## INPATIENTS AND PATIENT DAYS

### SCHEDULE V1

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

<table>
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<tr>
<th>REPORTING SCHEDULE</th>
<th>CENTER</th>
<th>ADMISSIONS</th>
<th>PATIENT DAYS</th>
<th>INTRA-HOSPITAL TRANSFERS IN</th>
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# Equivalent Inpatient Days and Admissions

**Institution Name:** CalvertHealth Medical Center  
**Institution Number:** 210039  
**Base Year:** 6/30/2018

## Equivalent Inpatient Days (EIPDs)

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## Equivalent Inpatient Admissions (EIPAs)

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### BASE YEAR DATA

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| B | ALLOCATIONS TO AUX. ENT. &amp; UNREG. SERVICES RECORDS | $(300.12) | | $403.68 | | | | | |
| C | BASE YEAR EXP. - ADJ. A + B | $985.30 | $324.70 | $992.10 | $2,302.10 | $10,899.18 | $1,865.00 | $2,477.53 | $17,543.82 |</p>
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**B TOTALS**  
|                     |      | 39.3   | 71.5   | 605.7  | 716.5  | B         |

**Reporting Schedule**

| C | Cost Center Schedule |      | F1 | C13 | UA | D1 - D56 | P2A - P2G | P4A - P5I |      |
# GENERAL SERVICE CENTERS

## SCHEDULE C

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

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### Auxiliary Enterprises

**Institution Name:** CalvertHealth Medical Center  
**Base Year:** 6/30/2018  
**Institution Number:** 210039  
**Budget Year:** 6/30/2019

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|  | BASE YEAR |  |  |  |  |
|-------------------------------|-----------|-----------|-----------|-----------|
| **Patient Telephones -6615** | 5610      |  |  |  |
| **Source** | **Wages, Salaries & Fringe Benefits** | **Other Expenses** | **Total Expenses** | **Revenue** |
| **Per Unit** |  |  |  |  |
| **Base Year Data** |  |  |  |  |
| B | BASE YEAR EXPENSES RECORDS | 19.8 | 19.8 | XXXXX | B |
| C | ALLOCATION FROM CAFETERIA, PARKING, ETC. SCH GAC | XXXXX | XXXXX | XXXXX | C |
| D | ALLOCATION FROM GENERAL SERVICE CENTER  | XXXXX | XXXXX | XXXXX | D |
| E | COL 5 COST CENTER COL 6 CODE  | XXXXX | XXXXX | XXXXX | E |
| F |  |  |  |  |
| G | BASE YEAR ADJUSTED EXPENSES B+C+D+E+F | 19.8 | 19.8 | 0.12375 | G |

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<td>BUDGET YR HOURS/2080 BUDGET</td>
<td>XXXXX</td>
<td>XXXXX</td>
<td>XXXXX</td>
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</tbody>
</table>
### Auxiliary Enterprises

**Institution Name:** CalvertHealth Medical Center  
**Base Year:** 6/30/2018  
**Institution Number:** 210039  
**Budget Year:** 6/30/2019

#### Volume Data

<table>
<thead>
<tr>
<th>Volume Data</th>
<th>Base Year Units</th>
<th>Budget Year Units</th>
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<tbody>
<tr>
<td>A Meals</td>
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#### CAFeteria - 6320

<table>
<thead>
<tr>
<th>Source</th>
<th>Wages, Salaries &amp; Fringe Benefits</th>
<th>Other Expenses</th>
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<tbody>
<tr>
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#### CAFeteria - 5320

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<td>XXXXX</td>
<td>C</td>
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<tr>
<td>Allocation from General Service Center</td>
<td>XXXXX</td>
<td>XXXXX</td>
<td>XXXXX</td>
<td>XXXXX</td>
<td>D</td>
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<tr>
<td><strong>Col. 2</strong></td>
<td><strong>Col. 3</strong></td>
<td><strong>Col. 4</strong></td>
<td><strong>Col. 5</strong></td>
<td><strong>Cost Center</strong></td>
<td><strong>Code</strong></td>
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<tr>
<td>D1 Depreciation &amp; Amortization</td>
<td>OEP</td>
<td>XXXXX</td>
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<td>226.6</td>
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<tr>
<td>D2 General Accounting</td>
<td>FS</td>
<td>5.1</td>
<td>0.5</td>
<td>5.6</td>
<td>XXXXX</td>
</tr>
<tr>
<td>D3 Housekeeping</td>
<td>PKP</td>
<td>36.6</td>
<td>10.2</td>
<td>46.8</td>
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<td>D4 Hospital Administration</td>
<td>MGT</td>
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<td>10.6</td>
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<td>D5 Plant Operations</td>
<td>POP</td>
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<td>05.1</td>
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<td>D6 Purchasing &amp; Stores</td>
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<td>0.0</td>
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</tr>
<tr>
<td>D7</td>
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<td>D12</td>
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<td></td>
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</tr>
<tr>
<td>E Capital Facilities Allowance</td>
<td>SCH H3</td>
<td></td>
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</tr>
<tr>
<td>F Donated Services &amp; Commodities</td>
<td>RECORDS</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>G Base Year Adjusted Expenses</td>
<td>B+F+D+E+F</td>
<td>1,479.1</td>
<td>1,299.6</td>
<td>2,738.6</td>
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#### Base Year Profit (Loss)

<table>
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<th>569.9</th>
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<tbody>
<tr>
<td>Profit (Loss) I</td>
<td>H-G</td>
<td>XXXXX</td>
<td>XXXXX</td>
<td>(2,168.6)</td>
<td>XXXXX</td>
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<tr>
<td>Amount Treated As Fringe J</td>
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<td>XXXXX</td>
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<tr>
<td>Amount Treated As Ofc K</td>
<td>I-J</td>
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<td>XXXXX</td>
<td>(0.0)</td>
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#### Budget Year Data

<table>
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<tr>
<td>Miscellaneous Adjustments</td>
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<td>M</td>
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<td>1,299.6</td>
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#### Budget Year Profit (Loss)

<table>
<thead>
<tr>
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<th>XXXXX</th>
<th>XXXXX</th>
<th>O</th>
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</thead>
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<tr>
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<td>XXXXX</td>
<td>XXXXX</td>
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<td>XXXXX</td>
<td>XXXXX</td>
<td>Q</td>
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<tr>
<td>Profit (Loss) R</td>
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#### FTE Data

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<thead>
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<th>Base Yr Hours Worked/Budget</th>
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<th>27.9</th>
<th>S</th>
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<tr>
<td>Budget Yr Hours/Budget T</td>
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<td></td>
<td></td>
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### Auxiliary Enterprises

**Institution Name:** CalvertHealth Medical Center  
**Base Year:** 6/30/2018  
**Institution Number:** 210039  
**Budget Year:** 6/30/2019

<table>
<thead>
<tr>
<th>Volume Data</th>
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<th>Budget Year Units</th>
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<td><strong>A SQ. FEET</strong></td>
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<td><strong>COL. 2</strong></td>
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**Day Care Recreation Areas**

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<th>Total Expenses</th>
<th>Revenue Per Unit</th>
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**Base Year Data**

<table>
<thead>
<tr>
<th>E BASE YEAR EXPENSES</th>
<th>RECORDS</th>
<th>XXXXX</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1 Appreciation &amp; Amortization</td>
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<tr>
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<td>D2</td>
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<tr>
<td>D3</td>
<td>XXXXX</td>
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<tr>
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<td>XXXXX</td>
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<td>XXXXX</td>
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<tr>
<td>D7</td>
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<td>D8</td>
<td>XXXXX</td>
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<tr>
<td>D9</td>
<td>XXXXX</td>
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<td>D10</td>
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**Base Year Profit (Loss)**

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<th>XXXXX</th>
<th>XXXXX</th>
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<tbody>
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<td>XXXXX</td>
<td>XXXXX</td>
<td>(0.6)</td>
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**Budget Year Data**

<table>
<thead>
<tr>
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<th>L</th>
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**Budget Year Expenses**

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<tr>
<th>M MISCELLANEOUS ADJUSTMENTS</th>
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<th>M</th>
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**Budget Year Profit (Loss)**

<table>
<thead>
<tr>
<th>O BASE YEAR REVENUE</th>
<th>RECORDS</th>
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<th>XXXXX</th>
<th>XXXXX</th>
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</table>

**FTE Data**

<table>
<thead>
<tr>
<th>S BASE YR HOURS WORKED/2080</th>
<th>RECORDS</th>
<th>S</th>
</tr>
</thead>
<tbody>
<tr>
<td>T BUDGET YR HOURS/2080</td>
<td>BUDGET</td>
<td>T</td>
</tr>
</tbody>
</table>
INSTITUTION NAME: CalvertHealth Medical Center
BASE YEAR 6/30/2018
INSTITUTION NUMBER: 210039
BUDGET YEAR 6/30/2019

<table>
<thead>
<tr>
<th>VOLUME DATA</th>
<th>BASE YEAR UNITS</th>
<th>BUDGET YEAR UNITS</th>
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COMMUNITY HEALTH EDUCATION

