50,049,509	44,720,120	47,776,943
Unregulated Services	2,082,791	1,300,585	871,594
TOTAL	52,132,300	46,020,706	48,648,538
Other Operating Revenue:			
Regulated Services	399,053	3,798,163	455,981
Unregulated Services	343,206	470,247	385,394
TOTAL	742,259	4,268,410	841,375
Net Operating Revenue(NOR)			
Regulated Services	50,448,562	48,518,284	48,232,924
Unregulated Services	2,425,998	1,770,832	1,256,988
Total	52,874,559	50,289,116	49,489,913
Total Operating Expenses:			
Regulated Services	51,011,116	51,171,682	49,518,932
Total	52,758,252	52,078,107	50,331,232
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	6,595	6,141	7,716
Total	6,842	6,373	7,916
NPR per EIPA :			
Regulated Services	7,588.70	7,282.38	6,191.55
Total	7,618.93	7,221.57	6,145.48
NOR per EIPA :			
Regulated Services	7,649.20	7,900.89	6,250.64
Total	7,727.41	7,891.37	6,251.76
Operating Expenses per EIPA :			
Regulated Services	7,734.50	8,332.98	6,417.30
Total	7,710.41	8,172.09	6,358.04
Net Operating Profit(Loss):			
Regulated Services	-562,554	-2,653,398	-1,286,008
Unregulated Services	678,862	864,407	444,689
Total	116,308	-1,788,991	-841,319
Total Non-Operating Profit(Loss):	-44,000	2,242,494	356,337
Non-Operating Revenue	411,000	2,328,859	356,337
Non-Operating Expenses	455,000	86,365	0
Total Excess Profit	72,308	453,503	-484,982
% Change in NPR per EIPA - Regulated	4.21	17.62	-5.66
% Change in NOR per EIPA - Regulated	-3.19	26.40	-5.63
% Change in Oper. Expense per EIPA- Regulated	-7.18	29.85	-2.54
% Change in Net Operating Profit- Regulated	78.80	-106.33	-579.32
% Net Operating Profit of Regulated NOR	-1.12	-5.47	-2.67
% Change in Net Operating Profit- Total	106.50	-112.64	-241.04
% Net Total Operating Profit of Total NOR	0.22	-3.56	-1.70
% Change in Total Excess Profit	-84.06	193.51	-150.41
% Total Excess Profit of Total Revenue	0.14	0.86	-0.97

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Civista Medical Center

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	103,621,000	100,064,600	91,365,800
Unregulated Services	4,069,300	1,526,100	1,403,000
TOTAL	107,690,300	101,590,700	92,768,800
Net Patient Revenue(NPR):			
Regulated Services	88,273,027	83,291,229	79,869,087
Unregulated Services	1,646,300	937,900	1,001,100
TOTAL	89,919,327	84,229,129	80,870,187
Other Operating Revenue:			
Regulated Services	440,991	294,251	140,476
Unregulated Services	435,384	333,451	400,879
TOTAL	876,375	627,702	541,355
Net Operating Revenue(NOR)			
Regulated Services	88,714,018	83,585,480	80,009,563
Unregulated Services	2,081,684	1,271,351	1,401,979
Total	90,795,702	84,856,831	81,411,542
Total Operating Expenses:			
Regulated Services	88,810,903	89,777,024	81,576,289
Total	93,320,390	91,333,317	83,435,451
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	11,783	11,375	11,730
Total	12,227	11,531	11,890
NPR per EIPA :			
Regulated Services	7,491.26	7,322.16	6,808.83
Total	7,354.18	7,304.70	6,801.58
NOR per EIPA :			
Regulated Services	7,528.69	7,348.03	6,820.81
Total	7,425.85	7,359.13	6,847.11
Operating Expenses per EIPA :			
Regulated Services	7,536.91	7,892.33	6,954.37
Total	7,632.34	7,920.80	7,017.33
Net Operating Profit(Loss):			
Regulated Services	-96,885	-6,191,544	-1,566,726
Unregulated Services	-2,427,803	-284,942	-457,183
Total	-2,524,688	-6,476,486	-2,023,908
Total Non-Operating Profit(Loss):	1,037,391	1,030,775	702,561
Non-Operating Revenue	1,037,391	1,030,775	702,561
Non-Operating Expenses	0	0	0
Total Excess Profit	-1,487,298	-5,445,711	-1,321,347
% Change in NPR per EIPA - Regulated	2.31	7.54	12.12
% Change in NOR per EIPA - Regulated	2.46	7.73	11.90
% Change in Oper. Expense per EIPA- Regulated	-4.50	13.49	14.74
% Change in Net Operating Profit- Regulated	98.44	-295.19	-497.20
% Net Operating Profit of Regulated NOR	-0.11	-7.41	-1.96
% Change in Net Operating Profit- Total	61.02	-220.00	-840.15
% Net Total Operating Profit of Total NOR	-2.78	-7.63	-2.49
% Change in Total Excess Profit	72.69	-312.13	-804.63
% Total Excess Profit of Total Revenue	-1.62	-6.34	-1.61

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Doctors' Community Hospital

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	188,720,500	174,473,200	169,628,900
Unregulated Services	5,567,940	7,935,667	828,100
TOTAL	194,288,440	182,408,867	170,457,000
Net Patient Revenue(NPR):			
Regulated Services	156,598,647	144,755,979	141,992,378
Unregulated Services	5,398,926	7,705,931	692,500
TOTAL	161,997,573	152,461,910	142,684,878
Other Operating Revenue:			
Regulated Services	1,375,772	4,202,911	4,372,211
Unregulated Services	6,459,268	2,373,446	3,616,455
TOTAL	7,835,040	6,576,357	7,988,666
Net Operating Revenue(NOR)			
Regulated Services	157,974,419	148,958,890	146,364,589
Unregulated Services	11,858,194	10,079,377	4,308,955
Total	169,832,613	159,038,267	150,673,544
Total Operating Expenses:			
Regulated Services	153,617,218	143,922,416	138,656,988
Total	164,614,961	152,951,975	143,033,333
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	19,714	19,267	17,568
Total	20,295	19,951	17,653
NPR per EIPA :			
Regulated Services	7,943.69	7,513.08	8,082.65
Total	7,982.06	7,641.98	8,082.62
NOR per EIPA :			
Regulated Services	8,013.48	7,731.22	8,331.53
Total	8,368.11	7,971.61	8,535.15
Operating Expenses per EIPA :			
Regulated Services	7,792.45	7,469.82	7,892.79
Total	8,111.02	7,666.55	8,102.35
Net Operating Profit(Loss):			
Regulated Services	4,357,201	5,036,473	7,707,601
Unregulated Services	860,450	1,049,818	-67,390
Total	5,217,652	6,086,292	7,640,211
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	-17,579,863	-3,392,514	1,556,914
Non-Operating Expenses	0	7,397,262	4,362,315
Total Excess Profit	-12,362,211	-4,703,484	4,834,810
% Change in NPR per EIPA - Regulated			
	5.73	-7.05	12.87
% Change in NOR per EIPA - Regulated			
	3.65	-7.21	13.30
% Change in Oper. Expense per EIPA- Regulated			
	4.32	-5.36	10.75
% Change in Net Operating Profit- Regulated			
	-13.49	-34.66	90.43
% Net Operating Profit of Regulated NOR			
	2.76	3.38	5.27
% Change in Net Operating Profit- Total			
	-14.27	-20.34	111.14
% Net Total Operating Profit of Total NOR			
	3.07	3.83	5.07
% Change in Total Excess Profit			
	-162.83	-197.28	-34.51
% Total Excess Profit of Total Revenue			
	-8.12	-3.02	3.18

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Dorchester General Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	52,734,300	47,996,300	43,008,008
Unregulated Services	1,757,285	2,040,182	2,139,351
TOTAL	54,491,585	50,036,482	45,147,359
Net Patient Revenue(NPR):			
Regulated Services	44,424,176	41,070,915	36,917,306
Unregulated Services	1,332,557	1,247,054	1,351,103
TOTAL	45,756,733	42,317,969	38,268,409
Other Operating Revenue:			
Regulated Services	646,148	587,242	828,163
Unregulated Services	313,983	314,879	338,878
TOTAL	960,131	902,121	1,167,041
Net Operating Revenue(NOR)			
Regulated Services	45,070,325	41,658,157	37,745,469
Unregulated Services	1,646,540	1,561,933	1,689,981
Total	46,716,865	43,220,090	39,435,450
Total Operating Expenses:			
Regulated Services	43,095,616	39,694,261	33,825,676
Total	45,815,146	42,511,188	36,904,064
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	6,344	6,220	6,133
Total	6,555	6,485	6,356
NPR per EIPA :			
Regulated Services	7,002.74	6,602.83	6,019.29
Total	6,980.19	6,525.92	6,021.01
NOR per EIPA :			
Regulated Services	7,104.60	6,697.24	6,154.32
Total	7,126.66	6,665.04	6,204.63
Operating Expenses per EIPA :			
Regulated Services	6,793.32	6,381.51	5,515.20
Total	6,989.11	6,555.72	5,806.35
Net Operating Profit(Loss):			
Regulated Services	1,974,709	1,963,896	3,919,793
Unregulated Services	-1,072,990	-1,254,994	-1,388,407
Total	901,718	708,902	2,531,386
Total Non-Operating Profit(Loss):	11,709	157	379,872
Non-Operating Revenue	11,709	157	379,872
Non-Operating Expenses	0	0	0
Total Excess Profit	913,427	709,059	2,911,258
% Change in NPR per EIPA - Regulated	6.06	9.69	13.66
% Change in NOR per EIPA - Regulated	6.08	8.82	15.43
% Change in Oper. Expense per EIPA- Regulated	6.45	15.71	10.30
% Change in Net Operating Profit- Regulated	0.55	-49.90	85.53
% Net Operating Profit of Regulated NOR	4.38	4.71	10.38
% Change in Net Operating Profit- Total	27.20	-72.00	237.88
% Net Total Operating Profit of Total NOR	1.93	1.64	6.42
% Change in Total Excess Profit	28.82	-75.64	227.44
% Total Excess Profit of Total Revenue	1.95	1.64	7.31

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Edward McCready Memorial Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	16,819,985	17,086,858	15,924,400
Unregulated Services	2,727,918	2,648,584	3,827,811
TOTAL	19,547,903	19,735,442	19,752,211
Net Patient Revenue(NPR):			
Regulated Services	13,674,977	13,780,080	12,626,976
Unregulated Services	1,467,279	1,524,248	2,075,897
TOTAL	15,142,256	15,304,328	14,702,873
Other Operating Revenue:			
Regulated Services	13,924	35,745	17,286
Unregulated Services	10,999	12,464	0
TOTAL	24,923	48,209	17,286
Net Operating Revenue(NOR)			
Regulated Services	13,688,901	13,815,825	12,644,262
Unregulated Services	1,478,278	1,536,712	2,075,897
Total	15,167,179	15,352,537	14,720,159
Total Operating Expenses:			
Regulated Services	9,891,535	11,456,983	11,583,263
Total	13,651,014	13,618,274	13,266,653
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	1,801	2,319	2,125
Total	1,992	2,598	2,463
NPR per EIPA :			
Regulated Services	7,592.14	5,941.69	5,941.73
Total	7,602.77	5,890.44	5,968.31
NOR per EIPA :			
Regulated Services	7,599.87	5,957.10	5,949.87
Total	7,615.29	5,908.99	5,975.33
Operating Expenses per EIPA :			
Regulated Services	5,491.63	4,940.02	5,450.60
Total	6,854.04	5,241.50	5,385.31
Net Operating Profit(Loss):			
Regulated Services	3,797,366	2,358,842	1,060,999
Unregulated Services	-2,281,201	-624,579	392,507
Total	1,516,165	1,734,263	1,453,506
Total Non-Operating Profit(Loss):	202,998	221,318	120,960
Non-Operating Revenue	202,998	221,318	120,960
Non-Operating Expenses	0	0	0
Total Excess Profit	1,719,163	1,955,581	1,574,466
% Change in NPR per EIPA - Regulated	27.78	-0.00	8.87
% Change in NOR per EIPA - Regulated	27.58	0.12	9.28
% Change in Oper. Expense per EIPA- Regulated	11.17	-9.37	3.25
% Change in Net Operating Profit- Regulated	60.98	122.32	213.35
% Net Operating Profit of Regulated NOR	27.74	17.07	8.39
% Change in Net Operating Profit- Total	-12.58	19.32	196.51
% Net Total Operating Profit of Total NOR	10.00	11.30	9.87
% Change in Total Excess Profit	-12.09	24.21	205.71
% Total Excess Profit of Total Revenue	11.19	12.56	10.61

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Fort Washington Medical Center

FISCAL YEAR ENDING	December 2009 -----	December 2008 -----	December 2007 -----
Gross Patient Revenue:			
Regulated Services	47,242,143	47,584,845	43,852,242
Unregulated Services	758,007	714,633	637,959
TOTAL	48,000,150	48,299,478	44,490,201
Net Patient Revenue(NPR):			
Regulated Services	38,272,727	38,076,625	35,940,940
Unregulated Services	758,007	714,633	637,959
TOTAL	39,030,734	38,791,258	36,578,899
Other Operating Revenue:			
Regulated Services	415,065	346,816	427,093
Unregulated Services	36,615	39,580	47,747
TOTAL	451,680	386,396	474,840
Net Operating Revenue(NOR)			
Regulated Services	38,687,792	38,423,441	36,368,033
Unregulated Services	794,622	754,213	685,706
Total	39,482,414	39,177,654	37,053,739
Total Operating Expenses:			
Regulated Services	36,925,172	36,903,906	35,214,801
Total	38,123,376	37,811,109	36,315,671
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	6,295	5,928	5,566
Total	6,243	5,883	5,525
NPR per EIPA :			
Regulated Services	6,079.89	6,423.30	6,457.43
Total	6,251.60	6,593.90	6,620.09
NOR per EIPA :			
Regulated Services	6,145.82	6,481.80	6,534.16
Total	6,323.95	6,659.58	6,706.02
Operating Expenses per EIPA :			
Regulated Services	5,865.82	6,225.47	6,326.96
Total	6,106.27	6,427.29	6,572.45
Net Operating Profit(Loss):			
Regulated Services	1,762,620	1,519,535	1,153,232
Unregulated Services	-403,582	-152,990	-415,164
Total	1,359,038	1,366,545	738,068
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	5,716	10,355	16,219
Non-Operating Expenses	0	0	0
Total Excess Profit	1,364,754	1,376,900	754,287
% Change in NPR per EIPA - Regulated	-5.35	-0.53	12.36
% Change in NOR per EIPA - Regulated	-5.18	-0.80	11.67
% Change in Oper. Expense per EIPA- Regulated	-5.78	-1.60	3.28
% Change in Net Operating Profit- Regulated	16.00	31.76	177.14
% Net Operating Profit of Regulated NOR	4.56	3.95	3.17
% Change in Net Operating Profit- Total	-0.55	85.15	148.87
% Net Total Operating Profit of Total NOR	3.44	3.49	1.99
% Change in Total Excess Profit	-0.88	82.54	150.53
% Total Excess Profit of Total Revenue	3.46	3.51	2.03

