

REPORT TO THE GOVERNOR

FISCAL YEAR 2011

MARTIN O'MALLEY

GOVERNOR



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

Commissioners during FY11

	<u>Appointed</u>	<u>Term Expires</u>
Frederick W. Puddester	July 1, 2010* (Replaced Chairman Donald A. Young, M.D.)	June 30, 2011
Joseph Antos, Ph.D.	July 1, 2004 July 1, 2008	June 30, 2008 June 30, 2012
George H. Bone, M.D.	July 1, 2010	June 30, 2014
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

* Resigned June 30, 2011

** 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) 2011. Audited hospital data throughout the report, however, are for the most recent fiscal year available, which in most cases is FY 2010.

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 2011. 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 \$10,767 in FY 2008 to \$10,983 in FY 2010. This 2% growth in Maryland is below the anticipated national average increase of 3% 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 24.5%, compared to the average mark-up of 198% 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

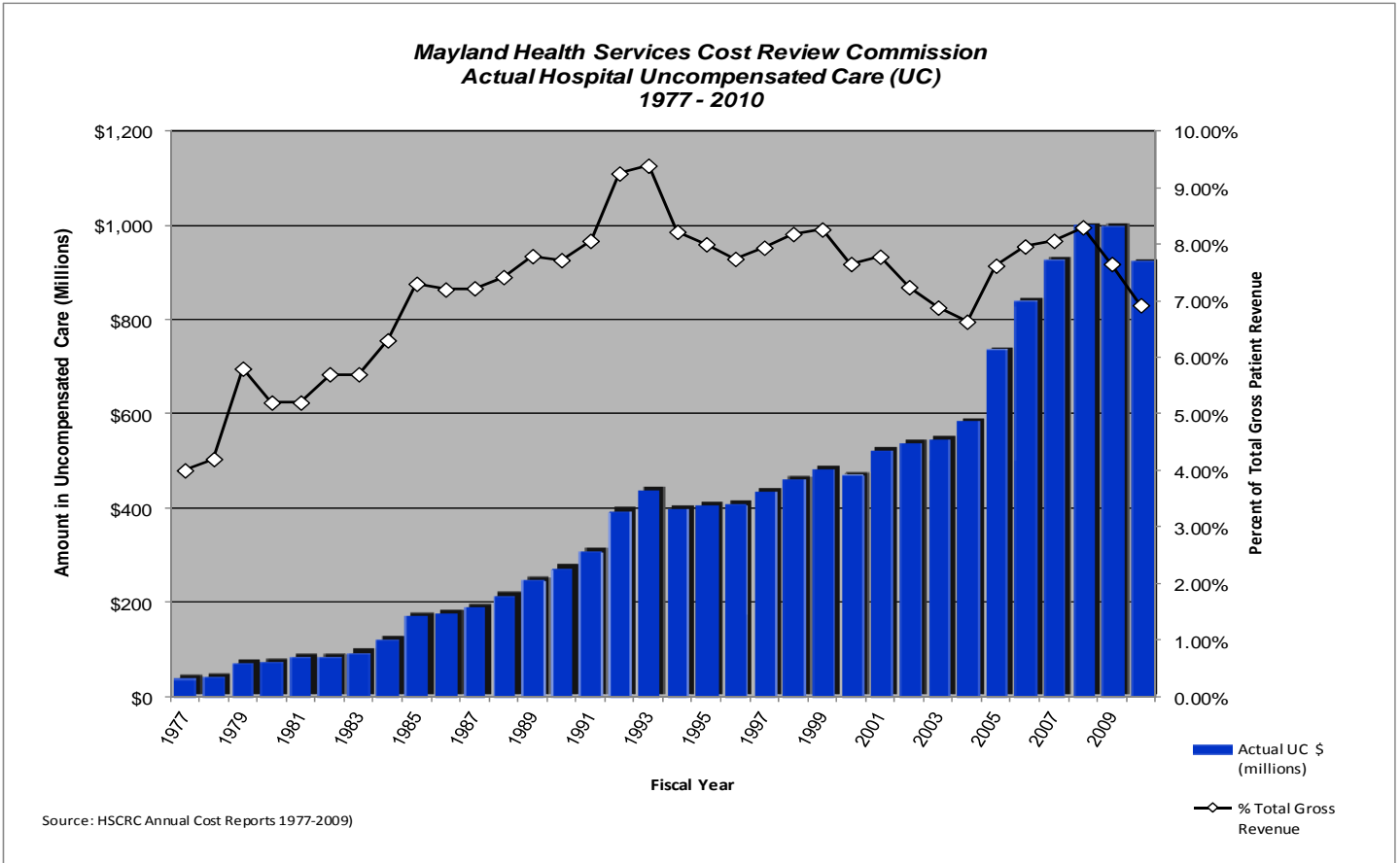
their charges by 100-200 percent in an effort to compensate for shortfalls in uncompensated care, discounts to large managed care organizations (e.g., HMOs), and low reimbursement from Medicare and Medicaid. These marked-up charges make payment especially difficult for “self-pay” patients and other third-party 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 3 percent increase for the rest of the nation for FY 2010. In FY 1976, the cost per adjusted admission to a Maryland hospital was 26 percent above the national average. In FY 2009, the year for which the most recent data are available from AHA, the average cost per adjusted admission in Maryland was 1% below the national average. From 1977 through 2009, 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 \$926 million in FY 2010 (**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 require 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.