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<thead>
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<tbody>
<tr>
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<td>585.9</td>
<td>251.8</td>
<td>837.7</td>
<td>XXXX</td>
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<tr>
<td>Alloc from Cafeteria, Parking, etc. SCH. OAC</td>
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<tr>
<td>Alloc from General Service Center COL. 5 COST CENTER COL. 6 CODE</td>
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<td>XXXX</td>
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<tr>
<td>COL. 1 COL. 2 COL. 3 COL. 4</td>
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<tr>
<td>D1</td>
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<td>D1</td>
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</tr>
<tr>
<td>D2</td>
<td>XXXX</td>
<td>D2</td>
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</tr>
<tr>
<td>D3</td>
<td>XXXX</td>
<td>D3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D4</td>
<td>XXXX</td>
<td>D4</td>
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</tr>
<tr>
<td>D5</td>
<td>XXXX</td>
<td>D5</td>
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</tr>
<tr>
<td>D6</td>
<td>XXXX</td>
<td>D6</td>
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<td></td>
</tr>
<tr>
<td>D7</td>
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<td>D9</td>
<td>XXXX</td>
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</tr>
<tr>
<td>D10</td>
<td>XXXX</td>
<td>D10</td>
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<td></td>
</tr>
<tr>
<td>D11</td>
<td>XXXX</td>
<td>D11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D12</td>
<td>XXXX</td>
<td>D12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Facilities Allowance SCH. H3</td>
<td>XXXX</td>
<td>E</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BASE YEAR ADJUSTED EXPENSES SCH. H2</td>
<td>585.9</td>
<td>251.8</td>
<td>837.7</td>
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</table>

BASE YEAR PROFIT (LOSS)

| G BASE YEAR REVENUE RECORDS | XXXX | XXXX | 80.6 | XXXX |
| H PROFIT (LOSS) G-F | XXXX | XXXX | (757.1) | XXXX |

BUDGET YEAR DATA

| I INFLATION | HSCRC | XXXX | 1 |
| J MISCELLANEOUS ADJUSTMENTS | BUDGET | XXXX | J |
| K BUDGET YEAR EXPENSES | F+H+J | XXXX | K |

BUDGET YEAR PROFIT (LOSS)

| L BASE YEAR REVENUE RECORDS | XXXX | XXXX | XXXX | L |
| M ADJUSTMENTS | BUDGET | XXXX | XXXX | M |
| N BASE YEAR REVENUE L+M | XXXX | XXXX | XXXX | N |
| O PROFIT (LOSS) N-K | XXXX | XXXX | XXXX | O |

FTE DATA

| P BASE YEAR HOURS WORKED/2080 RECORDS | 7.6 | P |
| Q BASE BUDGET HOURS/2080 BUDGET | | Q |
# ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING, ETC.)

**INSTITUTION NAME:** CalvertHealth Medical Center  
**INSTITUTION NUMBER:** 210039  
**BASE YEAR:** 6/30/2018

## Allocation of Cafeteria/Parking Expense

<table>
<thead>
<tr>
<th>LOSS PER FTE</th>
<th>SOURCE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>A GAIN (LOSS) TO BE ALLOC. AS FRINGE</td>
<td>SCH. E2,E7,E8,E9</td>
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<tr>
<td>B NUMBER OF FTE'S RECORDS</td>
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<tr>
<td>B1 LOSS PER FTE</td>
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## Allocation of Data Processing

### BASE YEAR DATA

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<tr>
<th>WAGES, SALARIES &amp; BENEFITS EXPENSES</th>
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<th>TOTAL</th>
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<td>3,746.70</td>
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<tr>
<td>DONATED SERVICES &amp; COMMODITIES</td>
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<td>3,746.70</td>
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<tr>
<td>FISCAL YEAR EXPENSES</td>
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<td>3,746.70</td>
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### DISTRIBUTIONS

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<th>B1*D1</th>
<th>Allocated Amount</th>
<th>Basis</th>
<th>WAGES, SALARIES &amp; BENEFITS EXPENSES</th>
<th>DATA PROCESSING ALLOC</th>
<th>DP ALLOCATION</th>
<th>Total Alloc. Expense</th>
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<tbody>
<tr>
<td>D1</td>
<td>DIETARY SERVICES</td>
<td>C 1</td>
<td>DTY</td>
<td>7.1</td>
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<td>6.17</td>
<td>8.31</td>
<td>14.47</td>
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<td>LAUNDRY &amp; LINEN</td>
<td>C 2</td>
<td>LL</td>
<td>1.4</td>
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<td>0.05%</td>
<td>3.07</td>
<td>6.14</td>
<td>9.21</td>
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<td>SOCIAL SERVICES</td>
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<td>SSB</td>
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<td>49.33</td>
<td>66.46</td>
<td>115.79</td>
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<td>PUR</td>
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<td>2.8</td>
<td>0.25%</td>
<td>2.04</td>
<td>4.08</td>
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<td>POP</td>
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<td>HRP</td>
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<td>11.63</td>
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<td>CSS</td>
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<td>42.90</td>
<td>66.60</td>
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<td>8</td>
<td>PHARMACY</td>
<td>C 8</td>
<td>PHM</td>
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<td>75.23</td>
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<td>FIS</td>
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<td>8.20%</td>
<td>228.17</td>
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<td>212.14</td>
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<td>88.80</td>
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## ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING, ETC.)

**Institution Name:** CalvertHealth Medical Center  
**Institution Number:** 210,039.00  
**Base Year:** 43,281.00

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## Allocation of Expenses (Cafeteria, Parking, Data Processing, etc.)

**Institution Name:** CalvertHealth Medical Center  
**Institution Number:** 210,039.00  
**Base Year:** 43,281.00

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**INSTITUTION NUMBER:** 210,039.00  
**BASE YEAR:** 43,281.00

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**INSTITUTION NAME:** CalvertHealth Medical Center  
**INSTITUTION NUMBER:** 210,039.00  
**BASE YEAR:** 43,281.00

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### DATA PROCESSING ALLOC

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<th>Total Alloc Expense</th>
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</table>

### INSTITUTION NUMBER: 210,039.00

### BASE YEAR: 1993
## Reconciliation of Base Year Expenses to Schedule RE

**Institution Name:** Calvert Health Medical Center  
**Base Year:** 6/30/2018  
**Institution Number:** 210039

<table>
<thead>
<tr>
<th>Expenses Sources</th>
<th>HSCRC Regulated</th>
<th>Unregulated</th>
<th>Total</th>
</tr>
</thead>
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<td>A Unassigned Expense</td>
<td>Sch. UA, Lines C-B. Col. 10</td>
<td>$17,543.82</td>
<td>$403.68</td>
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</table>
| B Physicians Part B Services | P2 Ln A Col 7  
| | UR6 Ln B Col 3 | $3,823.20 | $3,823.20 |
| C Physician Support Services | Sch. P3, Line A, Col. 7  
| | UR, Line B, Col. 3 | |
| D Resident, Intern Services | Sch. F4 & F5, Line A, Col. 7 | |
| E Overhead Expense Survey | Sch OES, Line P, Col. 1 | $37,093.40 | $1,593.89 | $38,687.30 |
| F Patient Care Centers | Schs D1 - D81, Line B, Col. 4 | $58,791.31 | XXXXX | $58,791.31 |
| G Auxiliary Enterprises | Schs E1 - 9, Line B, Col 3 | $2,169.29 | $172.91 | $2,342.20 |
| H Other Institution Programs | Schs F1 - F4, Line B, Col 3 | XXXXX | $837.70 | $837.70 |
| I Unregulated Services | Schs UR1-UR9 - line B & C | XXXXX | $10,282.00 | $10,282.00 |
| J Total Operating Expenses | A+B+C+D+E+F+G+H+I | $115,597.81 | $17,113.39 | $132,711.20 |
| K Non-Operating Expenses | XXXXX | $2,948.56 | $2,948.56 |
| L Total Expenses | J + K | $115,597.81 | $20,061.95 | $135,659.76 |
| M Total Operating Expenses - RE sch | Sch RE, Line S | $115,202.02 | $17,509.35 | $132,711.37 |
| N Non-Operating Expenses - RE sch | Sch RE, Line V | XXXXX | $2,948.56 | $2,948.56 |
| O Total Expenses - RE sch | M + N | $115,202.02 | $20,457.90 | $135,659.93 |
| P Reconciliation Amount | O - L | ($395.79) | $395.96 | $0.17 |
| Q Nomenclature | XXXXX | XXXXX | XXXXX | XXXXX |

**Additional Notes:**
- **Q1:** Other Non-Operating Expense - Audited Financial Statements  
- **Q2:** Rounding - ($0.1)  
- **Q3:** O/H Exp Alloc to Aux Ent - Schs E2, E7-E9 - $189.62  
- **Q4:** Aux Ent Loss Treated as Fringe - Sch OA - $206  
- **Q5:** Capital Facilities Allow to E, F, UR  
- **Q6:** Ineligible I&R  
- **Q7:**
### STATEMENT OF REVENUE AND EXPENSES