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Franklin Square Hospital Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	414,987,900	401,669,900	367,165,100
Unregulated Services	97,498,639	89,134,777	80,047,032
TOTAL	512,486,539	490,804,677	447,212,132
Net Patient Revenue(NPR):			
Regulated Services	355,664,346	338,447,374	310,773,359
Unregulated Services	37,669,552	35,782,018	32,476,379
TOTAL	393,333,898	374,229,392	343,249,738
Other Operating Revenue:			
Regulated Services	2,231,048	2,530,466	2,908,400
Unregulated Services	5,061,555	4,448,034	4,521,245
TOTAL	7,292,603	6,978,500	7,429,645
Net Operating Revenue(NOR)			
Regulated Services	357,895,394	340,977,840	313,681,759
Unregulated Services	42,731,107	40,230,052	36,997,624
Total	400,626,501	381,207,892	350,679,383
Total Operating Expenses:			
Regulated Services	322,365,732	306,094,837	291,018,915
Total	382,897,946	360,690,863	339,922,106
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	39,391	38,639	36,098
Total	43,667	42,577	39,835
NPR per EIPA :			
Regulated Services	9,029.09	8,759.27	8,609.16
Total	9,007.55	8,789.47	8,616.82
NOR per EIPA :			
Regulated Services	9,085.73	8,824.76	8,689.73
Total	9,174.56	8,953.37	8,803.33
Operating Expenses per EIPA :			
Regulated Services	8,183.76	7,921.97	8,061.92
Total	8,768.56	8,471.49	8,533.29
Net Operating Profit(Loss):			
Regulated Services	35,529,662	34,883,003	22,662,844
Unregulated Services	-17,801,107	-14,365,974	-11,905,567
Total	17,728,555	20,517,029	10,757,277
Total Non-Operating Profit(Loss):	240,780	306,813	181,760
Non-Operating Revenue	240,780	306,813	181,760
Non-Operating Expenses	0	0	0
Total Excess Profit	17,969,335	20,823,842	10,939,037
% Change in NPR per EIPA - Regulated	3.08	1.74	5.64
% Change in NOR per EIPA - Regulated	2.96	1.55	5.47
% Change in Oper. Expense per EIPA- Regulated	3.30	-1.74	3.02
% Change in Net Operating Profit- Regulated	1.85	53.92	56.48
% Net Operating Profit of Regulated NOR	9.93	10.23	7.22
% Change in Net Operating Profit- Total	-13.59	90.73	31.54
% Net Total Operating Profit of Total NOR	4.43	5.38	3.07
% Change in Total Excess Profit	-13.71	90.36	27.01
% Total Excess Profit of Total Revenue	4.48	5.46	3.12

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Frederick Memorial Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	266,844,200	244,818,200	221,930,300
Unregulated Services	87,196,916	83,016,155	80,696,761
TOTAL	354,041,116	327,834,355	302,627,061
Net Patient Revenue(NPR):			
Regulated Services	228,268,395	212,190,095	192,131,819
Unregulated Services	47,844,372	46,238,724	42,751,300
TOTAL	276,112,767	258,428,819	234,883,119
Other Operating Revenue:			
Regulated Services	5,702,489	3,379,206	3,135,394
Unregulated Services	6,073,112	9,035,813	7,274,662
TOTAL	11,775,601	12,415,019	10,410,056
Net Operating Revenue(NOR)			
Regulated Services	233,970,884	215,569,301	195,267,213
Unregulated Services	53,917,484	55,274,537	50,025,962
Total	287,888,368	270,843,838	245,293,175
Total Operating Expenses:			
Regulated Services	221,636,962	205,133,756	186,842,579
Total	285,945,276	269,138,481	240,020,431
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	27,652	26,773	25,543
Total	37,979	35,851	34,660
NPR per EIPA :			
Regulated Services	8,255.02	7,925.58	7,521.89
Total	7,270.11	7,208.35	6,776.77
NOR per EIPA :			
Regulated Services	8,461.24	8,051.79	7,644.64
Total	7,580.17	7,554.64	7,077.12
Operating Expenses per EIPA :			
Regulated Services	8,015.20	7,662.01	7,314.82
Total	7,529.00	7,507.07	6,924.99
Net Operating Profit(Loss):			
Regulated Services	12,333,922	10,435,545	8,424,634
Unregulated Services	-10,390,830	-8,730,188	-3,151,890
Total	1,943,092	1,705,357	5,272,744
Total Non-Operating Profit(Loss):	-14,517,624	-9,360,789	8,997,421
Non-Operating Revenue	-14,517,624	4,909,503	8,997,421
Non-Operating Expenses	0	14,270,292	0
Total Excess Profit	-12,574,532	-7,655,432	14,270,165
% Change in NPR per EIPA - Regulated	4.16	5.37	6.12
% Change in NOR per EIPA - Regulated	5.09	5.33	7.49
% Change in Oper. Expense per EIPA- Regulated	4.61	4.75	0.72
% Change in Net Operating Profit- Regulated	18.19	23.87	330.81
% Net Operating Profit of Regulated NOR	5.27	4.84	4.31
% Change in Net Operating Profit- Total	13.94	-67.66	945.93
% Net Total Operating Profit of Total NOR	0.67	0.63	2.15
% Change in Total Excess Profit	-64.26	-153.65	2,116.72
% Total Excess Profit of Total Revenue	-4.60	-2.78	5.61

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Garrett County Memorial Hospital

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	36,812,400	32,853,800	32,568,200
Unregulated Services	8,470,855	7,849,988	7,762,930
TOTAL	45,283,255	40,703,788	40,331,130
Net Patient Revenue(NPR):			
Regulated Services	31,258,085	27,513,600	27,456,999
Unregulated Services	5,788,328	5,242,841	5,161,118
TOTAL	37,046,414	32,756,441	32,618,117
Other Operating Revenue:			
Regulated Services	110,915	483,329	477,211
Unregulated Services	381,695	229,564	12,455
TOTAL	492,610	712,893	489,666
Net Operating Revenue(NOR)			
Regulated Services	31,369,000	27,996,929	27,934,210
Unregulated Services	6,170,023	5,472,405	5,173,573
Total	37,539,024	33,469,334	33,107,783
Total Operating Expenses:			
Regulated Services	29,787,595	28,380,547	27,036,299
Total	35,627,406	33,992,569	32,611,677
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	4,936	4,830	4,746
Total	6,009	5,956	5,721
NPR per EIPA :			
Regulated Services	6,332.68	5,696.44	5,785.45
Total	6,165.51	5,499.85	5,701.38
NOR per EIPA :			
Regulated Services	6,355.15	5,796.51	5,886.01
Total	6,247.50	5,619.55	5,786.97
Operating Expenses per EIPA :			
Regulated Services	6,034.77	5,875.94	5,696.81
Total	5,929.35	5,707.40	5,700.25
Net Operating Profit(Loss):			
Regulated Services	1,581,406	-383,618	897,911
Unregulated Services	330,212	-139,617	-401,805
Total	1,911,618	-523,235	496,106
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	140,662	1,096,760	394,549
Non-Operating Expenses	409,501	0	0
Total Excess Profit	1,642,779	573,525	890,655
% Change in NPR per EIPA - Regulated			
	11.17	-1.54	-0.76
% Change in NOR per EIPA - Regulated			
	9.64	-1.52	-3.08
% Change in Oper. Expense per EIPA- Regulated			
	2.70	3.14	-0.61
% Change in Net Operating Profit- Regulated			
	512.23	-142.72	-40.93
% Net Operating Profit of Regulated NOR			
	5.04	-1.37	3.21
% Change in Net Operating Profit- Total			
	465.35	-205.47	-67.31
% Net Total Operating Profit of Total NOR			
	5.09	-1.56	1.50
% Change in Total Excess Profit			
	186.44	-35.61	-41.31
% Total Excess Profit of Total Revenue			
	4.36	1.66	2.66

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Good Samaritan Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	286,296,100	265,411,400	253,957,800
Unregulated Services	116,863,438	93,585,701	86,303,812
TOTAL	403,159,538	358,997,101	340,261,612
Net Patient Revenue(NPR):			
Regulated Services	245,593,552	223,688,794	212,993,262
Unregulated Services	48,493,772	40,182,648	41,889,973
TOTAL	294,087,324	263,871,442	254,883,235
Other Operating Revenue:			
Regulated Services	2,253,136	2,089,921	2,514,600
Unregulated Services	1,347,200	1,155,664	797,361
TOTAL	3,600,336	3,245,585	3,311,961
Net Operating Revenue(NOR)			
Regulated Services	247,846,688	225,778,715	215,507,862
Unregulated Services	49,840,972	41,338,312	42,687,334
Total	297,687,660	267,117,026	258,195,196
Total Operating Expenses:			
Regulated Services	227,853,252	212,539,046	205,816,864
Total	289,772,684	262,597,999	251,004,192
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	23,949	22,601	21,876
Total	28,831	26,692	26,535
NPR per EIPA :			
Regulated Services	10,254.89	9,897.19	9,736.36
Total	10,200.56	9,885.78	9,605.40
NOR per EIPA :			
Regulated Services	10,348.97	9,989.66	9,851.30
Total	10,325.44	10,007.38	9,730.21
Operating Expenses per EIPA :			
Regulated Services	9,514.13	9,403.86	9,408.31
Total	10,050.91	9,838.08	9,459.21
Net Operating Profit(Loss):			
Regulated Services	19,993,436	13,239,669	9,690,998
Unregulated Services	-12,078,459	-8,720,642	-2,499,994
Total	7,914,976	4,519,027	7,191,004
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,381,738	3,243,755	2,727,322
Non-Operating Expenses	0	0	0
Total Excess Profit	9,296,714	7,762,782	9,918,326
% Change in NPR per EIPA - Regulated	3.61	1.65	10.16
% Change in NOR per EIPA - Regulated	3.60	1.40	9.68
% Change in Oper. Expense per EIPA- Regulated	1.17	-0.05	8.27
% Change in Net Operating Profit- Regulated	51.01	36.62	49.48
% Net Operating Profit of Regulated NOR	8.07	5.86	4.50
% Change in Net Operating Profit- Total	75.15	-37.16	49.37
% Net Total Operating Profit of Total NOR	2.66	1.69	2.79
% Change in Total Excess Profit	19.76	-21.73	30.88
% Total Excess Profit of Total Revenue	3.11	2.87	3.80

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Greater Baltimore Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	393,162,100	359,118,800	345,318,800
Unregulated Services	28,222,151	66,194,712	78,585,200
TOTAL	421,384,251	425,313,512	423,904,000
Net Patient Revenue(NPR):			
Regulated Services	351,006,608	327,568,381	315,742,533
Unregulated Services	16,603,476	34,737,351	39,882,767
TOTAL	367,610,084	362,305,732	355,625,300
Other Operating Revenue:			
Regulated Services	4,545,895	4,201,397	4,536,000
Unregulated Services	7,615,507	9,217,406	11,936,800
TOTAL	12,161,402	13,418,803	16,472,800
Net Operating Revenue(NOR)			
Regulated Services	355,552,503	331,769,778	320,278,533
Unregulated Services	24,218,983	43,954,757	51,819,567
Total	379,771,486	375,724,535	372,098,100
Total Operating Expenses:			
Regulated Services	325,771,985	316,188,935	292,355,886
Total	361,315,422	373,066,497	359,957,500
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	36,623	37,150	38,288
Total	36,990	43,623	41,001
NPR per EIPA :			
Regulated Services	9,584.44	8,817.53	8,246.49
Total	9,938.11	8,305.38	8,673.64
NOR per EIPA :			
Regulated Services	9,708.57	8,930.62	8,364.96
Total	10,266.88	8,612.98	9,075.40
Operating Expenses per EIPA :			
Regulated Services	8,895.40	8,511.22	7,635.68
Total	9,767.93	8,552.05	8,779.30
Net Operating Profit(Loss):			
Regulated Services	29,780,518	15,580,843	27,922,647
Unregulated Services	-11,324,454	-12,922,805	-15,782,047
Total	18,456,064	2,658,038	12,140,600
Total Non-Operating Profit(Loss):	-1,831,394	1,691,333	4,912,900
Non-Operating Revenue	947,777	3,814,376	4,912,900
Non-Operating Expenses	2,779,171	2,123,043	0
Total Excess Profit	16,624,670	4,349,371	17,053,500
% Change in NPR per EIPA - Regulated	8.70	6.92	5.36
% Change in NOR per EIPA - Regulated	8.71	6.76	6.21
% Change in Oper. Expense per EIPA- Regulated	4.51	11.47	3.33
% Change in Net Operating Profit- Regulated	91.14	-44.20	49.43
% Net Operating Profit of Regulated NOR	8.38	4.70	8.72
% Change in Net Operating Profit- Total	594.35	-78.11	207.76
% Net Total Operating Profit of Total NOR	4.86	0.71	3.26
% Change in Total Excess Profit	282.23	-74.50	58.70
% Total Excess Profit of Total Revenue	4.37	1.15	4.52

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Harbor Hospital

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	200,915,200	194,020,200	180,144,800
Unregulated Services	36,590,738	37,178,568	35,858,622
TOTAL	237,505,938	231,198,768	216,003,422
Net Patient Revenue(NPR):			
Regulated Services	169,691,122	161,116,541	147,519,196
Unregulated Services	14,811,677	16,331,426	15,750,280
TOTAL	184,502,799	177,447,967	163,269,476
Other Operating Revenue:			
Regulated Services	2,672,013	1,646,159	1,534,637
Unregulated Services	7,116,396	7,255,612	6,689,445
TOTAL	9,788,409	8,901,771	8,224,082
Net Operating Revenue(NOR)			
Regulated Services	172,363,135	162,762,700	149,053,833
Unregulated Services	21,928,073	23,587,038	22,439,725
Total	194,291,208	186,349,738	171,493,558
Total Operating Expenses:			
Regulated Services	165,072,123	156,929,854	146,508,393
Total	188,476,023	179,690,880	167,149,599
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	18,443	18,190	17,288
Total	19,382	19,419	18,462
NPR per EIPA :			
Regulated Services	9,200.93	8,857.48	8,532.89
Total	9,519.50	9,137.91	8,843.71
NOR per EIPA :			
Regulated Services	9,345.81	8,947.98	8,621.65
Total	10,024.53	9,596.32	9,289.18
Operating Expenses per EIPA :			
Regulated Services	8,950.48	8,627.32	8,474.42
Total	9,724.50	9,253.41	9,053.88
Net Operating Profit(Loss):			
Regulated Services	7,291,012	5,832,846	2,545,440
Unregulated Services	-1,475,827	826,012	1,798,519
Total	5,815,185	6,658,858	4,343,959
Total Non-Operating Profit(Loss):	174,456	370,628	651,861
Non-Operating Revenue	174,456	370,628	651,861
Non-Operating Expenses	0	0	0
Total Excess Profit	5,989,641	7,029,486	4,995,820
% Change in NPR per EIPA - Regulated	3.88	3.80	6.34
% Change in NOR per EIPA - Regulated	4.45	3.78	6.10
% Change in Oper. Expense per EIPA- Regulated	3.75	1.80	5.43
% Change in Net Operating Profit- Regulated	25.00	129.15	72.51
% Net Operating Profit of Regulated NOR	4.23	3.58	1.71
% Change in Net Operating Profit- Total	-12.67	53.29	146.83
% Net Total Operating Profit of Total NOR	2.99	3.57	2.53
% Change in Total Excess Profit	-14.79	40.71	68.17
% Total Excess Profit of Total Revenue	3.08	3.76	2.90