In January 2010, Medicaid expanded the Primary Adult Care (“PAC”) program to include outpatient emergency room services. An additional \$8.7 million was added to the uniform assessment to cover this expansion of PAC. In addition, the aforementioned \$16.5 million from the underestimation in FY 2009 was added to this amount, so that the total assessment amount for the combined Medicaid/PAC expansion in FY 2010 was \$115.3 million.

The FY 2011 assessment was based on an anticipated average enrollment of 69,800 and a per member/per month cost of \$547. The total expected expenditures for this population was \$457.6 million. The total expected hospital averted bad debt in FY2011 for the parent/caretaker expansion was \$135.1 million, after making adjustments for crowd-out (28%), lower-use rate (82%), in-state expenditures (6%), and the percentage of expenditures for hospital services (50%). Hospital rates were reduced further by an additional \$26.8 million for the PAC expansion. The total assessment amount for the combined Medicaid/PAC expansion for FY2011 was \$146 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 2010, Maryland general acute hospitals' profits on regulated activities rose from 5.8% in FY 2009 to 6.2% in FY 2010. Profits on regulated and unregulated operations increased slightly from 2.44% in FY 2009 to 2.6% in FY 2010. Total excess profits (which include profits and losses from regulated and unregulated operating and non-operating activities) increased significantly from 0.05% in FY 2009 to 3.77% in FY 2010.

E. Medicare Waiver

Federal statute grants Maryland a waiver authorizing the State to set hospital rates for all payers, including Medicare and Medicaid, with the provision that Maryland continues to meet certain federal criteria. The "waiver test" compares the national Medicare growth in the payment per admission to the growth in Maryland Medicare payment per discharge from January 1981 through the current period.

The most recent waiver test information indicates that payment per admission for Medicare patients nationally increased 356 percent from January 1, 1981, through March 31, 2010 compared to a 313 percent increase in Maryland over the same time period. The waiver cushion (the relative difference between the growth in Maryland and nationally) is approximately 12.46 percent. Commission staff monitors the waiver cushion on a quarterly basis and works closely with staff at CMS to ensure the accuracy of the comparison. If the cushion drops below 6 percent, the Commission takes the appropriate steps necessary to assure continuation of Maryland's 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 2011, 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 2011 was \$4,926,186 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 2011 was \$572,479 (or 11.6% 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).

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.

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 with focus on core Centers for Medicare and Services/Joint Commission process of care measures for the Quality Based Reimbursement (QBR) initiative, hospital complication rates not present upon patient admission for the Maryland Hospital Acquired Conditions (MHAC) program, and readmissions. Updates for each initiative area are provided below.

Quality Based Reimbursement (QBR) Initiative - Implemented in July 2008, performance is measured and reported on a set of effectiveness/process of care measures for heart failure, heart attack, pneumonia and surgical care improvement; patient experience of care measures was added for measurement year CY 2010 with results applied to hospital rates for FY 2012. Performance on all measures is improved from 2008 to 2010 and, most importantly, variation between hospitals decreased quite substantially in almost all measures as well. The average percentage point increase in the state-wide average of all measures is 2.9%.

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. The summary of the results of the MHAC program which controls for changes in patient mix over the years are provided below.

- Complication rates declined by 20% in the first two years of the program.
- Of the 49 PPCs used in the MHAC program:
 - 37 PPCs decreased in both years (75%);
 - 3 had declines in FY 2010 with an average of 16%, and small increases in FY 2011 (average increase was 6%);
 - 6 PPCs increased in FY2010 (average increase was 5%) and declined in FY2011 (average decrease was 8%); and
 - 3 PPCs showed increases in both years with an average annual increase of 11%.
 - Estimated total cost savings due to reductions in complication rates in the initial two years were \$105.4 million.