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

<table>
<thead>
<tr>
<th>COL 1</th>
<th>COL 2</th>
<th>COL 3</th>
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</thead>
<tbody>
<tr>
<td>Regulated</td>
<td>Unregulated</td>
<td>Total</td>
</tr>
<tr>
<td><strong>Operating Revenues:</strong></td>
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<tr>
<td>A Gross Revenues from Daily Hospital Services</td>
<td>xxxx</td>
<td>xxxx</td>
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<tr>
<td>B Gross Revenues from Ambulatory Services</td>
<td>27,815.90</td>
<td>3,080.75</td>
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<tr>
<td>C Gross Revenues from Inpatient Ancillary Services</td>
<td>26,873.80</td>
<td>6,530.53</td>
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<tr>
<td>D Gross Revenues from Outpatient Ancillary Services</td>
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<td>41,051.90</td>
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<tr>
<td>E Gross Patient Revenues</td>
<td>149,987.80</td>
<td>14,796.57</td>
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<td><strong>Deductions from Revenues:</strong></td>
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<tr>
<td>F Provision for Bad Debts</td>
<td>490.03</td>
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<tr>
<td>G Charity/Uncompensated Care</td>
<td>5,232.87</td>
<td>314.16</td>
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<tr>
<td>H Contractual Adjustments</td>
<td>11,394.41</td>
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<td>H1 Uncompensated Care Fund Payments</td>
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<tr>
<td>H2 Denials</td>
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<td>158.63</td>
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<tr>
<td>I Total Deductions from Revenues</td>
<td>21,711.75</td>
<td>8,519.05</td>
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<tr>
<td>J Non-Operating Revenues</td>
<td>2,548.47</td>
<td>1,429.12</td>
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<tr>
<td><strong>Net Operating Revenues</strong></td>
<td>130,824.51</td>
<td>7,706.64</td>
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</table>

| N Salaries, Wages, and Employee Benefits | 61,297.56 | 8,735.67 | 70,033.23 |
| O Professional Fees | 6,482.54 | 6,482.54 | |
| P Supplies | 20,688.33 | 20,688.33 | |
| Q Depreciation/Amortization, Leases/Rentals | 12,764.21 | 300.12 | 13,064.33 |
| R Other Expenses | 13,969.39 | 8,473.56 | 22,442.95 |
| S Total Operating Expenses | 115,202.02 | 17,509.35 | 132,711.37 |
| T Excess (Deficit) Operating Revenues Over Operating Expenses | 15,622.49 | -9,802.70 | 5,819.79 |
| U Excess (Deficit) Net Operating Revenues | 15,622.49 | 720.10 | 16,342.59 |
| V Non-Operating Revenues | 2,548.47 | 2,948.56 | 5,497.03 |
| W Excess (Deficit) Non-Operating Revenues Over Expenses | 15,622.49 | -12,031.16 | 3,591.33 |
| X Operating Expenses per EIPD | 2.82 | xxxx | xxxx |
| Y Operating Expenses per EIPA | 9.71 | xxxx | xxxx |
| Z Working Capital Ratio = Current Assets/Current Liabilities | 1.3 | xxxx | xxxx |

**AA Admissions**  
**BB EIPA’s**
<table>
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<th>COL 2</th>
<th>COL 3</th>
<th>COL 4</th>
<th>COL 5</th>
<th>COL 6</th>
<th>COL 7</th>
<th>COL 8</th>
<th>COL 9</th>
<th>COL 10</th>
<th>COL 11</th>
<th>COL 12</th>
<th>COL 13</th>
<th>TOTAL ALLOCATED Expenses</th>
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<tbody>
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<td>585.29</td>
<td>80.63</td>
<td>86.94</td>
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<td>5,804.46</td>
<td>5,010.61</td>
<td>13,800.94</td>
<td>7,437.25</td>
<td>2,938.57</td>
<td>8,431.35</td>
<td>542.72</td>
<td>2,302.10</td>
<td>21,651.98</td>
<td>35,452.92</td>
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</table>

**OVERHEAD EXPENSE APPORTIONMENT**

**INSTITUTION NAME:** CalvertHealth Medical Center

**BASE YEAR:** 6/30/2018

**ALLOCATED CENTERS**

<table>
<thead>
<tr>
<th>DIETARY MEALS</th>
<th>LAUNDRY &amp; LINEN</th>
<th>PURCHASING STORES</th>
<th>OTHER EXPENSED</th>
<th>HOUSEKEEPING</th>
<th>PHARMACY</th>
<th>SOC. SERV.</th>
<th>OPERATIONS NET SQ FT</th>
<th>TOTAL PATIENT CARE OVERHEAD</th>
<th>INPATIENT PAC, MRR FILM/GMT/NAD</th>
<th>AMBULATORY PAC, MRR FILM/GMT/NAD</th>
<th>OUTPATIENT PAC, MRR FILM/GMT/NAD</th>
<th>MEDI STAFF EDU</th>
<th>UNASSIGNED EXPENSES</th>
<th>TOTAL OVERHEAD</th>
</tr>
</thead>
<tbody>
<tr>
<td>585.29</td>
<td>80.63</td>
<td>86.94</td>
<td>2,233.00</td>
<td>5,804.46</td>
<td>5,010.61</td>
<td>13,800.94</td>
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<td>542.72</td>
<td>2,302.10</td>
<td>21,651.98</td>
<td>35,452.92</td>
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**REVENUE CENTERS**

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<tr>
<th>LENGTH OF STAY</th>
<th>INCOME CENTER</th>
<th>MEALS</th>
<th>POUNDS</th>
<th>OTHER EXPENSES</th>
<th>SCHD # OF HOURS</th>
<th>SOC. SERV. OAO NET</th>
<th>SQ FEET</th>
<th>FIS, MGT, NAD</th>
<th>OVERHEAD</th>
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<tbody>
<tr>
<td>585.29</td>
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<td>86.94</td>
<td>2,233.00</td>
<td>5,804.46</td>
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<td>13,800.94</td>
<td>7,437.25</td>
<td>2,938.57</td>
<td>8,431.35</td>
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</tbody>
</table>
### OVERHEAD STATISTICAL APPORTIONMENT

#### INSTITUTION NAME: Calaveras Health Medical Center  
#### INSTITUTION NUMBER: 200135  
#### BASE YEAR: 6/30/2018

**A. Overhead Expenses**

<table>
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<tr>
<th>COL 1</th>
<th>COL 2</th>
<th>COL 3</th>
<th>COL 4</th>
<th>COL 5</th>
<th>COL 6</th>
<th>COL 7</th>
<th>COL 7 A</th>
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<th>COL 10</th>
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<td>8,431.35</td>
<td>542.72</td>
<td>2,302.10</td>
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</table>

**B. Unit Cost**

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<td>0.000060</td>
<td>0.000037</td>
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<tr>
<td>0.000053</td>
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**Statistical Apportionment**

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<thead>
<tr>
<th>D1</th>
<th>Med/Surg Acute MSG</th>
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<tr>
<td>12,071</td>
<td>60,080.79</td>
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</table>

<table>
<thead>
<tr>
<th>D3</th>
<th>Psychiatric Acute PSY</th>
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<tbody>
<tr>
<td>10,435</td>
<td>9,831.48</td>
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</table>

<table>
<thead>
<tr>
<th>D8</th>
<th>Pediatric Intensive Care PIC</th>
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<tbody>
<tr>
<td>182,259.26</td>
<td>367.61</td>
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</table>

<table>
<thead>
<tr>
<th>E3</th>
<th>Clinical Services CL</th>
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<tbody>
<tr>
<td>4,051.75</td>
<td>114.35</td>
</tr>
</tbody>
</table>

**Total**

```plaintext
A. Overhead Expenses               585.3 80.63 86.94 2,233.00 5,884.46 5,010.61 7,437.25 2,938.57 8,431.35 542.72 2,302.10

B. Units                          68,146 643,094.44 8,417.14 81,315.36 5,804.46 2,938.57 8,431.35 542.72 2,302.10

C. Statistical Appportionment     585.3 80.63 86.94 2,233.00 5,884.46 5,010.61 7,437.25 2,938.57 8,431.35 542.72 2,302.10

D. Total                          68,146 643,094.44 8,417.14 81,315.36 5,804.46 2,938.57 8,431.35 542.72 2,302.10
```

**Unassigned Expenses**

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<th>Med/Surg Acute MSG</th>
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</thead>
<tbody>
<tr>
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<td>60,080.79</td>
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<td>9,831.48</td>
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</table>

**Total**

```plaintext
A. Overhead Expenses               585.3 80.63 86.94 2,233.00 5,884.46 5,010.61 7,437.25 2,938.57 8,431.35 542.72 2,302.10

B. Units                          68,146 643,094.44 8,417.14 81,315.36 5,804.46 2,938.57 8,431.35 542.72 2,302.10

C. Statistical Appportionment     585.3 80.63 86.94 2,233.00 5,884.46 5,010.61 7,437.25 2,938.57 8,431.35 542.72 2,302.10

D. Total                          68,146 643,094.44 8,417.14 81,315.36 5,804.46 2,938.57 8,431.35 542.72 2,302.10
```