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Harford Memorial Hospital

FISCAL YEAR ENDING	December 2009	December 2008	December 2007
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Gross Patient Revenue:			
Regulated Services	96,235,600	98,289,100	80,215,100
Unregulated Services	177,100	1,349,700	2,666,900
TOTAL	96,412,700	99,638,800	82,882,000
Net Patient Revenue(NPR):			
Regulated Services	78,372,221	79,516,660	65,834,200
Unregulated Services	120,700	815,900	1,971,900
TOTAL	78,492,921	80,332,560	67,806,100
Other Operating Revenue:			
Regulated Services	710,400	130,400	57,000
Unregulated Services	470,700	550,600	523,800
TOTAL	1,181,100	681,000	580,800
Net Operating Revenue(NOR)			
Regulated Services	79,082,621	79,647,060	65,891,200
Unregulated Services	591,400	1,366,500	2,495,700
Total	79,674,021	81,013,560	68,386,900
Total Operating Expenses:			
Regulated Services	75,803,751	75,087,925	63,606,094
Total	77,244,100	77,095,805	67,578,400
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	11,686	12,664	10,921
Total	11,707	12,833	11,252
NPR per EIPA :			
Regulated Services	6,706.72	6,279.14	6,028.19
Total	6,704.71	6,260.04	6,026.16
NOR per EIPA :			
Regulated Services	6,767.51	6,289.44	6,033.41
Total	6,805.60	6,313.11	6,077.78
Operating Expenses per EIPA :			
Regulated Services	6,486.92	5,929.42	5,824.17
Total	6,598.04	6,007.82	6,005.92
Net Operating Profit(Loss):			
Regulated Services	3,278,870	4,559,135	2,285,106
Unregulated Services	-848,949	-641,380	-1,476,606
Total	2,429,921	3,917,755	808,500
Total Non-Operating Profit(Loss):	7,260,800	-18,761,000	3,967,000
Non-Operating Revenue	9,885,500	0	4,703,000
Non-Operating Expenses	2,624,700	18,761,000	736,000
Total Excess Profit	9,690,721	-14,843,245	4,775,500
% Change in NPR per EIPA - Regulated	6.81	4.16	-4.68
% Change in NOR per EIPA - Regulated	7.60	4.24	-4.62
% Change in Oper. Expense per EIPA- Regulated	9.40	1.81	-6.80
% Change in Net Operating Profit- Regulated	-28.08	99.52	228.53
% Net Operating Profit of Regulated NOR	4.15	5.72	3.47
% Change in Net Operating Profit- Total	-37.98	384.57	168.00
% Net Total Operating Profit of Total NOR	3.05	4.84	1.18
% Change in Total Excess Profit	165.29	-410.82	95.16
% Total Excess Profit of Total Revenue	10.82	-18.32	6.53

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Holy Cross Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	394,466,500	383,143,400	351,996,600
Unregulated Services	33,989,800	29,409,187	28,692,621
TOTAL	428,456,300	412,552,587	380,689,221
Net Patient Revenue(NPR):			
Regulated Services	332,740,684	326,703,070	291,978,698
Unregulated Services	21,529,500	17,763,050	27,324,504
TOTAL	354,270,184	344,466,120	319,303,202
Other Operating Revenue:			
Regulated Services	2,420,600	1,845,644	2,925,085
Unregulated Services	11,330,300	6,712,735	5,519,876
TOTAL	13,750,900	8,558,379	8,444,961
Net Operating Revenue(NOR)			
Regulated Services	335,161,284	328,548,714	294,903,783
Unregulated Services	32,859,800	24,475,785	32,844,380
Total	368,021,084	353,024,499	327,748,164
Total Operating Expenses:			
Regulated Services	309,458,016	293,545,246	280,877,183
Total	349,019,900	329,472,259	311,645,831
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	38,000	35,896	36,092
Total	41,216	38,234	39,034
NPR per EIPA :			
Regulated Services	8,756.24	9,101.29	8,089.81
Total	8,595.40	9,009.41	8,180.10
NOR per EIPA :			
Regulated Services	8,819.94	9,152.71	8,170.86
Total	8,929.03	9,233.25	8,396.45
Operating Expenses per EIPA :			
Regulated Services	8,143.55	8,177.58	7,782.23
Total	8,468.02	8,617.25	7,983.93
Net Operating Profit(Loss):			
Regulated Services	25,703,268	35,003,468	14,026,600
Unregulated Services	-6,702,084	-11,451,228	2,075,732
Total	19,001,184	23,552,240	16,102,333
Total Non-Operating Profit(Loss):	-18,839,400	-2,961,225	10,864,291
Non-Operating Revenue	-18,839,400	-4,846,225	10,864,291
Non-Operating Expenses	0	-1,885,000	0
Total Excess Profit	161,784	20,591,015	26,966,624
% Change in NPR per EIPA - Regulated	-3.79	12.50	2.06
% Change in NOR per EIPA - Regulated	-3.64	12.02	2.04
% Change in Oper. Expense per EIPA- Regulated	-0.42	5.08	6.71
% Change in Net Operating Profit- Regulated	-26.57	149.55	-45.40
% Net Operating Profit of Regulated NOR	7.67	10.65	4.76
% Change in Net Operating Profit- Total	-19.32	46.27	-15.35
% Net Total Operating Profit of Total NOR	5.16	6.67	4.91
% Change in Total Excess Profit	-99.21	-23.64	2.95
% Total Excess Profit of Total Revenue	0.05	5.91	7.96

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

Howard County General Hospital

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	230,685,500	212,299,000	190,324,800
Unregulated Services	19,115,758	16,523,387	14,287,854
TOTAL	249,801,258	228,822,387	204,612,654
Net Patient Revenue(NPR):			
Regulated Services	202,845,676	188,616,540	168,689,270
Unregulated Services	10,365,793	8,787,404	8,224,967
TOTAL	213,211,469	197,403,944	176,914,237
Other Operating Revenue:			
Regulated Services	52,447	68,031	111,415
Unregulated Services	2,413,954	2,604,935	2,281,096
TOTAL	2,466,401	2,672,966	2,392,511
Net Operating Revenue(NOR)			
Regulated Services	202,898,123	188,684,571	168,800,685
Unregulated Services	12,779,747	11,392,339	10,506,063
Total	215,677,870	200,076,910	179,306,748
Total Operating Expenses:			
Regulated Services	187,698,057	179,292,066	162,559,946
Total	207,211,827	194,956,065	174,794,643
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	22,589	20,922	21,339
Total	21,689	20,198	21,573
NPR per EIPA :			
Regulated Services	8,979.76	9,015.10	7,905.34
Total	9,830.21	9,773.47	8,200.69
NOR per EIPA :			
Regulated Services	8,982.08	9,018.36	7,910.56
Total	9,943.92	9,905.81	8,311.60
Operating Expenses per EIPA :			
Regulated Services	8,309.19	8,569.43	7,618.10
Total	9,553.59	9,652.27	8,102.44
Net Operating Profit(Loss):			
Regulated Services	15,200,066	9,392,505	6,240,739
Unregulated Services	-6,734,024	-4,271,660	-1,728,634
Total	8,466,043	5,120,845	4,512,105
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,467,414	-1,620,842	2,307,062
Non-Operating Expenses	4,932,000	0	0
Total Excess Profit	5,001,457	3,500,003	6,819,167
% Change in NPR per EIPA - Regulated			
	-0.39	14.04	14.64
% Change in NOR per EIPA - Regulated			
	-0.40	14.00	14.65
% Change in Oper. Expense per EIPA- Regulated			
	-3.04	12.49	12.91
% Change in Net Operating Profit- Regulated			
	61.83	50.50	85.59
% Net Operating Profit of Regulated NOR			
	7.49	4.98	3.70
% Change in Net Operating Profit- Total			
	65.33	13.49	20.12
% Net Total Operating Profit of Total NOR			
	3.93	2.56	2.52
% Change in Total Excess Profit			
	42.90	-48.67	47.43
% Total Excess Profit of Total Revenue			
	2.30	1.76	3.75

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

James Lawrence Kernan Hospital

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	105,778,700	97,293,600	89,323,102
Unregulated Services	3,679,257	3,550,930	4,513,000
TOTAL	109,457,957	100,844,530	93,836,102
Net Patient Revenue(NPR):			
Regulated Services	93,226,825	86,853,388	80,074,718
Unregulated Services	1,681,665	1,656,142	2,250,838
TOTAL	94,908,490	88,509,530	82,325,556
Other Operating Revenue:			
Regulated Services	886,935	4,652,504	3,199,833
Unregulated Services	1,610,065	447,496	1,529,167
TOTAL	2,497,000	5,100,000	4,729,000
Net Operating Revenue(NOR)			
Regulated Services	94,113,760	91,505,893	83,274,551
Unregulated Services	3,291,730	2,103,638	3,780,005
Total	97,405,490	93,609,530	87,054,556
Total Operating Expenses:			
Regulated Services	91,630,182	88,121,888	82,212,200
Total	95,194,646	91,803,000	86,244,379
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	5,087	5,063	4,720
Total	5,264	5,248	4,959
NPR per EIPA :			
Regulated Services	18,326.10	17,155.16	16,963.28
Total	18,029.56	16,866.69	16,601.33
NOR per EIPA :			
Regulated Services	18,500.45	18,074.11	17,641.14
Total	18,503.91	17,838.56	17,554.95
Operating Expenses per EIPA :			
Regulated Services	18,012.24	17,405.71	17,416.09
Total	18,083.92	17,494.30	17,391.58
Net Operating Profit(Loss):			
Regulated Services	2,483,578	3,384,005	1,062,351
Unregulated Services	-272,734	-1,577,475	-252,174
Total	2,210,844	1,806,530	810,177
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	-1,423,399	745,000	878,000
Non-Operating Expenses	397,501	745,000	984,000
	1,820,900	0	106,000
Total Excess Profit	787,445	2,551,530	1,688,177
% Change in NPR per EIPA - Regulated			
	6.83	1.13	15.77
% Change in NOR per EIPA - Regulated			
	2.36	2.45	14.92
% Change in Oper. Expense per EIPA- Regulated			
	3.48	-0.06	15.75
% Change in Net Operating Profit- Regulated			
	-26.61	218.54	-26.21
% Net Operating Profit of Regulated NOR			
	2.64	3.70	1.28
% Change in Net Operating Profit- Total			
	22.38	122.98	-16.03
% Net Total Operating Profit of Total NOR			
	2.27	1.93	0.93
% Change in Total Excess Profit			
	-69.14	51.14	23.51
% Total Excess Profit of Total Revenue			
	0.81	2.70	1.92

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Johns Hopkins Bayview Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	513,495,600	492,861,500	443,763,600
Unregulated Services	9,715,700	14,694,800	15,561,200
TOTAL	523,211,300	507,556,300	459,324,800
Net Patient Revenue(NPR):			
Regulated Services	431,873,500	414,509,200	374,135,300
Unregulated Services	9,028,700	13,920,800	14,671,200
TOTAL	440,902,200	428,430,000	388,806,500
Other Operating Revenue:			
Regulated Services	9,289,900	8,409,300	9,171,000
Unregulated Services	41,450,300	43,878,100	44,587,900
TOTAL	50,740,200	52,287,400	53,758,900
Net Operating Revenue(NOR)			
Regulated Services	441,163,400	422,918,500	383,306,300
Unregulated Services	50,479,000	57,798,900	59,259,100
Total	491,642,400	480,717,400	442,565,400
Total Operating Expenses:			
Regulated Services	427,307,515	413,255,263	375,808,189
Total	490,071,966	476,097,000	437,371,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	33,167	32,999	33,468
Total	33,623	33,631	34,238
NPR per EIPA :			
Regulated Services	13,021.25	12,561.12	11,178.80
Total	13,112.95	12,739.09	11,355.89
NOR per EIPA :			
Regulated Services	13,301.35	12,815.95	11,452.83
Total	14,622.03	14,293.82	12,926.02
Operating Expenses per EIPA :			
Regulated Services	12,883.58	12,523.12	11,228.79
Total	14,575.32	14,156.44	12,774.31
Net Operating Profit(Loss):			
Regulated Services	13,855,885	9,663,237	7,498,111
Unregulated Services	-12,285,451	-5,042,837	-2,303,711
Total	1,570,434	4,620,400	5,194,400
Total Non-Operating Profit(Loss):	1,761,200	-3,196,000	2,041,000
Non-Operating Revenue	1,761,200	-3,196,000	2,041,000
Non-Operating Expenses	0	0	0
Total Excess Profit	3,331,634	1,424,400	7,235,400
% Change in NPR per EIPA - Regulated	3.66	12.37	8.33
% Change in NOR per EIPA - Regulated	3.79	11.90	7.20
% Change in Oper. Expense per EIPA- Regulated	2.88	11.53	6.02
% Change in Net Operating Profit- Regulated	43.39	28.88	152.62
% Net Operating Profit of Regulated NOR	3.14	2.28	1.96
% Change in Net Operating Profit- Total	-66.01	-11.05	325.63
% Net Total Operating Profit of Total NOR	0.32	0.96	1.17
% Change in Total Excess Profit	133.90	-80.31	-31.83
% Total Excess Profit of Total Revenue	0.68	0.30	1.63