Readmissions-There are two initiatives that HSCRC has developed to target readmissions: (1) the Maryland Hospital Preventable Readmissions (MHPR) Initiative,

which was developed in 2011 and anticipated to go live this year, is currently on hold; and (2) The Admissions Readmissions Revenue (ARR).

1. Maryland Hospital Preventable Readmissions (MHPR) Initiative - Actual versus expected rates of performance are measured, adjusted for specific hospital and patient characteristics, on potentially preventable readmissions within a specified time period(s), e.g., 30 days. In Maryland in 2007, there were \$659.9 in associated charges for readmissions within 30 days. This initiative is on hold and may be re-considered for implementation should voluntary participation in the ARR initiative described below not be robust enough.
2. The Admission-Readmission Revenue (“ARR”) Hospital Payment Constraint Program: The Admission-Readmission Revenue (“ARR”) episode payment structure, approved to move forward during the January 2011 Commission meeting, is designed to provide incentives for hospitals to improve overall care coordination and substantially reduce readmission rates. The ARR Program also encompasses policy framework for the evaluation and approval of an ARR pilot for any hospital that agrees to adhere to a set of prescribed conditions and responsibilities. Some key features include:
 - Hospital participation in the pilot program is voluntary beginning in July 2011- to date about half of the State’s acute care hospitals have indicated they intend to participate in the program beginning this year;
 - Participating hospitals agree to a three year pilot term;
 - 30-day all-cause readmission is used for determining Charge per Episode (CPE) payment rates; and
 - HSCRC will provide seed funding of up to 0.5% of a hospital’s total annual revenue to support the set up of care transitions infrastructure, e.g., readmission risk assessment screening for patients early in the admission, enhanced care coordination services to ensure follow up care of at risk patients after discharge, etc.

Thus, the ARR pilot initiative represents an important and urgently needed step in the Commission’s attempt to utilize its current regulatory authority to better rationalize Maryland’s hospital payment and delivery system.

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 2011, the sixth year of such funding, \$1.54 million has been included in the rates of certain hospitals for this purpose.

I. Community Benefit Report

In June 2011, the Commission released the FY2010 Maryland Hospital Community Benefit Report. Each year, the Health Services Cost Review Commission collects community benefit information from individual, acute care hospitals, to compile into a publicly-available statewide report. Fiscal Year 2010 represents the seventh year of reporting on community benefits provided by Maryland hospitals.

In Total, Maryland hospitals provided approximately \$1 billion dollars in community benefit activities. This total is comprised of over \$75.7 million in community health services, more than \$317 million in health professions education, mission driven health services at \$255.7 million, \$6.6 million in research activities, over \$15 million in financial contributions, \$20.6 million in community building activities, just under \$5.5 million in community benefit operations, over \$7 million in foundation funded initiatives, and just over \$347 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 benefit reported:

- A total of \$613.5 million was provided in net community benefits for FY 2010; and
- The average percentage of operating expenses dedicated to community benefits drops from 7.71% to 5.22%.

The national community benefit landscape continues to evolve, especially with the related provisions of the Affordable Care Act (ACA). Each year the HSCRC reviews and refines its reporting requirements and takes into account state and federal law and regulatory changes related to community benefits. To this end, an advisory group met from November 2010 to May 2011 to recommend changes to the next year's Community Benefits Reporting Guidelines and Standard Definitions as well as to the Community Benefits Narrative Reporting Instructions and related Evaluation. The HSCRC will continue this process of refining the reporting requirements and improving its evaluation method to provide appropriate 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 2011 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	3	There were three requests for approval of an increase to all rates. All requests were withdrawn. Approved: 0
Partial Rate Applications	12	
	11	Eleven requests for approval of a rate for a new service Approved:11
	1	One request for approval to replace a rebundled rate with a rate for a service provided by the hospital to both inpatients and outpatients. Approved:1
Applications for Alternative Method of Rate Determination*	29	
	22	Twenty-two requests for approval to participate in global fixed price alternative payment arrangements** Approved: 22

	7	<p>Seven requests for approval to participate in capitation alternative payments arrangements***</p> <p style="text-align: right;">Approved:7</p>
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*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 2011, thirty-five (35) of the forty-five (45) acute care hospitals and one (1) chronic specialty hospital participated in the Charge per Case Target rate setting methodology. July 1, 2010, an update factor of 1.41% was applied, on average, to Charge per Case Targets, 100% inpatient unit rates, and ancillary unit rates of each hospital. The update was scaled for each Charge per Case hospital based on its Reasonableness of Charges (“ROC”) position relative to its peer group. Hospitals above their peer group average received less than 1.41%, while hospitals below their peer group average received more than 1.41%.