**Unit Cost**

<table>
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<tr>
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<th>-acre</th>
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<tbody>
<tr>
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<tr>
<td>0.000060</td>
<td>0.000037</td>
</tr>
<tr>
<td>0.000053</td>
<td>0.000031</td>
</tr>
</tbody>
</table>

**Base Year** 6/30/2018

- **A. Overhead Expenses**
- **B. Units**
- **C. Statistical Appportionment**
- **D. Total**
- **Unassigned Expenses**

**Unit Cost Calculations**

<table>
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<th>DIETARY MEALS</th>
<th>LAUNDRY &amp; LINENS</th>
<th>PURCHASING STORES</th>
<th>OTHER EXPENSES</th>
<th>HOUSEKEEPING</th>
<th>CENTRAL SUPPLY</th>
<th>PHARMACY</th>
<th>SOC</th>
<th>SERV</th>
<th>OAMS</th>
<th>MEDICAL</th>
<th>STAFF</th>
<th>MGT</th>
<th>NURSE</th>
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<tbody>
<tr>
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<td>86.94</td>
<td>2,233.00</td>
<td>5,884.46</td>
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<td>542.72</td>
<td>2,302.10</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**Total**

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68,146 643,094.44 8,417.14 81,315.36 5,804.46 2,938.57 8,431.35 542.72 2,302.10
```

**Total**