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Johns Hopkins Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	1,620,280,400	1,532,521,600	1,422,728,400
Unregulated Services	5,439,920	31,835,391	15,823,689
TOTAL	1,625,720,320	1,564,356,991	1,438,552,089
Net Patient Revenue(NPR):			
Regulated Services	1,412,843,376	1,324,205,233	1,230,640,715
Unregulated Services	5,242,157	30,988,065	11,416,038
TOTAL	1,418,085,533	1,355,193,298	1,242,056,753
Other Operating Revenue:			
Regulated Services	12,601,700	12,433,825	11,275,060
Unregulated Services	102,060,174	67,611,814	75,246,027
TOTAL	114,661,874	80,045,639	86,521,087
Net Operating Revenue(NOR)			
Regulated Services	1,425,445,076	1,336,639,058	1,241,915,775
Unregulated Services	107,302,331	98,599,879	86,662,065
Total	1,532,747,407	1,435,238,937	1,328,577,840
Total Operating Expenses:			
Regulated Services	1,359,674,406	1,298,299,098	1,213,792,687
Total	1,470,612,081	1,392,943,327	1,293,410,728
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	69,843	67,513	66,077
Total	70,526	69,409	67,090
NPR per EIPA :			
Regulated Services	20,228.93	19,614.16	18,624.24
Total	20,107.21	19,524.77	18,513.29
NOR per EIPA :			
Regulated Services	20,409.36	19,798.33	18,794.88
Total	21,733.02	20,678.01	19,802.91
Operating Expenses per EIPA :			
Regulated Services	19,467.66	19,230.44	18,369.27
Total	20,852.00	20,068.65	19,278.73
Net Operating Profit(Loss):			
Regulated Services	65,770,670	38,339,960	28,123,088
Unregulated Services	-3,635,344	3,955,650	7,044,024
Total	62,135,326	42,295,610	35,167,112
Total Non-Operating Profit(Loss):	21,156,737	27,352,276	25,451,583
Non-Operating Revenue	21,156,737	27,352,276	25,451,583
Non-Operating Expenses	0	0	0
Total Excess Profit	83,292,063	69,647,886	60,618,695
% Change in NPR per EIPA - Regulated	3.13	5.32	6.33
% Change in NOR per EIPA - Regulated	3.09	5.34	6.29
% Change in Oper. Expense per EIPA- Regulated	1.23	4.69	6.77
% Change in Net Operating Profit- Regulated	71.55	36.33	-10.15
% Net Operating Profit of Regulated NOR	4.61	2.87	2.26
% Change in Net Operating Profit- Total	46.91	20.27	15.76
% Net Total Operating Profit of Total NOR	4.05	2.95	2.65
% Change in Total Excess Profit	19.59	14.90	13.84
% Total Excess Profit of Total Revenue	5.36	4.76	4.48

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

Laurel Regional Medical Center

FISCAL YEAR ENDING	June 2009 -----	June 2008 -----	June 2007 -----
Gross Patient Revenue:			
Regulated Services	91,640,000	93,150,500	85,721,400
Unregulated Services	4,540,332	4,305,862	4,098,580
TOTAL	96,180,332	97,456,362	89,819,980
Net Patient Revenue(NPR):			
Regulated Services	76,473,729	77,436,743	71,133,998
Unregulated Services	1,295,259	1,227,262	1,370,993
TOTAL	77,768,988	78,664,005	72,504,991
Other Operating Revenue:			
Regulated Services	751,054	489,471	864,724
Unregulated Services	0	0	25,600
TOTAL	751,054	489,471	890,324
Net Operating Revenue(NOR)			
Regulated Services	77,224,783	77,926,214	71,998,722
Unregulated Services	1,295,259	1,227,262	1,396,593
Total	78,520,042	79,153,476	73,395,315
Total Operating Expenses:			
Regulated Services	83,281,501	79,839,494	75,326,230
Total	90,274,361	86,122,739	80,242,769
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	10,045	9,766	9,478
Total	9,825	10,218	9,932
NPR per EIPA :			
Regulated Services	7,612.76	7,929.15	7,504.89
Total	7,915.10	7,698.94	7,300.48
NOR per EIPA :			
Regulated Services	7,687.53	7,979.27	7,596.12
Total	7,991.54	7,746.84	7,390.13
Operating Expenses per EIPA :			
Regulated Services	8,290.46	8,175.18	7,947.19
Total	9,187.86	8,428.93	8,079.59
Net Operating Profit(Loss):			
Regulated Services	-6,056,718	-1,913,281	-3,327,509
Unregulated Services	-5,697,601	-5,055,983	-3,519,946
Total	-11,754,319	-6,969,263	-6,847,455
Total Non-Operating Profit(Loss):	63,350	267,261	985,719
Non-Operating Revenue	63,350	267,261	985,719
Non-Operating Expenses	0	0	0
Total Excess Profit	-11,690,969	-6,702,002	-5,861,736
% Change in NPR per EIPA - Regulated	-3.99	5.65	11.61
% Change in NOR per EIPA - Regulated	-3.66	5.04	12.97
% Change in Oper. Expense per EIPA- Regulated	1.41	2.87	7.27
% Change in Net Operating Profit- Regulated	-216.56	42.50	50.27
% Net Operating Profit of Regulated NOR	-7.84	-2.46	-4.62
% Change in Net Operating Profit- Total	-68.66	-1.78	20.42
% Net Total Operating Profit of Total NOR	-14.97	-8.80	-9.33
% Change in Total Excess Profit	-74.44	-14.33	19.82
% Total Excess Profit of Total Revenue	-14.88	-8.44	-7.88

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

Maryland General Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	181,868,000	180,632,100	170,567,000
Unregulated Services	8,435,023	981,764	1,137,872
TOTAL	190,303,023	181,613,864	171,704,872
Net Patient Revenue(NPR):			
Regulated Services	156,919,437	151,988,277	142,357,835
Unregulated Services	8,315,856	682,533	1,063,788
TOTAL	165,235,293	152,670,810	143,421,622
Other Operating Revenue:			
Regulated Services	1,174,660	330,836	-9,732,319
Unregulated Services	1,054,110	1,168,354	11,144,604
TOTAL	2,228,770	1,499,190	1,412,285
Net Operating Revenue(NOR)			
Regulated Services	158,094,097	152,319,113	132,625,516
Unregulated Services	9,369,966	1,850,887	12,208,392
Total	167,464,063	154,170,000	144,833,907
Total Operating Expenses:			
Regulated Services	142,361,768	135,532,597	123,604,535
Total	166,541,201	151,361,000	144,666,055
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	14,862	15,031	15,121
Total	15,551	15,113	15,222
NPR per EIPA :			
Regulated Services	10,558.79	10,111.60	9,414.39
Total	10,625.53	10,102.10	9,421.89
NOR per EIPA :			
Regulated Services	10,637.83	10,133.61	8,770.78
Total	10,768.86	10,201.30	9,514.67
Operating Expenses per EIPA :			
Regulated Services	9,579.23	9,016.82	8,174.20
Total	10,709.51	10,015.43	9,503.64
Net Operating Profit(Loss):			
Regulated Services	15,732,329	16,786,516	9,020,980
Unregulated Services	-14,809,467	-13,977,516	-8,853,128
Total	922,862	2,809,000	167,852
Total Non-Operating Profit(Loss):	-2,287,700	889,000	1,615,000
Non-Operating Revenue	-2,287,700	889,000	1,615,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-1,364,838	3,698,000	1,782,852
% Change in NPR per EIPA - Regulated	4.42	7.41	5.18
% Change in NOR per EIPA - Regulated	4.98	15.54	-2.42
% Change in Oper. Expense per EIPA- Regulated	6.24	10.31	-1.73
% Change in Net Operating Profit- Regulated	-6.28	86.08	-11.67
% Net Operating Profit of Regulated NOR	9.95	11.02	6.80
% Change in Net Operating Profit- Total	-67.15	1,573.49	107.23
% Net Total Operating Profit of Total NOR	0.55	1.82	0.12
% Change in Total Excess Profit	-136.91	107.42	234.26
% Total Excess Profit of Total Revenue	-0.83	2.38	1.22

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

Memorial Hosp and Med Ctr of Cumberland

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	106,194,800	101,185,500	97,696,500
Unregulated Services	23,681,300	22,385,900	19,970,400
TOTAL	129,876,100	123,571,400	117,666,900
Net Patient Revenue(NPR):			
Regulated Services	88,316,900	84,603,800	81,425,000
Unregulated Services	15,029,900	15,262,600	13,647,200
TOTAL	103,346,800	99,866,400	95,072,200
Other Operating Revenue:			
Regulated Services	416,900	63,300	724,100
Unregulated Services	1,470,500	1,450,200	1,690,500
TOTAL	1,887,400	1,513,500	2,414,600
Net Operating Revenue(NOR)			
Regulated Services	88,733,800	84,667,100	82,149,100
Unregulated Services	16,500,400	16,712,800	15,337,700
Total	105,234,200	101,379,900	97,486,800
Total Operating Expenses:			
Regulated Services	83,282,630	82,700,644	82,213,728
Total	100,317,300	98,915,700	97,519,900
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	11,167	11,634	12,249
Total	13,657	14,207	14,753
NPR per EIPA :			
Regulated Services	7,908.74	7,272.34	6,647.35
Total	7,567.19	7,029.17	6,444.20
NOR per EIPA :			
Regulated Services	7,946.07	7,277.78	6,706.47
Total	7,705.39	7,135.69	6,607.87
Operating Expenses per EIPA :			
Regulated Services	7,457.92	7,108.75	6,711.74
Total	7,345.37	6,962.25	6,610.11
Net Operating Profit(Loss):			
Regulated Services	5,451,170	1,966,456	-64,628
Unregulated Services	-534,270	497,744	31,528
Total	4,916,900	2,464,200	-33,100
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,467,500	3,033,900	2,658,600
Non-Operating Expenses	0	517,300	112,200
Total Excess Profit	6,384,400	4,980,800	2,513,300
% Change in NPR per EIPA - Regulated	8.75	9.40	0.71
% Change in NOR per EIPA - Regulated	9.18	8.52	0.06
% Change in Oper. Expense per EIPA- Regulated	4.91	5.92	8.61
% Change in Net Operating Profit- Regulated	177.21	3,142.73	-100.99
% Net Operating Profit of Regulated NOR	6.14	2.32	-0.08
% Change in Net Operating Profit- Total	99.53	7,544.71	-100.65
% Net Total Operating Profit of Total NOR	4.67	2.43	-0.03
% Change in Total Excess Profit	28.18	98.18	-70.20
% Total Excess Profit of Total Revenue	5.98	4.77	2.51

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Memorial Hospital at Easton

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	160,032,300	144,112,600	127,272,636
Unregulated Services	32,948,771	30,351,092	28,694,259
TOTAL	192,981,071	174,463,692	155,966,895
Net Patient Revenue(NPR):			
Regulated Services	139,245,218	125,016,601	112,740,414
Unregulated Services	13,312,423	12,189,249	12,151,534
TOTAL	152,557,641	137,205,850	124,891,948
Other Operating Revenue:			
Regulated Services	1,770,296	2,321,914	1,832,292
Unregulated Services	1,451,188	1,509,780	1,446,288
TOTAL	3,221,484	3,831,694	3,278,580
Net Operating Revenue(NOR)			
Regulated Services	141,015,514	127,338,515	114,572,706
Unregulated Services	14,763,611	13,699,029	13,597,822
Total	155,779,125	141,037,544	128,170,528
Total Operating Expenses:			
Regulated Services	134,106,845	125,451,524	109,557,554
Total	147,694,022	137,972,084	124,574,494
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	16,349	16,140	14,682
Total	19,715	19,539	18,067
NPR per EIPA :			
Regulated Services	8,517.27	7,745.65	7,679.02
Total	7,738.32	7,021.98	6,912.54
NOR per EIPA :			
Regulated Services	8,625.55	7,889.51	7,803.82
Total	7,901.73	7,218.08	7,094.00
Operating Expenses per EIPA :			
Regulated Services	8,202.96	7,772.60	7,462.22
Total	7,491.62	7,061.20	6,894.97
Net Operating Profit(Loss):			
Regulated Services	6,908,669	1,886,991	5,015,152
Unregulated Services	1,176,434	1,178,469	-1,419,118
Total	8,085,103	3,065,460	3,596,035
Total Non-Operating Profit(Loss):	-6,152,200	-609,827	4,611,126
Non-Operating Revenue	-6,152,200	-609,827	4,548,584
Non-Operating Expenses	0	0	-62,542
Total Excess Profit	1,932,904	2,455,633	8,207,172
% Change in NPR per EIPA - Regulated	9.96	0.87	5.98
% Change in NOR per EIPA - Regulated	9.33	1.10	6.34
% Change in Oper. Expense per EIPA- Regulated	5.54	4.16	7.53
% Change in Net Operating Profit- Regulated	266.12	-62.37	-12.00
% Net Operating Profit of Regulated NOR	4.90	1.48	4.38
% Change in Net Operating Profit- Total	163.75	-14.75	27.27
% Net Total Operating Profit of Total NOR	5.19	2.17	2.81
% Change in Total Excess Profit	-21.29	-70.08	64.59
% Total Excess Profit of Total Revenue	1.29	1.75	6.18

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Mercy Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	382,169,900	353,240,000	325,029,000
Unregulated Services	5,560,503	5,922,547	4,359,128
TOTAL	387,730,403	359,162,547	329,388,128
Net Patient Revenue(NPR):			
Regulated Services	334,232,485	310,781,321	285,178,259
Unregulated Services	5,560,503	5,922,547	4,359,128
TOTAL	339,792,988	316,703,868	289,537,387
Other Operating Revenue:			
Regulated Services	3,761,737	4,681,500	7,320,900
Unregulated Services	12,033,663	12,074,420	8,258,051
TOTAL	15,795,400	16,755,920	15,578,951
Net Operating Revenue(NOR)			
Regulated Services	337,994,222	315,462,821	292,499,159
Unregulated Services	17,594,166	17,996,967	12,617,179
Total	355,588,388	333,459,788	305,116,338
Total Operating Expenses:			
Regulated Services	304,063,622	286,723,944	263,534,365
Total	324,261,908	306,485,734	278,902,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	33,604	32,666	30,010
Total	34,093	33,214	30,412
NPR per EIPA :			
Regulated Services	9,946.08	9,513.81	9,502.79
Total	9,966.54	9,535.25	9,520.37
NOR per EIPA :			
Regulated Services	10,058.02	9,657.12	9,746.74
Total	10,429.83	10,039.73	10,032.62
Operating Expenses per EIPA :			
Regulated Services	9,048.31	8,777.35	8,781.57
Total	9,510.99	9,227.60	9,170.66
Net Operating Profit(Loss):			
Regulated Services	33,930,600	28,738,877	28,964,794
Unregulated Services	-2,604,120	-1,764,823	-2,750,456
Total	31,326,480	26,974,054	26,214,338
Total Non-Operating Profit(Loss):	-34,349,064	-6,891,000	5,046,000
Non-Operating Revenue	967,824	12,110,000	9,797,000
Non-Operating Expenses	35,316,888	19,001,000	4,751,000
Total Excess Profit	-3,022,584	20,083,054	31,260,338
% Change in NPR per EIPA - Regulated	4.54	0.12	10.03
% Change in NOR per EIPA - Regulated	4.15	-0.92	11.44
% Change in Oper. Expense per EIPA- Regulated	3.09	-0.05	8.61
% Change in Net Operating Profit- Regulated	18.07	-0.78	47.26
% Net Operating Profit of Regulated NOR	10.04	9.11	9.90
% Change in Net Operating Profit- Total	16.14	2.90	35.88
% Net Total Operating Profit of Total NOR	8.81	8.09	8.59
% Change in Total Excess Profit	-115.05	-35.76	42.20
% Total Excess Profit of Total Revenue	-0.85	5.81	9.93