```plaintext
68,146 643,094.44 8,417.14 81,315.36 5,804.46 2,938.57 8,431.35 542.72 2,302.10
```

**CHECK UNITS OK IF = 0**

---

**Units**

- **A. Overhead Expenses**
- **B. Units**
- **C. Statistical Appportionment**
- **D. Total**
- **Unassigned Expenses**

**Unit Cost**

<table>
<thead>
<tr>
<th>-acre</th>
<th>-acre</th>
</tr>
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<tbody>
<tr>
<td>0.000360</td>
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<tr>
<td>0.000060</td>
<td>0.000037</td>
</tr>
<tr>
<td>0.000053</td>
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## Departmental Equipment Allowance

**INSTITUTION NAME** CalvertHealth Medical Center  
**BASE YEAR** 6/30/2018  
**INSTITUTION NUMBER** 210039

<table>
<thead>
<tr>
<th>CENTER</th>
<th>Purchase Category</th>
<th>Cost Base Year Purchases</th>
<th># YRS</th>
<th>Cumulative Purchase Total</th>
<th>Depreciation Col. 3/Col. 2</th>
<th>Market Value Base Year Leases</th>
<th>Cumulative Leases Total</th>
<th>Lease Amortization Col. 6/Col. 2</th>
<th>Depr/Amort Total Col. 4 + Col. 7</th>
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<tr>
<td>H2 C</td>
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<tr>
<td>H2 D</td>
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<td>H2 E</td>
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**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

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H3A
# DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

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**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

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### THIRD PARTY DIFFERENTIAL

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

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### DIFFERENTIAL CALCULATION

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| P Payor Differential | 1 - (Col 3 O/N) | ///////////// | ///////////// | 0.0865 |
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**Institution Name:** CalvertHealth Medical Center  
**Institution Number:** 210039  
**Base Year:** 6/30/2018

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| B Total | | 9,318,720.78 | 64,507.30 | 13,800.94 | 21,651.98 | | | | | | |
## REVENUE CENTER RATE SUMMARY

**Institution:** CalvertHealth Medical Center  
**Institution Number:** 210039  
**Base Year:** 6/30/2018

### Summary Table

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BASE YEAR: 6/30/2018  
INSTITUTION NUMBER: 210039  

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**BASE YEAR PROFIT (LOSS)**

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**BUDGET YEAR DATA**

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**BUDGET YEAR PROFIT (LOSS)**

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**FTE DATA**

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### UNREGULATED SERVICES

**ECF1**

| INSTITUTION NAME: CalvertHealth Medical Center | BASE YEAR: 6/30/2018 |
| INSTITUTION NUMBER: 210039 | BUDGET YEAR: 6/30/2019 |

#### VOLUME DATA

| A | PATIENT DAYS | 1,618 |

#### BASE YEAR DATA

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#### BASE YEAR DATA

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<th>RECORDS</th>
<th>WAGES, SALARIES &amp; FRINGE BENEFITS</th>
<th>OTHER EXPENSES</th>
<th>TOTAL EXPENSES, REVENUES</th>
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#### BASE YEAR PROFIT (LOSS)

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<th>OTHER EXPENSES</th>
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#### BUDGET YEAR PROFIT (LOSS)

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<th>WAGES, SALARIES &amp; FRINGE BENEFITS</th>
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### Laboratory - Non Patient

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#### BASE YEAR DATA

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#### BASE YEAR PROFIT (LOSS)

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#### BUDGET YEAR DATA

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#### BUDGET YEAR PROFIT (LOSS)

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#### FTE DATA

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### Notes
- The table includes calculations for base year and budget year profits and losses, as well as adjustments and revenue records.
- The FTE data section provides the number of full-time equivalents for the budget year.
## UNREGULATED SERVICES

### INSTITUTION NAME:
CalvertHealth Medical Center

### INSTITUTION NUMBER:
210039

### BASE YEAR
6/30/2018

### BUDGET YEAR
6/30/2019

### VOLUME DATA
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### PHYSICIANS PART B SERVICES

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### BUDGET YEAR DATA

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### FTE DATA

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## UNREGULATED SERVICES

### UPB - Detail

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018

**INSTITUTION NUMBER:** 210039

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|      |                | 64.14 | 3,760.41 | 3,824.55 | 0.00 | 0.50 |
**UNREGULATED SERVICES**

**PSS UR 8**

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039  
**BUDGET YEAR:** 6/30/2019

| A | NUMBER OF FTES | 66,413 |

## PHYSICIAN SUPPORT SERVICES

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### INSTITUTION NAME:
CalvertHealth Medical Center

### BASE YEAR
6/30/2018

### INSTITUTION NUMBER:
210039

### BUDGET YEAR
6/30/2019

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CalvertHealth Medical Center

#### BASE YEAR
6/30/2018

#### BUDGET YEAR
6/30/2019

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**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039  
**BUDGET YEAR:** 6/30/2019

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</table>

#### BUDGET YEAR DATA

<table>
<thead>
<tr>
<th></th>
<th>BUDGET EXPENSES</th>
<th>COL. 1</th>
<th>COL. 2</th>
<th>COL. 3</th>
<th>COL. 4</th>
<th>REAL PROFIT (LOSS)</th>
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</thead>
<tbody>
<tr>
<td>I INFLATION</td>
<td>RECORDS</td>
<td>XXXXX</td>
<td>I</td>
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<tr>
<td>J MISCELLANEOUS</td>
<td>BUDGET</td>
<td>XXXXX</td>
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<tr>
<td>K BUDGET EXPENSES</td>
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#### BUDGET YEAR PROFIT (LOSS)

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<th>REAL PROFIT (LOSS)</th>
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<td>M ADJUSTMENTS</td>
<td>BUDGET</td>
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<td>XXXXX</td>
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<tr>
<td>N BUDGET YEAR REVENUE</td>
<td>XXXXX</td>
<td>XXXXX</td>
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<tr>
<td>O PROFIT (LOSS)</td>
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<td>XXXXX</td>
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#### FTE DATA

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<td>RECORDS</td>
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<td>Q BUDGET YEAR HOURS WORKED / 2080</td>
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### VOLUME DATA

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<tbody>
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### UNREGULATED SERVICES

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039  
**BUDGET YEAR:** 6/30/2019

<table>
<thead>
<tr>
<th>COLUMN</th>
<th>VOLUME</th>
<th>BASE YEAR</th>
<th>BUDGET YEAR</th>
<th>DATA</th>
<th>UNITS</th>
<th>COL. 1</th>
<th>COL. 2</th>
<th>COL. 3</th>
<th>COL. 4</th>
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### OUTPATIENT REHAB

<table>
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<tr>
<th>BUDGET YEAR</th>
<th>VOLUME</th>
<th>BASE YEAR</th>
<th>BUDGET YEAR</th>
<th>DATA</th>
<th>UNITS</th>
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<th>COL. 2</th>
<th>COL. 3</th>
<th>COL. 4</th>
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### BASE YEAR DATA

<table>
<thead>
<tr>
<th>ALLOCATION</th>
<th>SOURCE</th>
<th>WAGES, SALARIES &amp; FRINGE BENEFITS</th>
<th>OTHER EXPENSES</th>
<th>TOTAL EXPENSES, REVENUES</th>
<th>EXPENSE REVENUE PER UNIT</th>
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<tbody>
<tr>
<td></td>
<td>RECORDS</td>
<td>2,065.0</td>
<td>446.2</td>
<td>2,511.2</td>
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</tr>
<tr>
<td>C</td>
<td></td>
<td>76.9</td>
<td>XXXXX</td>
<td>76.9</td>
<td>XXXXX</td>
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<tr>
<td>D + E</td>
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<td>XXXXX</td>
<td>XXXXX</td>
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### BASE YEAR PROFIT (LOSS)

<table>
<thead>
<tr>
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<th>BASE YEAR REVENUE</th>
<th>BUDGET YEAR PROFIT (LOSS)</th>
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</thead>
<tbody>
<tr>
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<td>RECORDS</td>
<td></td>
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<td>XXXXX</td>
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### FTE DATA

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<th>BASE YEAR HOURS WORKED / 2080</th>
<th>BUDGET</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>RECORDS</td>
<td>27.6</td>
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<tr>
<td>VOLUME DATA</td>
<td>BASE YEAR UNITS</td>
<td>BUDGET YEAR UNITS</td>
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<td>A VISITS</td>
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### CONSOL & ELIMIN. ENTRIES

<table>
<thead>
<tr>
<th>BASE YEAR DATA</th>
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<th>COL 2</th>
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<th>COL 4</th>
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<tbody>
<tr>
<td>B BASE YEAR EXPENSES</td>
<td>RECORDS</td>
<td>(219.8)</td>
<td>(219.8)</td>
<td>XXXXX</td>
</tr>
<tr>
<td>C ALLOCATION FROM CAFETERIA, PARKING, ETC</td>
<td>COL 5</td>
<td>XXXXX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D ALLOCATION FROM GENERAL SERVICE CENTERS</td>
<td>COL 6</td>
<td>XXXXX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E COST CENTER</td>
<td>COL 7</td>
<td>XXXXX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F BASE YEAR EXPENSES</td>
<td>RECORDS</td>
<td>(219.8)</td>
<td>(219.8)</td>
<td>XXXXX</td>
</tr>
</tbody>
</table>

### BASE YEAR PROFIT (LOSS)

| BASE YEAR REVENUE | RECORDS | XXXXXX | (219.8) | XXXXX |
| PROFIT (LOSS) | 0.0 | XXXXX |

### BUDGET YEAR DATA

| INFLATION | RECORDS | XXXXX |
| MISCELLANEOUS | BUDGET | XXXXX |
| K BUDGET YEAR EXPENSES | XXXXX |

### BUDGET YEAR PROFIT (LOSS)

| ADJUSTMENTS | RECORDS | XXXXX | XXXXX | XXXXX |
| BUDGET YEAR REVENUE | XXXXX | XXXXX | XXXXX |
| PROFIT (LOSS) | XXXXX |

### FTE DATA

<p>| BASE YEAR HOURS WORKED / 2080 | RECORDS | XXXXX |
| BUDGET YEAR HOURS WORKED / 2080 | BUDGET | XXXXX |</p>
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<thead>
<tr>
<th>Schedule</th>
<th>Entity Name and Address</th>
<th>Nature of Service</th>
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<tbody>
<tr>
<td>UR-1</td>
<td>CalvertHealth Medical Center Clinics 100 Hospital Road Prince Frederick, MD 20678</td>
<td>FREE STANDING CLINIC SERVICES</td>
</tr>
<tr>
<td>UR-2</td>
<td>PRIVATE HOME SERVICES</td>
<td></td>
</tr>
<tr>
<td>UR-3</td>
<td>OUTPATIENT RENAL DIALYSIS</td>
<td></td>
</tr>
<tr>
<td>UR-4</td>
<td>CalvertHealth Transitional Care Unit 100 Hospital Road Prince Frederick, MD 20678</td>
<td>SKILLED NURSING CARE</td>
</tr>
<tr>
<td>UR-5</td>
<td>CalvertHealth Unregulated Laboratory Services 150 Hospital Road, Suite 204 Prince Frederick, MD 20678</td>
<td>LAB NON-PATIENT</td>
</tr>
<tr>
<td>UR-6</td>
<td>CalvertHealth Medical Center 100 Hospital Road Prince Frederick, MD 20678</td>
<td>PART B PHYSICIANS</td>
</tr>
<tr>
<td>UR-7</td>
<td>CERTIFIED NURSE ANESTHETISTS</td>
<td></td>
</tr>
<tr>
<td>UR-8</td>
<td>CalvertHealth Solomons Imaging Center 14090 H.G. Trueman Road Solomons, MD 20688</td>
<td>PHYSICIAN SUPPORT SERVICES</td>
</tr>
<tr>
<td>UR-9</td>
<td>CalvertHealth Urgent Care 100 Hospital Road Prince Frederick, MD 20678</td>
<td>URGENT CARE</td>
</tr>
<tr>
<td>UR-10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UR-11</td>
<td>CalvertHealth Medical Center Nurturing Necessities 100 Hospital Road Prince Frederick, MD 20678</td>
<td>NURTURING NECESSITIES</td>
</tr>
<tr>
<td>UR-12</td>
<td>CalvertHealth Foundation, Inc. 100 Hospital Road Prince Frederick, MD 20678</td>
<td>FOUNDATION</td>
</tr>
<tr>
<td>UR-13</td>
<td>CalvertHealth Outpatient Rehabilitation 100 Hospital Road Prince Frederick, MD 20678</td>
<td>OUTPATIENT REHAB</td>
</tr>
<tr>
<td>UR-14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UR-15</td>
<td></td>
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</tbody>
</table>
### ANNUAL COST SURVEY

**INSTITUTION NAME:** CalvertHealth Medica  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>COSTS</th>
<th>PERCENT</th>
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</thead>
<tbody>
<tr>
<td>A Salaries &amp; Wages</td>
<td>46,309.01</td>
<td>40.20%</td>
</tr>
<tr>
<td>B Fringe Benefits</td>
<td>14,988.54</td>
<td>13.01%</td>
</tr>
<tr>
<td>C Depreciation &amp; Amortization</td>
<td>10,899.20</td>
<td>9.46%</td>
</tr>
<tr>
<td>C1 Operating Leases</td>
<td>1,865.02</td>
<td>1.62%</td>
</tr>
<tr>
<td>D Interest Expense</td>
<td>2,477.55</td>
<td>2.15%</td>
</tr>
<tr>
<td>E Medical &amp; Surgical Supplies</td>
<td>9,743.79</td>
<td>8.46%</td>
</tr>
<tr>
<td>F IV Solutions and Pharmacy</td>
<td>7,771.65</td>
<td>6.75%</td>
</tr>
<tr>
<td>G Laundry, Linen, Uniforms</td>
<td>60.62</td>
<td>0.05%</td>
</tr>
<tr>
<td>H Films &amp; Solutions</td>
<td>2.63</td>
<td>0.00%</td>
</tr>
<tr>
<td>I Blood, Plamanate, Albumen</td>
<td>382.45</td>
<td>0.33%</td>
</tr>
<tr>
<td>J Contracted Services</td>
<td>10,741.27</td>
<td>9.32%</td>
</tr>
<tr>
<td>K Professional Fees</td>
<td>2,480.28</td>
<td>2.15%</td>
</tr>
<tr>
<td>L Agency Nurses</td>
<td>781.83</td>
<td>0.68%</td>
</tr>
<tr>
<td>M Malpractice Insurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N All Other Insurance</td>
<td>1,128.23</td>
<td>0.98%</td>
</tr>
<tr>
<td>O Telephone</td>
<td>436.45</td>
<td>0.38%</td>
</tr>
<tr>
<td>P Utilities &amp; Water</td>
<td>1,411.03</td>
<td>1.22%</td>
</tr>
<tr>
<td>Q Food</td>
<td>37.13</td>
<td>0.03%</td>
</tr>
<tr>
<td>R Printing, Office Supplies, Copying</td>
<td>913.11</td>
<td>0.79%</td>
</tr>
<tr>
<td>S Chemical, Solutions, Lubrication,</td>
<td>1,175.17</td>
<td>1.02%</td>
</tr>
<tr>
<td>T Other (Detail over 20% of supply)</td>
<td>1,597.06</td>
<td>1.39%</td>
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<tr>
<td>U Total</td>
<td>115,202.02</td>
<td>100.00%</td>
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### TRANSACTIONS WITH RELATED ENTITIES

**INSTITUTION NAME:** CalvertHealth Medical Center | **BASE YEAR:** 6/30/2018

**INSTITUTION NUMBER:** 210039

<table>
<thead>
<tr>
<th>No.</th>
<th>RELATED ENTITY</th>
<th>VALUE OF ASSET OR SERVICE PROVIDED TO THE HOSPITAL</th>
<th>VALUE OF ASSET OR SERVICE PROVIDED BY THE HOSPITAL</th>
<th>CATEGORY CODE</th>
<th>DESCRIPTION OF TRANSACTION</th>
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<tbody>
<tr>
<td>1</td>
<td>CalvertHealth Foundation, Inc.</td>
<td>219,774.00</td>
<td></td>
<td>J</td>
<td>Contributions to fund operating expenses and prp</td>
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<tr>
<td>2</td>
<td>CMH Holding Co.</td>
<td></td>
<td>206,412.00</td>
<td>A</td>
<td>Provide building services to Solomons Medical E</td>
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<tr>
<td>3</td>
<td>CMH Holding Co.</td>
<td></td>
<td>257,265.00</td>
<td>F</td>
<td>Leased office space.</td>
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<tr>
<td>4</td>
<td>CalvertHealth Medical Group, LLC</td>
<td></td>
<td>482,760.00</td>
<td>A</td>
<td>Provide support services.</td>
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<tr>
<td>5</td>
<td>CalvertHealth Medical Group, LLC</td>
<td></td>
<td>249,217.00</td>
<td>A</td>
<td>Provide EHR services.</td>
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<tr>
<td>6</td>
<td>CalvertHealth Medical Group, LLC</td>
<td></td>
<td>3,000,000.00</td>
<td>G</td>
<td>Equity transfers.</td>
</tr>
<tr>
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</tbody>
</table>
## SUPPLEMENTAL BIRTHS SCHEDULE

**INSTITUTION NAME:** CalvertHealth Medical Center  
**BASE YEAR:** 6/30/2018  
**INSTITUTION NUMBER:** 210039

### Admissions for EIPA Counts

<table>
<thead>
<tr>
<th></th>
<th>Admissions for EIPA Counts</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>Neonates not charged an Admission Charge</td>
</tr>
<tr>
<td>B</td>
<td>Admissions from monthly reports ADM revenue center</td>
</tr>
<tr>
<td>C</td>
<td>Total</td>
</tr>
</tbody>
</table>

### Cases for Charge Per Case (CPC) Calculations

<table>
<thead>
<tr>
<th></th>
<th>Cases for Charge Per Case (CPC) Calculations</th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td>Neonates not charged an Admission Charge</td>
</tr>
<tr>
<td>E</td>
<td>Births from monthly reports Nursery (NUR) revenue center</td>
</tr>
<tr>
<td>F</td>
<td>Sub-Total</td>
</tr>
<tr>
<td>G</td>
<td>Admissions from monthly reports ADM revenue center</td>
</tr>
<tr>
<td>H</td>
<td>Total</td>
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<tr>
<td>F</td>
<td>Sub-Total</td>
</tr>
<tr>
<td>G</td>
<td>Admissions from monthly reports ADM revenue center</td>
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<td>H</td>
<td>Total</td>
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<tr>
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</table>

Total: 648
| Account                          | E1 | E2 | E3 | E4 | E5 | E6 | E7 | E8 | E9 | F1 | F2 | F3 | F4 | UR 1 | UR 2 | UR 3 | UR 4 | UR 5 | UR 6 | UR 7 | UR 8 | UR 9 | UR 10 | Total Revenue | Total Deductions | Total Income | Total Non-Operating Income | Total Non-Operating Expenses | Total Net Income | Total Revenue | Total Income | Total Non-Operating Income | Total Non-Operating Expenses | Total Net Income |
|--------------------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|------|------|------|------|------|------|------|------|------|------|------|----------------|------------------|-------------|--------------------------|--------------------------|---------------------|-------------|-------------|--------------------------|--------------------------|-------------------|
## FY2018 SUPPLEMENTAL SCHEDULE - 1
### Summary of Other and Non-Operating Revenue

Hospital Name: CalvertHealth Medical Center  
Hospital Number: 210039

<table>
<thead>
<tr>
<th>Other Operating Revenue:</th>
<th>2018</th>
<th>HSCRC Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants/Federal Financial Awards</td>
<td>142.7</td>
<td>G / GR</td>
</tr>
<tr>
<td>Other</td>
<td>2,405.8</td>
<td>G / GR</td>
</tr>
<tr>
<td><strong>Total - RE Col 1, Line L</strong></td>
<td>2,548.5</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-Operating and Net Unregulated Revenue:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cafeteria</td>
<td>569.9</td>
<td>E 7</td>
</tr>
<tr>
<td>Community Health Education</td>
<td>80.6</td>
<td>F 4</td>
</tr>
<tr>
<td>FREE STANDING CLINIC SERVICES</td>
<td>(164.1)</td>
<td>UR 1</td>
</tr>
<tr>
<td>SKILLED NURSING CARE</td>
<td>427.2</td>
<td>UR 4</td>
</tr>
<tr>
<td>LAB NON-PATIENT</td>
<td>1,003.6</td>
<td>UR 5</td>
</tr>
<tr>
<td>PHYSICIAN SUPPORT SERVICES</td>
<td>(2.7)</td>
<td>UR 8</td>
</tr>
<tr>
<td>URGENT CARE</td>
<td>3,060.0</td>