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Montgomery General Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	140,619,400	135,140,700	121,270,200
Unregulated Services	4,110,000	681,200	1,017,800
TOTAL	144,729,400	135,821,900	122,288,000
Net Patient Revenue(NPR):			
Regulated Services	121,977,000	116,767,100	105,525,100
Unregulated Services	2,341,200	677,300	832,800
TOTAL	124,318,200	117,444,400	106,357,900
Other Operating Revenue:			
Regulated Services	1,157,800	1,409,300	761,500
Unregulated Services	439,300	302,100	464,800
TOTAL	1,597,100	1,711,400	1,226,300
Net Operating Revenue(NOR)			
Regulated Services	123,134,800	118,176,400	106,286,600
Unregulated Services	2,780,500	979,400	1,297,600
Total	125,915,300	119,155,800	107,584,200
Total Operating Expenses:			
Regulated Services	115,736,158	110,107,267	98,753,256
Total	122,776,400	114,666,300	102,648,200
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	14,591	14,058	13,182
Total	14,803	14,129	13,292
NPR per EIPA :			
Regulated Services	8,359.68	8,305.86	8,005.05
Total	8,397.91	8,312.14	8,001.72
NOR per EIPA :			
Regulated Services	8,439.03	8,406.11	8,062.82
Total	8,505.80	8,433.27	8,093.98
Operating Expenses per EIPA :			
Regulated Services	7,931.97	7,832.14	7,491.34
Total	8,293.76	8,115.52	7,722.63
Net Operating Profit(Loss):			
Regulated Services	7,398,642	8,069,133	7,533,344
Unregulated Services	-4,259,742	-3,579,633	-2,597,344
Total	3,138,900	4,489,500	4,936,000
Total Non-Operating Profit(Loss):	-2,837,200	-4,141,400	2,332,400
Non-Operating Revenue	-2,837,200	2,941,200	2,332,400
Non-Operating Expenses	0	7,082,600	0
Total Excess Profit	301,700	348,100	7,268,400
% Change in NPR per EIPA - Regulated	0.65	3.76	9.86
% Change in NOR per EIPA - Regulated	0.39	4.26	9.72
% Change in Oper. Expense per EIPA- Regulated	1.27	4.55	3.11
% Change in Net Operating Profit- Regulated	-8.31	7.11	609.82
% Net Operating Profit of Regulated NOR	6.01	6.83	7.09
% Change in Net Operating Profit- Total	-30.08	-9.05	506.12
% Net Total Operating Profit of Total NOR	2.49	3.77	4.59
% Change in Total Excess Profit	-13.33	-95.21	433.03
% Total Excess Profit of Total Revenue	0.25	0.29	6.61

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Northwest Hospital Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	211,714,700	201,205,800	191,845,500
Unregulated Services	22,261,476	19,510,259	17,966,559
TOTAL	233,976,176	220,716,059	209,812,059
Net Patient Revenue(NPR):			
Regulated Services	178,142,957	170,962,500	163,196,500
Unregulated Services	8,944,551	8,106,696	6,885,449
TOTAL	187,087,508	179,069,196	170,081,949
Other Operating Revenue:			
Regulated Services	1,223,600	1,947,000	1,662,000
Unregulated Services	1,095,281	0	0
TOTAL	2,318,881	1,947,000	1,662,000
Net Operating Revenue(NOR)			
Regulated Services	179,366,557	172,909,500	164,858,500
Unregulated Services	10,039,832	8,106,696	6,885,449
Total	189,406,389	181,016,196	171,743,949
Total Operating Expenses:			
Regulated Services	159,137,100	154,091,772	147,809,809
Total	176,972,000	168,493,000	160,991,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	20,971	21,496	20,866
Total	22,427	22,547	21,711
NPR per EIPA :			
Regulated Services	8,494.63	7,953.41	7,821.16
Total	8,342.18	7,941.95	7,833.98
NOR per EIPA :			
Regulated Services	8,552.98	8,043.99	7,900.81
Total	8,445.57	8,028.30	7,910.54
Operating Expenses per EIPA :			
Regulated Services	7,588.35	7,168.56	7,083.75
Total	7,891.13	7,472.88	7,415.25
Net Operating Profit(Loss):			
Regulated Services	20,229,457	18,817,728	17,048,691
Unregulated Services	-7,795,068	-6,294,532	-6,295,742
Total	12,434,389	12,523,196	10,752,949
Total Non-Operating Profit(Loss):	-8,766,031	-5,975,000	15,626,000
Non-Operating Revenue	-8,766,031	-5,975,000	15,626,000
Non-Operating Expenses	0	0	0
Total Excess Profit	3,668,358	6,548,196	26,378,949
% Change in NPR per EIPA - Regulated	6.80	1.69	7.50
% Change in NOR per EIPA - Regulated	6.33	1.81	7.61
% Change in Oper. Expense per EIPA- Regulated	5.86	1.20	8.39
% Change in Net Operating Profit- Regulated	7.50	10.38	3.05
% Net Operating Profit of Regulated NOR	11.28	10.88	10.34
% Change in Net Operating Profit- Total	-0.71	16.46	-9.53
% Net Total Operating Profit of Total NOR	6.56	6.92	6.26
% Change in Total Excess Profit	-43.98	-75.18	56.98
% Total Excess Profit of Total Revenue	2.03	3.74	14.08

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Peninsula Regional Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	385,277,000	366,969,200	335,381,200
Unregulated Services	33,201,200	32,979,400	26,556,300
TOTAL	418,478,200	399,948,600	361,937,500
Net Patient Revenue(NPR):			
Regulated Services	331,729,600	318,253,000	291,084,100
Unregulated Services	18,785,400	18,728,400	13,928,800
TOTAL	350,515,000	336,981,400	305,012,900
Other Operating Revenue:			
Regulated Services	872,900	-28,500	208,200
Unregulated Services	1,123,300	1,127,200	1,199,800
TOTAL	1,996,200	1,098,700	1,408,000
Net Operating Revenue(NOR)			
Regulated Services	332,602,500	318,224,500	291,292,300
Unregulated Services	19,908,700	19,855,600	15,128,600
Total	352,511,200	338,080,100	306,420,900
Total Operating Expenses:			
Regulated Services	303,144,053	279,212,502	263,403,613
Total	340,475,200	309,880,100	284,866,900
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	31,193	30,094	28,923
Total	34,206	33,058	31,388
NPR per EIPA :			
Regulated Services	10,634.91	10,575.36	10,064.00
Total	10,247.26	10,193.60	9,717.60
NOR per EIPA :			
Regulated Services	10,662.89	10,574.41	10,071.20
Total	10,305.62	10,226.83	9,762.46
Operating Expenses per EIPA :			
Regulated Services	9,718.48	9,278.07	9,106.97
Total	9,953.75	9,373.79	9,075.75
Net Operating Profit(Loss):			
Regulated Services	29,458,447	39,011,998	27,888,687
Unregulated Services	-17,422,447	-10,811,998	-6,334,687
Total	12,036,000	28,200,000	21,554,000
Total Non-Operating Profit(Loss):	-17,877,000	10,106,000	11,363,000
Non-Operating Revenue	-17,877,000	10,106,000	11,363,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-5,841,000	38,306,000	32,917,000
% Change in NPR per EIPA - Regulated	0.56	5.08	7.27
% Change in NOR per EIPA - Regulated	0.84	5.00	6.98
% Change in Oper. Expense per EIPA- Regulated	4.75	1.88	3.10
% Change in Net Operating Profit- Regulated	-24.49	39.88	67.66
% Net Operating Profit of Regulated NOR	8.86	12.26	9.57
% Change in Net Operating Profit- Total	-57.32	30.83	63.98
% Net Total Operating Profit of Total NOR	3.41	8.34	7.03
% Change in Total Excess Profit	-115.25	16.37	58.99
% Total Excess Profit of Total Revenue	-1.75	11.00	10.36

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Prince George's Hospital Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	260,576,400	241,928,700	239,828,800
Unregulated Services	34,623,914	33,660,372	37,824,681
TOTAL	295,200,314	275,589,072	277,653,481
Net Patient Revenue(NPR):			
Regulated Services	210,964,197	197,518,266	196,440,112
Unregulated Services	15,513,731	13,910,441	15,807,972
TOTAL	226,477,928	211,428,706	212,248,084
Other Operating Revenue:			
Regulated Services	884,971	1,482,579	30,466,332
Unregulated Services	1,907,144	1,581,133	1,549,308
TOTAL	2,792,115	3,063,712	32,015,640
Net Operating Revenue(NOR)			
Regulated Services	211,849,168	199,000,845	226,906,444
Unregulated Services	17,420,875	15,491,574	17,357,280
Total	229,270,043	214,492,418	244,263,724
Total Operating Expenses:			
Regulated Services	212,101,859	198,288,498	194,187,354
Total	244,485,919	229,159,939	225,483,531
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	18,250	17,385	17,457
Total	19,008	18,116	19,686
NPR per EIPA :			
Regulated Services	11,559.98	11,361.27	11,253.00
Total	11,914.57	11,670.95	10,781.43
NOR per EIPA :			
Regulated Services	11,608.47	11,446.55	12,998.26
Total	12,061.45	11,840.07	12,407.70
Operating Expenses per EIPA :			
Regulated Services	11,622.32	11,405.58	11,123.95
Total	12,861.93	12,649.72	11,453.74
Net Operating Profit(Loss):			
Regulated Services	-252,691	712,347	32,719,090
Unregulated Services	-14,963,185	-15,379,867	-13,938,897
Total	-15,215,876	-14,667,521	18,780,193
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	26,693,589	17,879,440	1,028,336
Non-Operating Expenses	0	0	0
Total Excess Profit	11,477,713	3,211,919	19,808,529
% Change in NPR per EIPA - Regulated	1.75	0.96	1.86
% Change in NOR per EIPA - Regulated	1.41	-11.94	17.66
% Change in Oper. Expense per EIPA- Regulated	1.90	2.53	6.75
% Change in Net Operating Profit- Regulated	-135.47	-97.82	182.70
% Net Operating Profit of Regulated NOR	-0.12	0.36	14.42
% Change in Net Operating Profit- Total	-3.74	-178.10	970.06
% Net Total Operating Profit of Total NOR	-6.64	-6.84	7.69
% Change in Total Excess Profit	257.35	-83.79	-18.55
% Total Excess Profit of Total Revenue	4.48	1.38	8.08

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FISCAL YEAR 2007 TO 2009

Saint Agnes Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	358,890,700	333,555,200	323,356,800
Unregulated Services	112,470,503	90,608,898	61,139,285
TOTAL	471,361,203	424,164,098	384,496,085
Net Patient Revenue(NPR):			
Regulated Services	307,252,556	284,136,736	277,220,735
Unregulated Services	47,001,651	38,653,468	35,734,436
TOTAL	354,254,207	322,790,204	312,955,171
Other Operating Revenue:			
Regulated Services	3,590,078	2,965,213	4,759,168
Unregulated Services	3,261,559	3,558,970	1,905,098
TOTAL	6,851,637	6,524,183	6,664,266
Net Operating Revenue(NOR)			
Regulated Services	310,842,634	287,101,949	281,979,902
Unregulated Services	50,263,210	42,212,438	37,639,534
Total	361,105,844	329,314,387	319,619,437
Total Operating Expenses:			
Regulated Services	275,685,027	260,314,417	255,868,235
Total	343,421,097	317,966,817	301,489,739
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	30,686	28,454	29,434
Total	37,473	33,668	33,346
NPR per EIPA :			
Regulated Services	10,012.70	9,985.76	9,418.52
Total	9,453.59	9,587.44	9,385.21
NOR per EIPA :			
Regulated Services	10,129.69	10,089.97	9,580.21
Total	9,636.43	9,781.22	9,585.06
Operating Expenses per EIPA :			
Regulated Services	8,983.98	9,148.54	8,693.07
Total	9,164.50	9,444.18	9,041.37
Net Operating Profit(Loss):			
Regulated Services	35,157,607	26,787,532	26,111,668
Unregulated Services	-17,472,860	-15,439,962	-7,981,970
Total	17,684,747	11,347,570	18,129,697
Total Non-Operating Profit(Loss):	-37,124,996	1,280,447	30,808,612
Non-Operating Revenue	-37,124,996	1,280,447	30,808,612
Non-Operating Expenses	0	0	0
Total Excess Profit	-19,440,249	12,628,017	48,938,310
% Change in NPR per EIPA - Regulated	0.27	6.02	9.29
% Change in NOR per EIPA - Regulated	0.39	5.32	9.54
% Change in Oper. Expense per EIPA- Regulated	-1.80	5.24	9.01
% Change in Net Operating Profit- Regulated	31.25	2.59	9.72
% Net Operating Profit of Regulated NOR	11.31	9.33	9.26
% Change in Net Operating Profit- Total	55.85	-37.41	24.69
% Net Total Operating Profit of Total NOR	4.90	3.45	5.67
% Change in Total Excess Profit	-253.95	-74.20	71.98
% Total Excess Profit of Total Revenue	-6.00	3.82	13.97

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Saint Joseph Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	398,844,400	363,810,300	345,174,100
Unregulated Services	47,008,578	38,259,184	39,791,165
TOTAL	445,852,978	402,069,484	384,965,265
Net Patient Revenue(NPR):			
Regulated Services	339,694,906	322,493,187	304,510,224
Unregulated Services	21,683,700	17,339,626	18,111,771
TOTAL	361,378,606	339,832,813	322,621,995
Other Operating Revenue:			
Regulated Services	1,079,638	778,886	1,595,568
Unregulated Services	5,248,578	4,959,932	5,905,639
TOTAL	6,328,216	5,738,818	7,501,207
Net Operating Revenue(NOR)			
Regulated Services	340,774,543	323,272,073	306,105,791
Unregulated Services	26,932,278	22,299,558	24,017,410
Total	367,706,822	345,571,631	330,123,202
Total Operating Expenses:			
Regulated Services	322,090,976	322,940,196	293,507,383
Total	372,532,167	363,575,748	328,666,600
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	31,752	30,498	29,441
Total	35,486	30,864	31,270
NPR per EIPA :			
Regulated Services	10,698.23	10,574.30	10,343.04
Total	10,183.83	11,010.54	10,317.29
NOR per EIPA :			
Regulated Services	10,732.23	10,599.84	10,397.24
Total	10,362.16	11,196.47	10,557.17
Operating Expenses per EIPA :			
Regulated Services	10,143.82	10,588.95	9,969.32
Total	10,498.14	11,779.80	10,510.59
Net Operating Profit(Loss):			
Regulated Services	18,683,567	331,877	12,598,408
Unregulated Services	-23,508,912	-18,335,994	-11,141,806
Total	-4,825,345	-18,004,117	1,456,602
Total Non-Operating Profit(Loss):	-9,452,618	6,269,504	8,692,793
Non-Operating Revenue	12,547,382	6,269,504	8,692,793
Non-Operating Expenses	22,000,000	0	0
Total Excess Profit	-14,277,963	-11,734,613	10,149,395
% Change in NPR per EIPA - Regulated	1.17	2.24	2.58
% Change in NOR per EIPA - Regulated	1.25	1.95	2.84
% Change in Oper. Expense per EIPA- Regulated	-4.20	6.22	4.20
% Change in Net Operating Profit- Regulated	5,529.66	-97.37	-23.79
% Net Operating Profit of Regulated NOR	5.48	0.10	4.12
% Change in Net Operating Profit- Total	73.20	-1,336.04	-80.23
% Net Total Operating Profit of Total NOR	-1.31	-5.21	0.44
% Change in Total Excess Profit	-21.67	-215.62	-43.02
% Total Excess Profit of Total Revenue	-3.75	-3.34	3.00