<td>UR 9</td>
</tr>
<tr>
<td>NURTURING NECESSITIES</td>
<td>20.3</td>
<td>UR 11</td>
</tr>
<tr>
<td>FOUNDATION</td>
<td>978.1</td>
<td>UR 12</td>
</tr>
<tr>
<td>OUTPATIENT REHAB</td>
<td>1,953.5</td>
<td>UR 13</td>
</tr>
<tr>
<td>CONSOL.&amp;ELIMIN. ENTRIES</td>
<td>(219.8)</td>
<td>UR 14</td>
</tr>
<tr>
<td>Investment Income</td>
<td>720.1</td>
<td>G / GR</td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>G / GR</td>
</tr>
<tr>
<td><strong>Total - RE Col 2, Line M + Line U</strong></td>
<td>8,426.7</td>
<td></td>
</tr>
<tr>
<td>Description</td>
<td>Amount</td>
<td>Column</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>---------</td>
<td>--------</td>
</tr>
<tr>
<td>Patients Telephones</td>
<td>19.8</td>
<td>E 6</td>
</tr>
<tr>
<td>Cafeteria</td>
<td>570</td>
<td>E 7</td>
</tr>
<tr>
<td>Day Care</td>
<td>0</td>
<td>E 8</td>
</tr>
<tr>
<td>Community Health Education</td>
<td>837.7</td>
<td>F 4</td>
</tr>
<tr>
<td>FREE STANDING CLINIC SERVICES</td>
<td>1,511.0</td>
<td>UR 1</td>
</tr>
<tr>
<td>SKILLED NURSING CARE</td>
<td>2,712.3</td>
<td>UR 4</td>
</tr>
<tr>
<td>LAB NON-PATIENT</td>
<td>500.1</td>
<td>UR 5</td>
</tr>
<tr>
<td>PHYSICIANS PART B SERVICES</td>
<td>3,824.6</td>
<td>UR 6</td>
</tr>
<tr>
<td>PHYSICIAN SUPPORT SERVICES</td>
<td>182.7</td>
<td>UR 8</td>
</tr>
<tr>
<td>URGENT CARE</td>
<td>3,488.7</td>
<td>UR 9</td>
</tr>
<tr>
<td>NURTURING NECESSITIES</td>
<td>111.7</td>
<td>UR 11</td>
</tr>
<tr>
<td>FOUNDATION</td>
<td>1,382.5</td>
<td>UR 12</td>
</tr>
<tr>
<td>OUTPATIENT REHAB</td>
<td>2,588.1</td>
<td>UR 13</td>
</tr>
<tr>
<td>Investment Losses</td>
<td>2,948.6</td>
<td>G / GR</td>
</tr>
<tr>
<td><strong>Total - RE Col 2, Line S + Line V</strong></td>
<td><strong>20,457.9</strong></td>
<td></td>
</tr>
</tbody>
</table>
## Income Statement

<table>
<thead>
<tr>
<th>RE Line T</th>
<th>Excess (Deficit) Operating Rev. over Operating Expenses</th>
<th>XXXXX</th>
<th>$5,819.79</th>
</tr>
</thead>
</table>

### RE Line U Detailed Non-Operating: Income/(Expense)

| U1 | Contributions (Unrestricted) | XXXXX |
| U2 | Interest & Investment Income | 720.1 | XXXXX |
| U3 | Investment - Gains/(Losses) - Realized | XXXXX |
| U4 | Investment - Gains/(Losses) - Unrealized | XXXXX |
| U5 | Swap Agreements - Gains/(Losses) - Realized | XXXXX |
| V  | Loss from Building Renovation | (2,425.0) | XXXXX |
| V  | Loss on extinguishment of debt | XXXXX |
| V  | Loss on Pension Settlement | (523.5) | XXXXX |

### RE Line W Excess Profit/(Loss)

| XXXXX | 3,591.3 |

## Supplemental Schedule - FS and RE Schedules

### Other Significant Financial Information

| CC | Swap Agreements - Gains/(Losses) - Unrealized | XXXXX |
| DD | Collateral Received/(Posted) - Swap Agreements | XXXXX |
| EE | Retirement of Debt - Gains/(Losses) | XXXXX |
| FF | Pension Adjustment - Defined Benefit Plans | XXXXX |
| GG | Other (Specify) | XXXXX |
| HH | Total | XXXXX | $0.00 |
## SUPPLEMENTAL SCHEDULE - III
Reconciliation of Depreciation and Lease / Rentals

Hospital Name: CalvertHealth Medical Center  
Hospital Number: 210039  
**Fiscal Year 2018**

<table>
<thead>
<tr>
<th></th>
<th>Depreciation</th>
<th>Leases / Rentals</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>UA Schedule - Line A</strong></td>
<td>$11,199.30</td>
<td>$1,865.00</td>
<td>$13,064.30</td>
</tr>
</tbody>
</table>

### Allocation of E & UR Schedules:

- **E 1**: $0.00 $0.00 $0.00  
- **E 2**: $0.00 $0.00 $0.00  
- **E 3**: $0.00 $0.00 $0.00  
- **E 4**: $0.00 $0.00 $0.00  
- **E 5**: $0.00 $0.00 $0.00  
- **E 6**: $0.00 $0.00 $0.00  
- **E 7**: $226.57 $0.00 $226.57  
- **E 8**: $0.64 $0.00 $0.64  
- **E 9**: $0.00 $0.00 $0.00  
- **UR 1**: $36.16 $0.00 $36.16  
- **UR 2**: $0.00 $0.00 $0.00  
- **UR 3**: $0.00 $0.00 $0.00  
- **UR 4**: $2.64 $0.00 $2.64  
- **UR 5**: $0.00 $0.00 $0.00  
- **UR 6**: $0.00 $0.00 $0.00  
- **UR 7**: $0.00 $0.00 $0.00  
- **UR 8**: $5.11 $0.00 $5.11  
- **UR 9**: $29.00 $0.00 $29.00  
- **UR 10**: $0.00 $0.00 $0.00  
- **UR 11**: $0.00 $0.00 $0.00  
- **UR 12**: $0.00 $0.00 $0.00  
- **UR 13**: $0.00 $0.00 $0.00  
- **UR 14**: $0.00 $0.00 $0.00  
- **UR 15**: $0.00 $0.00 $0.00

**RE Schedule - Line Q**

<table>
<thead>
<tr>
<th>Depreciation</th>
<th>Leases / Rentals</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>$10,899.18</td>
<td>$1,865.00</td>
<td>$12,764.18</td>
</tr>
</tbody>
</table>

**Total** $12,764.21
SUPPLEMENTAL SCHEDULE - IV
Reconciling the amount of uncompensated care per the hospital's audited financial statements and trial balance

Hospital Name: CalvertHealth Medical Center
Hospital Number: 210039
Fiscal Year 2018

<table>
<thead>
<tr>
<th>Audited Financial Statements:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad Debts</td>
<td>$597.56</td>
</tr>
<tr>
<td>Charity Care</td>
<td>$5,547.03</td>
</tr>
<tr>
<td><strong>Uncompensated Care per Statement</strong></td>
<td><strong>$6,144.59</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Trial Balance:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Bad Debt Write-offs</td>
<td>$597.56</td>
</tr>
<tr>
<td>Charity Write-offs</td>
<td>$5,547.03</td>
</tr>
<tr>
<td>Change in Balance Sheet Reserve</td>
<td></td>
</tr>
<tr>
<td>Bad Debt Recoveries</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>$0.00</td>
</tr>
<tr>
<td><strong>Uncompensated Care per Trial Balance</strong></td>
<td><strong>$6,144.59</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Annual Report of Revenues, Expenses, and Volumes:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Uncompensated Care - Schedule PDA</td>
<td>$5,722.90</td>
</tr>
<tr>
<td>Unregulated Charity &amp; Bad Debts</td>
<td>$421.69</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
<tr>
<td><strong>Uncompensated Care Per Report</strong></td>
<td><strong>$6,144.59</strong></td>
</tr>
</tbody>
</table>
## FY 2018 SUPPLEMENTAL SCHEDULE - V

Detail of MCO Revenue (in 000’s)

<table>
<thead>
<tr>
<th>Payor</th>
<th>Inpatient</th>
<th>Outpatient</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMER - AMERIGROUP COMMUNITY CA</td>
<td>1,012,133</td>
<td>1,370,875</td>
<td>2,383,008</td>
</tr>
<tr>
<td>FREES/MA - FREESTATE/MA</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JAI - JAI MEDICAL SYSTEMS/MCO</td>
<td>44,065</td>
<td>80,598</td>
<td>124,663</td>
</tr>
<tr>
<td>KP.MCO - KAISER MD MEDICAID</td>
<td>66,525</td>
<td>191,794</td>
<td>258,320</td>
</tr>
<tr>
<td>MAOPTOUT - **TYPE INS CO NAME</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MAUTOOFST - MEDICAID OUT OF ST</td>
<td>41,778</td>
<td>85,182</td>
<td>126,960</td>
</tr>
<tr>
<td>MAPS-MD - MARYLAND PMHS</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MDHP - MARYLAND HEALTH PARTNER</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MDPC - MARYLAND PHYSICIANS CAR</td>
<td>3,797,779</td>
<td>5,486,010</td>
<td>9,283,789</td>
</tr>
<tr>
<td>MEFAMCHOI - MEDSTAR FAMILY CH</td>
<td>155,198</td>
<td>278,193</td>
<td>433,391</td>
</tr>
<tr>
<td>MEDICAID OPT OUT</td>
<td>47,730</td>
<td>39,097</td>
<td>86,827</td>
</tr>
<tr>
<td>NAH - NEW AMERICAN HEALTH</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PC/MDHP - PURCHASED CARE/MD HL</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PH - PRIME HEALTH MCO</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PP - PRIORITY PARTNERS MCO</td>
<td>1,235,592</td>
<td>1,481,383</td>
<td>2,716,975</td>
</tr>
<tr>
<td>PRU/MA - PRUDENTIAL/MA</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>RIVERSIDE - RIVERSIDE HEALTH O</td>
<td>407,635</td>
<td>466,213</td>
<td>873,848</td>
</tr>
<tr>
<td>UHC/MA - UNITED HEALTH CARE MC</td>
<td>935,303</td>
<td>1,294,655</td>
<td>2,229,959</td>
</tr>
<tr>
<td>AET/MC - AETNA LIFE INSURANCE</td>
<td>16,699</td>
<td>48,697</td>
<td>65,396</td>
</tr>
<tr>
<td>MCOPTOUT - MEDICARE OPT OUT</td>
<td>1,675,099</td>
<td>883,038</td>
<td>2,558,137</td>
</tr>
<tr>
<td>OTHER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>9,435,537</td>
<td>11,705,736</td>
<td>21,141,273</td>
</tr>
</tbody>
</table>

Hospital Name: CalvertHealth Medical Center
Hospital Number: 210039
Fiscal Year 2018
## FY 2018 SUPPLEMENTAL SCHEDULE - VI

Clinic Detail
Visits, RVUs and Revenues by Clinic

**Hospital Name:** CalvertHealth Medical Center  
**Hospital Number:** 210039

<table>
<thead>
<tr>
<th>Clinic Name</th>
<th>Visits</th>
<th>RVUs</th>
<th>Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain Management Center</td>
<td>4</td>
<td>6</td>
<td>$233</td>
</tr>
<tr>
<td>Spine Clinic</td>
<td>380</td>
<td>784</td>
<td>$29,822</td>
</tr>
<tr>
<td>Diabetic Education Clinic</td>
<td>860</td>
<td>10,980</td>
<td>$419,191</td>
</tr>
<tr>
<td>Pulmonary Rehabilitation</td>
<td>800</td>
<td>2,740</td>
<td>$103,427</td>
</tr>
<tr>
<td>Intervention Radiology Clinic</td>
<td>240</td>
<td>32</td>
<td>$1,287</td>
</tr>
<tr>
<td>Center for Vascular Care</td>
<td>923</td>
<td>1,722</td>
<td>$65,449</td>
</tr>
<tr>
<td>Anticoagulation Clinic</td>
<td>2,191</td>
<td>5,283</td>
<td>$201,550</td>
</tr>
<tr>
<td>Wound Care Clinic</td>
<td>1,189</td>
<td>7,598</td>
<td>$288,850</td>
</tr>
<tr>
<td>Surgical Oncology</td>
<td>49</td>
<td>367</td>
<td>$13,417</td>
</tr>
<tr>
<td>GYN Oncology</td>
<td>1,081</td>
<td>8,906</td>
<td>$339,842</td>
</tr>
<tr>
<td>Infusion Therapy</td>
<td>4,801</td>
<td>87,824</td>
<td>$3,350,188</td>
</tr>
<tr>
<td>Cardiac Rehabilitation</td>
<td>3,614</td>
<td>13,175</td>
<td>$498,802</td>
</tr>
</tbody>
</table>

**Total**                     | 16,132 | 139,417 | $5,312,059
# SUPPLEMENTAL SCHEDULE VII
## Outpatient Services Survey
### CalvertHealth Medical Center

**For The Fiscal Year Ended June 30, 2018**

<table>
<thead>
<tr>
<th>Name of Outpatient Service &amp; Rate Center if Applicable</th>
<th>Description of Services Provided</th>
<th>Physical Location/Address</th>
<th>Regulated/Unregulated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OUTPATIENT SERVICES OWNED BY THE HOSPITAL WHEREVER LOCATED</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cardiac Cath Lab</td>