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Saint Mary's Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	124,100,600	114,652,300	106,160,000
Unregulated Services	7,978,916	7,212,017	6,598,238
TOTAL	132,079,516	121,864,317	112,758,238
Net Patient Revenue(NPR):			
Regulated Services	105,768,160	96,521,141	92,658,716
Unregulated Services	3,029,183	6,740,740	4,252,501
TOTAL	108,797,343	103,261,881	96,911,217
Other Operating Revenue:			
Regulated Services	1,440,400	1,164,206	-2,994,600
Unregulated Services	0	680,720	4,399,200
TOTAL	1,440,400	1,844,926	1,404,600
Net Operating Revenue(NOR)			
Regulated Services	107,208,560	97,685,347	89,664,116
Unregulated Services	3,029,183	7,421,460	8,651,701
Total	110,237,743	105,106,807	98,315,817
Total Operating Expenses:			
Regulated Services	97,770,605	88,622,956	82,860,617
Total	108,436,642	98,402,342	90,996,208
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	17,592	16,309	16,036
Total	18,509	16,887	16,590
NPR per EIPA :			
Regulated Services	6,012.37	5,918.24	5,778.21
Total	5,878.11	6,114.85	5,841.45
NOR per EIPA :			
Regulated Services	6,094.25	5,989.62	5,591.47
Total	5,955.93	6,224.10	5,926.11
Operating Expenses per EIPA :			
Regulated Services	5,557.75	5,433.96	5,167.20
Total	5,858.62	5,827.08	5,484.92
Net Operating Profit(Loss):			
Regulated Services	9,437,955	9,062,391	6,803,498
Unregulated Services	-7,636,854	-2,357,926	516,111
Total	1,801,101	6,704,465	7,319,609
Total Non-Operating Profit(Loss):	-1,402,542	896,484	1,777,402
Non-Operating Revenue	626,900	1,192,699	1,777,402
Non-Operating Expenses	2,029,442	296,215	0
Total Excess Profit	398,559	7,600,949	9,097,011
% Change in NPR per EIPA - Regulated	1.59	2.42	6.46
% Change in NOR per EIPA - Regulated	1.75	7.12	1.74
% Change in Oper. Expense per EIPA- Regulated	2.28	5.16	8.08
% Change in Net Operating Profit- Regulated	4.14	33.20	-37.30
% Net Operating Profit of Regulated NOR	8.80	9.28	7.59
% Change in Net Operating Profit- Total	-73.14	-8.40	-31.93
% Net Total Operating Profit of Total NOR	1.63	6.38	7.44
% Change in Total Excess Profit	-94.76	-16.45	-22.16
% Total Excess Profit of Total Revenue	0.36	7.15	9.09

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Shady Grove Adventist Hospital

FISCAL YEAR ENDING	December 2009	December 2008	December 2007
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Gross Patient Revenue:			
Regulated Services	331,274,906	304,350,850	284,281,331
Unregulated Services	35,853,773	30,972,635	13,408,934
TOTAL	367,128,679	335,323,485	297,690,265
Net Patient Revenue(NPR):			
Regulated Services	283,847,908	261,642,638	239,838,057
Unregulated Services	16,613,631	15,415,897	9,478,163
TOTAL	300,461,539	277,058,535	249,316,220
Other Operating Revenue:			
Regulated Services	2,643,215	1,870,850	1,532,323
Unregulated Services	4,557,361	3,749,785	3,304,815
TOTAL	7,200,576	5,620,635	4,837,138
Net Operating Revenue(NOR)			
Regulated Services	286,491,123	263,513,488	241,370,380
Unregulated Services	21,170,992	19,165,682	12,782,978
Total	307,662,115	282,679,170	254,153,358
Total Operating Expenses:			
Regulated Services	270,417,774	256,440,113	232,476,082
Total	292,748,994	275,947,407	251,743,884
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	33,450	31,064	29,503
Total	36,701	33,917	29,019
NPR per EIPA :			
Regulated Services	8,485.78	8,422.58	8,129.24
Total	8,186.77	8,168.62	8,591.55
NOR per EIPA :			
Regulated Services	8,564.80	8,482.80	8,181.18
Total	8,382.96	8,334.34	8,758.24
Operating Expenses per EIPA :			
Regulated Services	8,084.28	8,255.10	7,879.71
Total	7,976.62	8,135.86	8,675.21
Net Operating Profit(Loss):			
Regulated Services	16,073,349	7,073,375	8,894,298
Unregulated Services	-1,160,228	-341,612	-6,484,825
Total	14,913,121	6,731,763	2,409,473
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	-1,255,294	-4,297,904	2,479,474
Non-Operating Expenses	0	0	0
Total Excess Profit	13,657,827	2,433,859	4,888,947
% Change in NPR per EIPA - Regulated	0.75	3.61	4.47
% Change in NOR per EIPA - Regulated	0.97	3.69	4.79
% Change in Oper. Expense per EIPA- Regulated	-2.07	4.76	2.62
% Change in Net Operating Profit- Regulated	127.24	-20.47	144.53
% Net Operating Profit of Regulated NOR	5.61	2.68	3.68
% Change in Net Operating Profit- Total	121.53	179.39	138.50
% Net Total Operating Profit of Total NOR	4.85	2.38	0.95
% Change in Total Excess Profit	461.16	-50.22	261.17
% Total Excess Profit of Total Revenue	4.46	0.87	1.91

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Sinai Hospital of Baltimore

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	627,278,200	602,337,500	567,654,000
Unregulated Services	109,781,389	104,877,517	95,328,813
TOTAL	737,059,589	707,215,017	662,982,813
Net Patient Revenue(NPR):			
Regulated Services	536,920,130	512,803,742	483,991,284
Unregulated Services	40,437,732	38,662,795	35,218,209
TOTAL	577,357,862	551,466,537	519,209,493
Other Operating Revenue:			
Regulated Services	10,224,011	16,714,741	10,758,000
Unregulated Services	15,441,747	10,652,682	12,830,921
TOTAL	25,665,758	27,367,423	23,588,921
Net Operating Revenue(NOR)			
Regulated Services	547,144,141	529,518,483	494,749,284
Unregulated Services	55,879,479	49,315,477	48,049,130
Total	603,023,620	578,833,960	542,798,414
Total Operating Expenses:			
Regulated Services	500,512,326	485,322,263	445,682,167
Total	591,050,256	573,504,000	525,872,401
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	39,792	40,344	37,638
Total	41,063	41,629	39,159
NPR per EIPA :			
Regulated Services	13,493.11	12,710.71	12,859.14
Total	14,060.30	13,247.26	13,258.94
NOR per EIPA :			
Regulated Services	13,750.04	13,125.01	13,144.97
Total	14,685.33	13,904.68	13,861.33
Operating Expenses per EIPA :			
Regulated Services	12,578.16	12,029.54	11,841.31
Total	14,393.74	13,776.64	13,429.09
Net Operating Profit(Loss):			
Regulated Services	46,631,815	44,196,220	49,067,117
Unregulated Services	-34,658,451	-38,866,260	-32,141,103
Total	11,973,364	5,329,960	16,926,013
Total Non-Operating Profit(Loss):	-15,055,000	-20,242,000	33,683,000
Non-Operating Revenue	-15,055,000	-20,242,000	33,683,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-3,081,636	-14,912,040	50,609,013
% Change in NPR per EIPA - Regulated	6.16	-1.15	7.14
% Change in NOR per EIPA - Regulated	4.76	-0.15	6.97
% Change in Oper. Expense per EIPA- Regulated	4.56	1.59	7.38
% Change in Net Operating Profit- Regulated	5.51	-9.93	6.94
% Net Operating Profit of Regulated NOR	8.52	8.35	9.92
% Change in Net Operating Profit- Total	124.64	-68.51	-15.84
% Net Total Operating Profit of Total NOR	1.99	0.92	3.12
% Change in Total Excess Profit	79.33	-129.47	110.43
% Total Excess Profit of Total Revenue	-0.52	-2.67	8.78

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Southern Maryland Hospital Center

FISCAL YEAR ENDING	December 2009	December 2008	December 2007
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Gross Patient Revenue:			
Regulated Services	224,831,800	226,574,600	216,279,800
Unregulated Services	46,561,967	46,394,944	44,231,905
TOTAL	271,393,767	272,969,544	260,511,705
Net Patient Revenue(NPR):			
Regulated Services	188,617,307	183,726,110	176,487,362
Unregulated Services	18,201,765	4,763,757	17,454,076
TOTAL	206,819,072	188,489,867	193,941,438
Other Operating Revenue:			
Regulated Services	227,547	358,735	372,144
Unregulated Services	490,439	13,797,779	500,495
TOTAL	717,986	14,156,514	872,639
Net Operating Revenue(NOR)			
Regulated Services	188,844,854	184,084,845	176,859,506
Unregulated Services	18,692,204	18,561,536	17,954,571
Total	207,537,058	202,646,381	194,814,077
Total Operating Expenses:			
Regulated Services	179,924,919	170,857,254	165,625,980
Total	204,868,119	198,519,258	187,878,012
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	23,928	25,911	23,670
Total	28,637	28,727	28,431
NPR per EIPA :			
Regulated Services	7,882.67	7,090.76	7,456.07
Total	7,222.21	6,561.32	6,821.45
NOR per EIPA :			
Regulated Services	7,892.18	7,104.60	7,471.79
Total	7,247.28	7,054.11	6,852.14
Operating Expenses per EIPA :			
Regulated Services	7,519.40	6,594.10	6,997.20
Total	7,154.08	6,910.44	6,608.18
Net Operating Profit(Loss):			
Regulated Services	8,919,935	13,227,591	11,233,526
Unregulated Services	-6,250,996	-9,100,468	-4,297,461
Total	2,668,939	4,127,123	6,936,065
Total Non-Operating Profit(Loss):	50,554	648,952	1,146,376
Non-Operating Revenue	50,554	648,952	1,146,376
Non-Operating Expenses	0	0	0
Total Excess Profit	2,719,464	4,776,075	8,082,441
% Change in NPR per EIPA - Regulated	11.17	-4.90	9.70
% Change in NOR per EIPA - Regulated	11.09	-4.91	9.58
% Change in Oper. Expense per EIPA- Regulated	14.03	-5.76	6.29
% Change in Net Operating Profit- Regulated	-32.57	17.75	98.27
% Net Operating Profit of Regulated NOR	4.72	7.19	6.35
% Change in Net Operating Profit- Total	-35.33	-40.50	342.01
% Net Total Operating Profit of Total NOR	1.29	2.04	3.56
% Change in Total Excess Profit	-43.06	-40.91	210.12
% Total Excess Profit of Total Revenue	1.31	2.35	4.12

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Suburban Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	228,243,300	220,977,300	198,515,100
Unregulated Services	24,730,400	22,030,800	23,110,600
TOTAL	252,973,700	243,008,100	221,625,700
Net Patient Revenue(NPR):			
Regulated Services	199,185,500	192,441,500	175,366,300
Unregulated Services	17,259,100	18,235,300	17,642,400
TOTAL	216,444,600	210,676,800	193,008,700
Other Operating Revenue:			
Regulated Services	5,055,700	6,906,800	5,267,000
Unregulated Services	7,350,800	6,309,800	6,568,500
TOTAL	12,406,500	13,216,600	11,835,500
Net Operating Revenue(NOR)			
Regulated Services	204,241,200	199,348,300	180,633,300
Unregulated Services	24,609,900	24,545,100	24,210,900
Total	228,851,100	223,893,400	204,844,200
Total Operating Expenses:			
Regulated Services	195,403,393	186,617,041	175,082,281
Total	221,079,100	209,805,300	198,087,700
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	19,929	19,822	18,797
Total	22,088	21,799	20,985
NPR per EIPA :			
Regulated Services	9,994.98	9,708.32	9,329.49
Total	9,799.33	9,664.72	9,197.33
NOR per EIPA :			
Regulated Services	10,248.67	10,056.76	9,609.69
Total	10,361.03	10,271.02	9,761.33
Operating Expenses per EIPA :			
Regulated Services	9,805.19	9,414.49	9,314.38
Total	10,009.16	9,624.74	9,439.36
Net Operating Profit(Loss):			
Regulated Services	8,837,807	12,731,259	5,551,019
Unregulated Services	-1,065,807	1,356,841	1,205,481
Total	7,772,000	14,088,100	6,756,500
Total Non-Operating Profit(Loss):	-3,531,300	263,900	936,000
Non-Operating Revenue	-3,531,300	263,900	936,000
Non-Operating Expenses	0	0	0
Total Excess Profit	4,240,700	14,352,000	7,692,500
% Change in NPR per EIPA - Regulated	2.95	4.06	9.75
% Change in NOR per EIPA - Regulated	1.91	4.65	10.74
% Change in Oper. Expense per EIPA- Regulated	4.15	1.07	11.75
% Change in Net Operating Profit- Regulated	-30.58	129.35	-12.67
% Net Operating Profit of Regulated NOR	4.33	6.39	3.07
% Change in Net Operating Profit- Total	-44.83	108.51	-21.97
% Net Total Operating Profit of Total NOR	3.40	6.29	3.30
% Change in Total Excess Profit	-70.45	86.57	-37.66
% Total Excess Profit of Total Revenue	1.88	6.40	3.74

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Union Hospital of Cecil County

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	126,780,200	116,438,100	102,995,100
Unregulated Services	16,181,600	12,836,800	7,297,900
TOTAL	142,961,800	129,274,900	110,293,000
Net Patient Revenue(NPR):			
Regulated Services	105,285,300	98,597,600	87,294,100
Unregulated Services	7,702,100	5,942,900	3,509,200
TOTAL	112,987,400	104,540,500	90,803,300
Other Operating Revenue:			
Regulated Services	1,209,500	1,868,300	607,500
Unregulated Services	1,862,300	1,989,100	1,790,700
TOTAL	3,071,800	3,857,400	2,398,200
Net Operating Revenue(NOR)			
Regulated Services	106,494,800	100,465,900	87,901,600
Unregulated Services	9,564,400	7,932,000	5,299,900
Total	116,059,200	108,397,900	93,201,500
Total Operating Expenses:			
Regulated Services	99,599,700	93,647,500	87,195,400
Total	113,610,800	103,933,800	93,814,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	15,761	15,891	13,534
Total	17,769	17,639	14,489
NPR per EIPA :			
Regulated Services	6,680.09	6,204.70	6,450.10
Total	6,358.53	5,926.74	6,267.24
NOR per EIPA :			
Regulated Services	6,756.83	6,322.27	6,494.98
Total	6,531.40	6,145.43	6,432.77
Operating Expenses per EIPA :			
Regulated Services	6,319.36	5,893.19	6,442.80
Total	6,393.61	5,892.35	6,475.04
Net Operating Profit(Loss):			
Regulated Services	6,895,100	6,818,400	706,200
Unregulated Services	-4,446,700	-2,354,300	-1,318,700
Total	2,448,400	4,464,100	-612,500
Total Non-Operating Profit(Loss):	-7,965,700	7,314,600	4,878,400
Non-Operating Revenue	-7,639,700	7,472,600	5,319,600
Non-Operating Expenses	326,000	158,000	441,200
Total Excess Profit	-5,517,300	11,778,700	4,265,900
% Change in NPR per EIPA - Regulated	7.66	-3.80	12.31
% Change in NOR per EIPA - Regulated	6.87	-2.66	12.76
% Change in Oper. Expense per EIPA- Regulated	7.23	-8.53	14.60
% Change in Net Operating Profit- Regulated	1.12	865.51	-63.09
% Net Operating Profit of Regulated NOR	6.47	6.79	0.80
% Change in Net Operating Profit- Total	-45.15	828.83	-171.94
% Net Total Operating Profit of Total NOR	2.11	4.12	-0.66
% Change in Total Excess Profit	-146.84	176.11	-26.63
% Total Excess Profit of Total Revenue	-5.09	10.17	4.33

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Union Memorial Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	413,847,100	413,393,800	368,210,000
Unregulated Services	96,248,880	59,347,931	46,679,549
TOTAL	510,095,980	472,741,731	414,889,549
Net Patient Revenue(NPR):			
Regulated Services	353,456,109	352,995,022	311,376,653
Unregulated Services	36,271,722	27,525,192	21,187,608
TOTAL	389,727,831	380,520,214	332,564,261
Other Operating Revenue:			
Regulated Services	3,918,613	3,739,400	3,695,600
Unregulated Services	8,763,934	8,548,658	7,714,737
TOTAL	12,682,547	12,288,058	11,410,337
Net Operating Revenue(NOR)			
Regulated Services	357,374,722	356,734,422	315,072,253
Unregulated Services	45,035,656	36,073,850	28,902,345
Total	402,410,378	392,808,272	343,974,598
Total Operating Expenses:			
Regulated Services	326,289,867	317,897,600	295,851,912
Total	392,085,514	369,616,498	334,248,308
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	27,166	27,433	26,196
Total	30,615	29,556	27,961
NPR per EIPA :			
Regulated Services	13,011.09	12,867.51	11,886.44
Total	12,730.10	12,874.51	11,893.94
NOR per EIPA :			
Regulated Services	13,155.34	13,003.82	12,027.51
Total	13,144.36	13,290.26	12,302.02
Operating Expenses per EIPA :			
Regulated Services	12,011.07	11,588.12	11,293.80
Total	12,807.11	12,505.60	11,954.16
Net Operating Profit(Loss):			
Regulated Services	31,084,855	38,836,906	19,220,341
Unregulated Services	-20,759,991	-15,645,132	-9,494,052
Total	10,324,864	23,191,774	9,726,290
Total Non-Operating Profit(Loss):	-3,504,021	-1,424,699	14,290,723
Non-Operating Revenue	-3,504,021	-1,424,699	14,290,723
Non-Operating Expenses	0	0	0
Total Excess Profit	6,820,843	21,767,075	24,017,013
% Change in NPR per EIPA - Regulated	1.12	8.25	8.57
% Change in NOR per EIPA - Regulated	1.17	8.12	8.70
% Change in Oper. Expense per EIPA- Regulated	3.65	2.61	7.73
% Change in Net Operating Profit- Regulated	-19.96	102.06	29.75
% Net Operating Profit of Regulated NOR	8.70	10.89	6.10
% Change in Net Operating Profit- Total	-55.48	138.44	17.70
% Net Total Operating Profit of Total NOR	2.57	5.90	2.83
% Change in Total Excess Profit	-68.66	-9.37	61.32
% Total Excess Profit of Total Revenue	1.71	5.56	6.70

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University MIEMSS

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	154,824,600	179,581,300	184,358,000
Unregulated Services	1,363,135	1,250,330	839,332
TOTAL	156,187,735	180,831,630	185,197,332
Net Patient Revenue(NPR):			
Regulated Services	125,289,009	125,795,245	130,344,000
Unregulated Services	1,363,135	1,250,330	839,332
TOTAL	126,652,144	127,045,575	131,183,332
Other Operating Revenue:			
Regulated Services	2,910,834	6,764,000	6,700,000
Unregulated Services	0	0	0
TOTAL	2,910,834	6,764,000	6,700,000
Net Operating Revenue(NOR)			
Regulated Services	128,199,844	132,559,245	137,044,000
Unregulated Services	1,363,135	1,250,330	839,332
Total	129,562,979	133,809,575	137,883,332
Total Operating Expenses:			
Regulated Services	140,611,809	128,907,439	129,403,496
Total	145,996,709	134,287,939	134,581,596
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	7,614	7,801	7,839
Total	7,681	7,856	7,874
NPR per EIPA :			
Regulated Services	16,455.03	16,125.02	16,628.22
Total	16,488.89	16,172.69	16,659.45
NOR per EIPA :			
Regulated Services	16,837.33	16,992.06	17,482.95
Total	16,867.85	17,033.74	17,510.31
Operating Expenses per EIPA :			
Regulated Services	18,467.48	16,523.96	16,508.24
Total	19,007.36	17,094.63	17,091.01
Net Operating Profit(Loss):			
Regulated Services	-12,411,966	3,651,806	7,640,504
Unregulated Services	-4,021,765	-4,130,170	-4,338,768
Total	-16,433,731	-478,364	3,301,735
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	-2,167,000	1,966,000	1,966,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-18,600,731	1,487,636	5,267,735
% Change in NPR per EIPA - Regulated	2.05	-3.03	1.78
% Change in NOR per EIPA - Regulated	-0.91	-2.81	3.08
% Change in Oper. Expense per EIPA- Regulated	11.76	0.10	2.79
% Change in Net Operating Profit- Regulated	-439.89	-52.20	14.64
% Net Operating Profit of Regulated NOR	-9.68	2.75	5.58
% Change in Net Operating Profit- Total	-3,335.40	-114.49	-26.55
% Net Total Operating Profit of Total NOR	-12.68	-0.36	2.39
% Change in Total Excess Profit	-1,350.35	-71.76	-11.53
% Total Excess Profit of Total Revenue	-14.60	1.10	3.77

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

University UMCC

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	52,896,400	60,224,500	61,862,800
Unregulated Services	5,610,495	5,353,788	5,027,954
TOTAL	58,506,895	65,578,288	66,890,754
Net Patient Revenue(NPR):			
Regulated Services	41,266,652	48,156,890	49,887,000
Unregulated Services	5,610,495	5,353,788	5,027,954
TOTAL	46,877,147	53,510,678	54,914,954
Other Operating Revenue:			
Regulated Services	103,515	35,000	23,000
Unregulated Services	0	0	0
TOTAL	103,515	35,000	23,000
Net Operating Revenue(NOR)			
Regulated Services	41,370,168	48,191,890	49,910,000
Unregulated Services	5,610,495	5,353,788	5,027,954
Total	46,980,663	53,545,678	54,937,954
Total Operating Expenses:			
Regulated Services	66,041,802	51,929,971	50,816,422
Total	71,438,652	57,328,504	55,706,848
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	2,583	2,862	2,633
Total	2,857	3,116	2,847
NPR per EIPA :			
Regulated Services	15,978.33	16,826.00	18,950.02
Total	16,410.15	17,170.22	19,291.96
NOR per EIPA :			
Regulated Services	16,018.41	16,838.23	18,958.75
Total	16,446.38	17,181.45	19,300.04
Operating Expenses per EIPA :			
Regulated Services	25,571.20	18,144.31	19,303.07
Total	25,008.32	18,395.27	19,570.16
Net Operating Profit(Loss):			
Regulated Services	-24,671,635	-3,738,082	-906,422
Unregulated Services	213,645	-44,744	137,528
Total	-24,457,990	-3,782,826	-768,894
Total Non-Operating Profit(Loss):	-887,000	810,000	806,000
Non-Operating Revenue	-887,000	810,000	806,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-25,344,990	-2,972,826	37,106
% Change in NPR per EIPA - Regulated	-5.04	-11.21	-10.13
% Change in NOR per EIPA - Regulated	-4.87	-11.18	-10.13
% Change in Oper. Expense per EIPA- Regulated	40.93	-6.00	-4.58
% Change in Net Operating Profit- Regulated	-560.01	-312.40	-143.52
% Net Operating Profit of Regulated NOR	-59.64	-7.76	-1.82
% Change in Net Operating Profit- Total	-546.55	-391.98	-144.05
% Net Total Operating Profit of Total NOR	-52.06	-7.06	-1.40
% Change in Total Excess Profit	-752.56	-8,111.72	-98.59
% Total Excess Profit of Total Revenue	-54.99	-5.47	0.07

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

University of Maryland Medical Center

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	940,100,100	877,294,500	850,019,727
Unregulated Services	13,652,812	11,247,170	12,118,535
TOTAL	953,752,912	888,541,670	862,138,262
Net Patient Revenue(NPR):			
Regulated Services	819,239,930	765,351,210	732,145,727
Unregulated Services	12,636,812	11,247,170	11,089,935
TOTAL	831,876,742	776,598,380	743,235,662
Other Operating Revenue:			
Regulated Services	19,191,128	22,760,295	17,125,479
Unregulated Services	26,293,982	22,910,504	22,865,520
TOTAL	45,485,110	45,670,799	39,990,999
Net Operating Revenue(NOR)			
Regulated Services	838,431,058	788,111,505	749,271,206
Unregulated Services	38,930,794	34,157,674	33,955,455
Total	877,361,852	822,269,179	783,226,661
Total Operating Expenses:			
Regulated Services	760,178,731	774,992,564	707,064,558
Total	813,799,400	819,155,601	753,299,238
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	35,291	33,724	34,164
Total	35,803	34,156	34,651
NPR per EIPA :			
Regulated Services	23,213.99	22,694.50	21,430.54
Total	23,234.64	22,736.52	21,449.35
NOR per EIPA :			
Regulated Services	23,757.79	23,369.40	21,931.82
Total	24,505.05	24,073.63	22,603.47
Operating Expenses per EIPA :			
Regulated Services	21,540.43	22,980.39	20,696.39
Total	22,729.73	23,982.47	21,739.78
Net Operating Profit(Loss):			
Regulated Services	78,252,327	13,118,941	42,206,648
Unregulated Services	-14,689,875	-10,005,363	-12,279,225
Total	63,562,452	3,113,578	29,927,423
Total Non-Operating Profit(Loss):	-55,439,000	-59,345,000	9,060,000
Non-Operating Revenue	-55,439,000	-59,345,000	9,060,000
Non-Operating Expenses	0	0	0
Total Excess Profit	8,123,452	-56,231,422	38,987,423
% Change in NPR per EIPA - Regulated	2.29	5.90	9.72
% Change in NOR per EIPA - Regulated	1.66	6.55	9.15
% Change in Oper. Expense per EIPA- Regulated	-6.27	11.04	11.75
% Change in Net Operating Profit- Regulated	496.48	-68.92	-19.27
% Net Operating Profit of Regulated NOR	9.33	1.66	5.63
% Change in Net Operating Profit- Total	1,941.46	-89.60	-16.23
% Net Total Operating Profit of Total NOR	7.24	0.38	3.82
% Change in Total Excess Profit	114.45	-244.23	18.58
% Total Excess Profit of Total Revenue	0.99	-7.37	4.92

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

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Upper Chesapeake Medical Center

FISCAL YEAR ENDING	December 2009	December 2008	December 2007
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Gross Patient Revenue:			
Regulated Services	219,562,700	196,899,000	169,024,300
Unregulated Services	118,800	97,400	96,000
TOTAL	219,681,500	196,996,400	169,120,300
Net Patient Revenue(NPR):			
Regulated Services	187,017,300	170,264,950	146,891,259
Unregulated Services	107,000	85,400	72,800
TOTAL	187,124,300	170,350,350	146,964,059
Other Operating Revenue:			
Regulated Services	888,100	329,251	209,428
Unregulated Services	2,368,200	2,536,435	2,349,500
TOTAL	3,256,300	2,865,686	2,558,928
Net Operating Revenue(NOR)			
Regulated Services	187,905,400	170,594,201	147,100,687
Unregulated Services	2,475,200	2,621,835	2,422,300
Total	190,380,600	173,216,036	149,522,987
Total Operating Expenses:			
Regulated Services	171,205,099	164,803,083	143,333,188
Total	177,257,000	169,677,231	145,021,377
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	24,221	23,768	20,240
Total	24,234	23,780	20,252
NPR per EIPA :			
Regulated Services	7,721.19	7,163.54	7,257.31
Total	7,721.43	7,163.59	7,256.78
NOR per EIPA :			
Regulated Services	7,757.86	7,177.39	7,267.66
Total	7,855.80	7,284.10	7,383.14
Operating Expenses per EIPA :			
Regulated Services	7,068.37	6,933.74	7,081.52
Total	7,314.27	7,135.28	7,160.86
Net Operating Profit(Loss):			
Regulated Services	16,700,301	5,791,118	3,767,499
Unregulated Services	-3,576,701	-2,252,313	734,111
Total	13,123,600	3,538,805	4,501,610
Total Non-Operating Profit(Loss):	23,477,000	-49,736,000	-6,315,000
Non-Operating Revenue	23,477,000	1,036,000	-214,000
Non-Operating Expenses	0	50,772,000	6,101,000
Total Excess Profit	36,600,600	-46,197,195	-1,813,390
% Change in NPR per EIPA - Regulated	7.78	-1.29	3.35
% Change in NOR per EIPA - Regulated	8.09	-1.24	1.30
% Change in Oper. Expense per EIPA- Regulated	1.94	-2.09	5.34
% Change in Net Operating Profit- Regulated	188.38	53.71	-57.03
% Net Operating Profit of Regulated NOR	8.89	3.39	2.56
% Change in Net Operating Profit- Total	270.85	-21.39	-52.41
% Net Total Operating Profit of Total NOR	6.89	2.04	3.01
% Change in Total Excess Profit	179.23	-2,447.56	-114.72
% Total Excess Profit of Total Revenue	17.11	-26.51	-1.21

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2007 TO 2009

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Washington Adventist Hospital