<td>Surgical and Radiology services to evaluate the condition</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Cardiac and Pulmonary Rehab Center</td>
<td>Cardiac and PRhabilitative clinical services including monitoring and care</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CT Scan Services</td>
<td>CT radiology imaging services</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Center for Wound Healing</td>
<td>Wound Care Center providing surgical debridement and wound care</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Diabetic and Nutritional Patient Education</td>
<td>Comprehensive program including education classes and support services</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Diagnostic Radiology</td>
<td>Diagnostic Radiology services for hospital outpatients and emergency cases</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>Twenty four hour, seven days a week emergency services</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Infusion Therapy Services</td>
<td>Clinical services specializing in the administration of chemotherapy and other medications</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Interventional Cardiovascular Center</td>
<td>Interventional surgical and radiology services</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Interventional Radiology Clinic</td>
<td>Clinical services for the evaluation and management of interventional procedures</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Nuclear Medicine</td>
<td>Medical imaging services specializing in nuclear medicine</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Pain Management Center</td>
<td>Comprehensive pain management assessments and interventions</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Pediatric Orthopedic Clinic</td>
<td>Clinical services specializing in the evaluation and management of orthopedic conditions</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Psychiatric Day Treatment</td>
<td>Outpatient behavioral health treatment for adolescent and adult patients</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Rehabilitation Services</td>
<td>Rehabilitative services specializing in physical, occupational, and speech therapy</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Same Day Surgery Center</td>
<td>Operating room services for major and minor surgery</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Spine Clinic</td>
<td>Clinical services specializing in the evaluation and management of spinal disorders</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>Vascular Lab</td>
<td>Radiology imaging lab specializing in vascular studies</td>
<td>100 Hospital RoadPrince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC Endoscopy Center</td>
<td>Surgical center specializing in gastroenterology services</td>
<td>110 Hospital Road, Suite 101Prnce Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC MRI Services</td>
<td>MRI services for Emergency Room patients and inpatients</td>
<td>110 Hospital Road, Suite 103Prince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC Gynecology Oncology Center</td>
<td>Clinical services specializing in the evaluation and management of gynecologic and oncologic conditions</td>
<td>110 Hospital Road, Suite 112Prince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC Sleep Disorders Center</td>
<td>Comprehensive diagnosis and treatment for adults and children with sleep disorders</td>
<td>110 Hospital Road, Suite 112Prince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC Center for Vascular Care</td>
<td>Clinical services specializing in the evaluation and management of vascular diseases</td>
<td>110 Hospital Road, Suite 213Prince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC Anticoagulation Clinic</td>
<td>Clinical services specializing in the evaluation and management of anticoagulation therapy</td>
<td>110 Hospital Road, Suite 302Prince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CHMC OP Cardiac Testing Center</td>
<td>Medical imaging services specializing in nuclear medicine</td>
<td>110 Hospital Road, Suite 303Prince Frederick MD 20678</td>
<td>Regulated</td>
</tr>
<tr>
<td>CalvertHealth Outpatient Rehabilitation</td>
<td>Outpatient physical and occupational rehabilitation therapy</td>
<td>10845 Town Center Blvd, Suite 100Dunkirk, MD 20754-2712</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>CalvertHealth Urgent Care - Dunkirk</td>
<td>Urgent Care Center open to the public Monday through Friday</td>
<td>10845 Town Center BoulevardDunkirk, MD 20754</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>CalvertHealth Urgent Care - Prince Frederick</td>
<td>Urgent Care Center open to the public Monday through Friday</td>
<td>130 Hospital Road, Suite 102Prince Frederick MD 20678</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>Calvert CARES Clinic - Prince Frederick</td>
<td>Clinical services which offers a team-based approach to primary care</td>
<td>130 Hospital Road, Suite 102Prince Frederick MD 20678</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>CalvertHealth Outpatient Rehabilitation Prince Frederick</td>
<td>Outpatient physical and occupational rehabilitation therapy</td>
<td>130 Hospital Road, Suite 103Prince Frederick MD 20678</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>CalvertHealth Urgent Care - Solomons</td>
<td>Urgent Care Center open to the public Monday through Friday</td>
<td>14090 H.G. Trueman RoadSolomons, MD 20688</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>CalvertHealth Solomons Imaging Center</td>
<td>Diagnostic Radiology services for outpatients</td>
<td>14090 H.G. Trueman Rd, Suite 1500 Solomons, MD 20688</td>
<td>Un-Regulated</td>
</tr>
<tr>
<td>CalvertHealth Outpatient Rehabilitation Solomons</td>
<td>Outpatient physical and occupational rehabilitation therapy</td>
<td>14090 HG Trueman Rd, Suite 1500 Solomons, MD 20688-3151</td>
<td>Un-Regulated</td>
</tr>
</tbody>
</table>
## SUPPLEMENTAL SCHEDULE VII

### Outpatient Services Survey

**CalvertHealth Medical Center**

**For The Fiscal Year Ended June 30, 2018**

<table>
<thead>
<tr>
<th>Name of Outpatient Service &amp; Rate Center if Applicable</th>
<th>Description of Services Provided</th>
<th>Physical Location/Address</th>
<th>Regulated/Unregulated</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OUTPATIENT SERVICES NOT OWNED BY THE HOSPITAL LOCATED IN REGULATED SPACE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CalvertHealth Hematology Oncology</td>
<td>Physician Office - Oncology and Hematology Specialty</td>
<td>110 Hospital Road, Suite 102 Prince Frederick, MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Hematology Oncology</td>
<td>Physician Office - Oncology and Hematology Specialty</td>
<td>110 Hospital Road, Suite 105 Prince Frederick, MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Hematology Oncology</td>
<td>Physician Office - Oncology and Hematology Specialty</td>
<td>110 Hospital Road, Suite 110 Prince Frederick, MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Primary Care - Prince Frederick</td>
<td>Physician Office - Family Practice</td>
<td>110 Hospital Road, Suite 111 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>Calvert Orthopedics &amp; Sports Medicine</td>
<td>Physician Office - Orthopedic Specialty</td>
<td>110 Hospital Road, Suite 201 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Obstetrics &amp; Gynecology</td>
<td>Physician Office - Obstetrics and Gynecology Specialty</td>
<td>110 Hospital Road, Suite 202 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Obstetrics &amp; Gynecology</td>
<td>Physician Office - Obstetrics and Gynecology Specialty</td>
<td>110 Hospital Road, Suite 203 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Gastroenterology</td>
<td>Physician Office - Gastroenterology Specialty</td>
<td>110 Hospital Road, Suite 210 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth General Surgery</td>
<td>Physician Office - General Surgery Specialty</td>
<td>110 Hospital Road, Suite 210 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>CalvertHealth Obstetrics &amp; Gynecology</td>
<td>Physician Office - Obstetrics and Gynecology Specialty</td>
<td>110 Hospital Road, Suite 211 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>Anne Arundel Urology</td>
<td>Physician Office - Urology Specialty</td>
<td>110 Hospital Road, Suite 215 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
<tr>
<td>Calvert Internal Medicine Group Cardiology</td>
<td>Physician Office - Cardiology Specialty</td>
<td>110 Hospital Road, Suite 303 Prince Frederick MD 20678</td>
<td>Unregulated</td>
</tr>
</tbody>
</table>
### Section I
**TOTAL GROSS PATIENT REVENUE**

<table>
<thead>
<tr>
<th>Line #</th>
<th>Inpatient</th>
<th>Outpatient</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>68,051,560</td>
<td>80,067,479</td>
<td>148,119,039</td>
</tr>
<tr>
<td>2</td>
<td>816,285</td>
<td>1,052,534</td>
<td>1,868,819</td>
</tr>
<tr>
<td>3</td>
<td>68,867,845</td>
<td>81,120,013</td>
<td>149,987,858</td>
</tr>
</tbody>
</table>

### Section II
**TOTAL MEDICARE/NON-FFS REVENUE**

<table>
<thead>
<tr>
<th>Line #</th>
<th>Col 1 In-State I/P Revenue</th>
<th>Col 2 Out-State I/P Revenue</th>
<th>Col 3 In-State O/P Revenue</th>
<th>Col 4 Out-State O/P Revenue</th>
<th>Col 5 Total Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Medicare FFS Revenue</td>
<td>32,741,680</td>
<td>241,222</td>
<td>25,733,180</td>
<td>232,616</td>
<td>58,948,698</td>
</tr>
<tr>
<td>5 Non-FFS Revenue</td>
<td>1,522,091</td>
<td>125,748</td>
<td>962,550</td>
<td>64,438</td>
<td>2,674,827</td>
</tr>
<tr>
<td>6 Total Revenue</td>
<td>34,263,771</td>
<td>366,970</td>
<td>26,695,730</td>
<td>297,054</td>
<td>61,623,525</td>
</tr>
</tbody>
</table>