FISCAL YEAR ENDING	December 2009	December 2008	December 2007
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Gross Patient Revenue:			
Regulated Services	284,247,984	279,418,776	259,383,175
Unregulated Services	530,141	553,548	433,051
TOTAL	284,778,125	279,972,324	259,816,226
Net Patient Revenue(NPR):			
Regulated Services	233,793,878	227,431,160	218,752,469
Unregulated Services	526,645	549,800	428,985
TOTAL	234,320,523	227,980,960	219,181,454
Other Operating Revenue:			
Regulated Services	2,567,600	2,165,649	1,828,165
Unregulated Services	2,683,287	3,328,704	3,818,451
TOTAL	5,250,887	5,494,353	5,646,616
Net Operating Revenue(NOR)			
Regulated Services	236,361,478	229,596,810	220,580,634
Unregulated Services	3,209,932	3,878,504	4,247,436
Total	239,571,410	233,475,314	224,828,070
Total Operating Expenses:			
Regulated Services	236,950,644	229,896,023	225,792,348
Total	241,160,143	234,379,490	231,640,767
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	23,034	22,570	22,718
Total	23,040	22,573	22,711
NPR per EIPA :			
Regulated Services	10,149.91	10,076.55	9,629.08
Total	10,169.95	10,099.55	9,650.69
NOR per EIPA :			
Regulated Services	10,261.38	10,172.50	9,709.55
Total	10,397.85	10,342.95	9,899.31
Operating Expenses per EIPA :			
Regulated Services	10,286.96	10,185.76	9,938.96
Total	10,466.80	10,383.01	10,199.28
Net Operating Profit(Loss):			
Regulated Services	-589,166	-299,213	-5,211,713
Unregulated Services	-999,567	-604,963	-1,600,983
Total	-1,588,733	-904,176	-6,812,697
Total Non-Operating Profit(Loss):	-71,203	-1,526,529	2,336,023
Non-Operating Revenue	-71,203	-1,526,529	2,336,023
Non-Operating Expenses	0	0	0
Total Excess Profit	-1,659,936	-2,430,705	-4,476,674
% Change in NPR per EIPA - Regulated	0.73	4.65	-1.15
% Change in NOR per EIPA - Regulated	0.87	4.77	-1.03
% Change in Oper. Expense per EIPA- Regulated	0.99	2.48	3.06
% Change in Net Operating Profit- Regulated	-96.90	94.26	-241.60
% Net Operating Profit of Regulated NOR	-0.25	-0.13	-2.36
% Change in Net Operating Profit- Total	-75.71	86.73	-387.39
% Net Total Operating Profit of Total NOR	-0.66	-0.39	-3.03
% Change in Total Excess Profit	31.71	45.70	-229.05
% Total Excess Profit of Total Revenue	-0.69	-1.05	-1.97

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2007 TO 2009

Washington County Hospital

FISCAL YEAR ENDING	June 2009	June 2008	June 2007
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Gross Patient Revenue:			
Regulated Services	243,018,300	229,868,300	206,966,700
Unregulated Services	41,566,400	48,088,000	44,036,300
TOTAL	284,584,700	277,956,300	251,003,000
Net Patient Revenue(NPR):			
Regulated Services	203,634,400	194,093,600	175,218,800
Unregulated Services	27,231,200	29,655,300	28,892,400
TOTAL	230,865,600	223,748,900	204,111,200
Other Operating Revenue:			
Regulated Services	1,961,400	855,900	1,841,000
Unregulated Services	2,252,200	1,880,900	1,782,600
TOTAL	4,213,600	2,736,800	3,623,600
Net Operating Revenue(NOR)			
Regulated Services	205,595,800	194,949,500	177,059,800
Unregulated Services	29,483,400	31,536,200	30,675,000
Total	235,079,200	226,485,700	207,734,800
Total Operating Expenses:			
Regulated Services	200,960,847	185,543,944	171,175,839
Total	231,305,500	218,839,600	203,255,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	24,851	24,077	22,989
Total	29,102	29,114	27,880
NPR per EIPA :			
Regulated Services	8,194.10	8,061.35	7,621.96
Total	7,932.99	7,685.29	7,321.06
NOR per EIPA :			
Regulated Services	8,273.02	8,096.90	7,702.04
Total	8,077.77	7,779.29	7,451.04
Operating Expenses per EIPA :			
Regulated Services	8,086.52	7,706.25	7,446.09
Total	7,948.10	7,516.66	7,290.35
Net Operating Profit(Loss):			
Regulated Services	4,634,953	9,405,556	5,883,961
Unregulated Services	-861,253	-1,759,456	-1,404,161
Total	3,773,700	7,646,100	4,479,800
Total Non-Operating Profit(Loss):	-4,587,500	971,600	1,971,600
Non-Operating Revenue	-4,440,000	1,112,000	2,317,800
Non-Operating Expenses	147,500	140,400	346,200
Total Excess Profit	-813,800	8,617,700	6,451,400
% Change in NPR per EIPA - Regulated	1.65	5.76	7.56
% Change in NOR per EIPA - Regulated	2.18	5.13	6.68
% Change in Oper. Expense per EIPA- Regulated	4.93	3.49	7.50
% Change in Net Operating Profit- Regulated	-50.72	59.85	-12.05
% Net Operating Profit of Regulated NOR	2.25	4.82	3.32
% Change in Net Operating Profit- Total	-50.65	70.68	-5.15
% Net Total Operating Profit of Total NOR	1.61	3.38	2.16
% Change in Total Excess Profit	-109.44	33.58	-0.15
% Total Excess Profit of Total Revenue	-0.35	3.79	3.07

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2009-2007

ALL SPECIALTY HOSPITALS

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	372,903,294	362,312,774	341,654,608
Net Patient Revenue (NPR)	301,960,072	296,493,374	282,523,345
Other Operating Revenue	2,627,858	4,821,747	4,993,614
Net Operating Revenue (NOR)	304,587,930	301,315,121	287,516,959
Operating Expenses	301,934,610	290,868,527	282,938,600
Inpatient Admissions (IPAs)	16,659	16,212	16,568
Equivalent Inpatient Admissions (EIPAs)	18,044	17,616	18,063
NPR per EIPA	16,734.67	16,830.91	15,641.00
Operating Expenses per EIPA	16,733.25	16,511.61	15,663.99
Net Operating Profit (Loss)	2,653,320	10,446,594	4,578,359
Total Non-Operating Profit (Loss)	(11,965,618)	(3,608,330)	15,533,922
Total Excess Profits (Loss)	(9,312,298)	6,838,264	20,112,281
% Change in NPR per EIPA	(0.57)	7.61	4.07
% Change in Cost per EIPA	1.34	5.41	4.13

Adventist Behavioral Health-Rockville

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	26,353,500	24,214,800	23,548,000
Net Patient Revenue (NPR)	20,491,700	17,174,100	16,944,200
Other Operating Revenue	139,100	861,900	764,000
Net Operating Revenue (NOR)	20,630,800	18,036,000	17,708,200
Operating Expenses	20,369,500	18,678,800	18,401,400
Inpatient Admissions (IPAs)	2,873	2,456	2,997
Equivalent Inpatient Admissions (EIPAs)	3,005	2,525	3,076
NPR per EIPA	6,819.23	6,801.62	5,508.52
Operating Expenses per EIPA	6,778.57	7,397.54	5,982.25
Net Operating Profit (Loss)	261,300	(642,800)	(693,200)
Total Non-Operating Profit (Loss)	(2,698,500)	(3,061,300)	169,200
Total Excess Profits (Loss)	(2,437,200)	(3,704,100)	(524,000)
% Change in NPR per EIPA	0.26	23.47	10.76
% Change in Cost per EIPA	(8.37)	23.66	12.64

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2009-2007

Adventist Rehab Hospital of MD.

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	39,847,200	32,000,100	23,898,800
Net Patient Revenue (NPR)	19,718,500	20,295,800	19,443,200
Other Operating Revenue	159,900	210,300	186,300
Net Operating Revenue (NOR)	19,878,400	20,506,100	19,629,500
Operating Expenses	25,366,100	24,220,600	21,824,600
Inpatient Admissions (IPAs)	1,642	1,669	1,571
Equivalent Inpatient Admissions (EIPAs)	1,642	1,669	1,571
NPR per EIPA	12,008.83	12,160.46	12,376.32
Operating Expenses per EIPA	15,448.29	14,512.04	13,892.17
Net Operating Profit (Loss)	(5,487,700)	(3,714,500)	(2,195,100)
Total Non-Operating Profit (Loss)	6,041,700	4,485,800	3,267,200
Total Excess Profits (Loss)	554,000	771,300	1,072,100
% Change in NPR per EIPA	(1.25)	(1.74)	(11.76)
% Change in Cost per EIPA	6.45	4.46	(7.05)

Brook Lane Health Services

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	10,468,100	9,586,000	9,288,400
Net Patient Revenue (NPR)	8,536,900	7,872,100	7,749,400
Other Operating Revenue	125,300	122,400	97,200
Net Operating Revenue (NOR)	8,662,200	7,994,500	7,846,600
Operating Expenses	10,415,300	10,363,600	10,153,200
Inpatient Admissions (IPAs)	1,458	1,307	1,322
Equivalent Inpatient Admissions (EIPAs)	1,577	1,423	1,429
NPR per EIPA	5,413.38	5,532.04	5,422.95
Operating Expenses per EIPA	6,604.50	7,282.92	7,105.11
Net Operating Profit (Loss)	(1,753,100)	(2,369,100)	(2,306,600)
Total Non-Operating Profit (Loss)	2,008,800	1,998,200	2,315,200
Total Excess Profits (Loss)	255,700	(370,900)	8,600
% Change in NPR per EIPA	(2.15)	2.01	0.42
% Change in Cost per EIPA	(9.32)	2.50	5.64

HEALTH SERVICES COST REVIEW COMMISSION
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Adventist Behavioral Health - Eastern Shore

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	3,026,700	3,148,300	2,842,250
Net Patient Revenue (NPR)	2,535,056	2,652,328	2,702,504
Other Operating Revenue	0	0	0
Net Operating Revenue (NOR)	2,535,056	2,652,328	2,702,504
Operating Expenses	1,066,731	1,277,815	3,521,872
Inpatient Admissions (IPAs)	309	296	260
Equivalent Inpatient Admissions (EIPAs)	309	296	286
NPR per EIPA	8,204.06	8,960.57	9,449.31
Operating Expenses per EIPA	3,452.20	4,316.94	12,314.24
Net Operating Profit (Loss)	1,468,325	1,374,513	(819,368)
Total Non-Operating Profit (Loss)	0	0	0
Total Excess Profits (Loss)	1,468,325	1,374,513	(819,368)
% Change in NPR per EIPA	(8.44)	(5.17)	21.69
% Change in Cost per EIPA	(20.03)	(64.94)	52.72

Levindale Hospital

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	67,857,200	64,469,200	61,976,500
Net Patient Revenue (NPR)	59,584,000	61,303,200	55,701,100
Other Operating Revenue	959,900	1,557,500	1,895,100
Net Operating Revenue (NOR)	60,543,900	62,860,700	57,596,200
Operating Expenses	51,485,600	49,975,400	49,009,500
Inpatient Admissions (IPAs)	749	721	696
Equivalent Inpatient Admissions (EIPAs)	774	742	724
NPR per EIPA	76,981.91	82,618.87	76,935.22
Operating Expenses per EIPA	66,518.86	67,352.29	67,692.68
Net Operating Profit (Loss)	9,058,300	12,885,300	8,586,700
Total Non-Operating Profit (Loss)	(9,677,900)	(6,797,600)	497,000
Total Excess Profits (Loss)	(619,600)	6,087,700	9,083,700
% Change in NPR per EIPA	(6.82)	7.39	10.65
% Change in Cost per EIPA	(1.24)	(0.50)	10.06

* NOTE: FY 2005 Regulated Service Only

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Mt. Washington Pediatric Hospital

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	47,388,100	42,926,300	41,326,500
Net Patient Revenue (NPR)	42,414,800	38,456,300	37,125,900
Other Operating Revenue	178,000	146,000	189,000
Net Operating Revenue (NOR)	42,592,800	38,602,300	37,314,900
Operating Expenses	37,697,600	35,011,100	34,743,700
Inpatient Admissions (IPAs)	705	766	674
Equivalent Inpatient Admissions (EIPAs)	863	955	815
NPR per EIPA	49,148.09	40,268.38	45,553.25
Operating Expenses per EIPA	43,682.04	36,660.84	42,630.31
Net Operating Profit (Loss)	4,895,200	3,591,200	2,571,200
Total Non-Operating Profit (Loss)	(3,290,600)	(2,042,600)	(531,400)
Total Excess Profits (Loss)	1,604,600	1,548,600	2,039,800
% Change in NPR per EIPA	22.05	(11.60)	28.73
% Change in Cost per EIPA	19.15	(14.00)	21.69

Sheppard Pratt Hospital

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	110,846,600	112,116,000	107,203,600
Net Patient Revenue (NPR)	92,702,000	88,163,000	83,124,000
Other Operating Revenue	1,025,700	1,458,900	1,223,400
Net Operating Revenue (NOR)	93,727,700	89,621,900	84,347,400
Operating Expenses	93,897,000	88,496,900	85,399,000
Inpatient Admissions (IPAs)	7,953	7,938	7,873
Equivalent Inpatient Admissions (EIPAs)	8,812	8,843	8,898
NPR per EIPA	10,519.97	9,969.81	9,341.87
Operating Expenses per EIPA	10,655.58	10,007.57	9,597.55
Net Operating Profit (Loss)	(169,300)	1,125,000	(1,051,600)
Total Non-Operating Profit (Loss)	(1,704,900)	(534,800)	6,529,100
Total Excess Profits (Loss)	(1,874,200)	590,200	5,477,500
% Change in NPR per EIPA	5.52	6.72	1.48
% Change in Cost per EIPA	6.48	4.27	(1.20)

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St. Luke Institute

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	5,707,394	6,416,974	6,030,458
Net Patient Revenue (NPR)	5,345,816	6,103,446	5,686,441
Other Operating Revenue	110,458	141,647	125,614
Net Operating Revenue (NOR)	5,456,274	6,245,093	5,812,055
Operating Expenses	7,177,979	6,900,012	6,562,628
Inpatient Admissions (IPAs)	70	80	81
Equivalent Inpatient Admissions (EIPAs)	74	102	90
NPR per EIPA	72,240.76	59,837.71	63,182.68
Operating Expenses per EIPA	96,999.72	67,647.18	72,918.09
Net Operating Profit (Loss)	(1,721,705)	(654,919)	(750,573)
Total Non-Operating Profit (Loss)	(1,197,018)	2,445,670	2,172,622
Total Excess Profits (Loss)	(2,918,723)	1,790,751	1,422,049
% Change in NPR per EIPA	20.73	(5.29)	15.84
% Change in Cost per EIPA	43.39	(7.23)	20.03

University Specialty Hospital

FISCAL YEAR ENDING	YEAR 2009	YEAR 2008	YEAR 2007
Gross Patient Revenue	61,408,500	67,435,100	65,540,100
Net Patient Revenue (NPR)	50,631,300	54,473,100	54,046,600
Other Operating Revenue	(70,500)	323,100	513,000
Net Operating Revenue (NOR)	50,560,800	54,796,200	54,559,600
Operating Expenses	54,458,800	55,944,300	53,322,700
Inpatient Admissions (IPAs)	900	979	1,094
Equivalent Inpatient Admissions (EIPAs)	988	1,061	1,174
NPR per EIPA	51,246.26	51,341.28	46,036.29
Operating Expenses per EIPA	55,120.24	52,727.90	45,419.68
Net Operating Profit (Loss)	(3,898,000)	(1,148,100)	1,236,900
Total Non-Operating Profit (Loss)	(1,447,200)	(101,700)	1,115,000
Total Excess Profits (Loss)	(5,345,200)	(1,249,800)	2,351,900
% Change in NPR per EIPA	(0.19)	11.52	8.73
% Change in Cost per EIPA	4.54	16.09	12.77