Eight hospitals converted to the Total Patient Revenue System (“TPR”) on July 1, 2010, for a total of ten hospitals participating in this methodology. The TPR is a revenue constraint system developed by the HSCRC to provide hospitals with a financial incentive to manage their resources efficiently and effectively in order to slow the rate of increase in the cost of health

care. The TPR is consistent with the hospitals' mission to provide the highest value of care possible to the community it serves.

The TPR is available to sole community provider hospitals and hospitals operating in regions of the State characterized by an absence of densely overlapping services areas. The HSCRC staff reserves the right to exclude any hospital from eligibility for the TPR if it determines that that hospital's service area characteristics are not conducive to successful implementation and operation of the TPR.

The basic concept embodied in the TPR is the assurance of a certain amount of revenue each year, independent of the number of patients treated and the amount of services provided to these patients. The hospital, therefore, has the incentive to reduce length of stay, ancillary testing, unnecessary admissions and readmissions, as well as improve efficiency in the provision of services while treating patients in a manner consistent with appropriate, high quality medical care.

C. Full Rate Reviews

A full rate review is an extensive analysis of a hospital's costs as compared to the average cost structure of its peer group. A hospital may file an application for a full review or the Commission may initiate the review. These are highly complex, technical reviews which incorporate 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, for example, 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 2011, three hospitals filed, and subsequently withdrew, their applications for a full rate review.

D. Spend Down Hospitals

All acute care hospitals are subject to the results of the annual ROC calculations through the scaling of the annual update factor as discussed above. Additionally, a determination is made of each hospital's position relative to its peer group average. Any hospital with charges exceeding its peer group average by a pre-determined percentage is identified as a high cost hospital and is subject to the execution of 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 ROC calculation and any resultant spend downs for the next two years, subsequently extended for another 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 which measure ROC performance. Additionally, the group proposed issuing the ROC annually with no hospital being identified as high cost for 2010. This approach was continued in 2011; therefore, no hospitals were placed on a Spend Down in fiscal year 2011.

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. 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 percent 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.

HSCRC staff established an FY 2010 CPV target and allowable revenue using FY 2009 data as the base year. 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.

In FY 2011, HSCRC staff established CPV targets using FY 2010 data as the base year. Although there continued to be some inconsistencies in the reporting and coding in the outpatient discharge data across hospitals, Commission staff was able to impute from the outpatient discharge data the units and charges included under the CPV for compliance. HSCRC staff implemented minor revisions to the CPV methodology including identifying observation cases using specific CPT/HCPCS codes and calculating infusion weights based on the sum of the weights of the drugs infused with the infusion procedures (APG 110, 111) given a weight of 0. HSCRC staff continued to exclude ancillaries and reoccurring visits from the CPV.

B. Uncompensated Care Policy and Charity Care

The HSCRC's provision for uncompensated care in hospital rates is one of the unique features system. By recognizing reasonable levels of UCC in hospital rates, the system enhances access to hospital care for those citizens who cannot pay for care. The UCC provision in rates is applied prospectively and is meant to be predictive of actual uncompensated care costs in a given year.

The HSCRC uses a blend of actual and regression-based methodology as a vehicle to predict actual uncompensated care costs in a given year. The uncompensated care methodology has undergone substantial changes over the years since it was initially established. The most recent version of the policy was adopted by the Commission on September 1, 2010.

The uncompensated care regression estimates the relationship between a set of explanatory variables and the rate of uncompensated care observed at each hospital as a percentage of gross patient revenue. Under the current policy, the following variables are included as explanatory variables:

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

Uncompensated care includes both bad debt and charity care. Charity care is defined as care for which hospitals do not seek reimbursement, often due to a patient's income. In recent years, public news reports raised the issue of whether Maryland hospitals provide sufficient levels of charity care, given that the UCC policy provides uncompensated care in rates.

Provisions included in 2009 legislation (Chapters 310 and 311) required the Commission to study and make recommendations on incentives for hospitals to provide free and reduced-cost care to patients without the means to pay their hospital bills. The legislation also established a

minimum statewide hospital financial assistance threshold (of 150 percent of FPL, later increased by the Commission to 200 percent of FPL), and other requirements relating to hospital debt collection.

The Commission adopted the Charity Care Adjustment as part of the UCC on October 14, 2009 to incentivize Maryland hospitals to provide appropriate charity care to eligible patients by adjusting UCC percentages to favor charity care over bad debt. Due to a lack of data, the HSCRC delayed implementation of this adjustment. HSCRC staff implemented the Charity Care Adjustment effective July 1, 2011 (rate year 2012).

C. One Day Stays

One Day Stay (ODS) are cases admitted to an acute inpatient unit and have either a zero or one-day length of stay. ODS cases have recently been a focus of the national Medicare Recovery Audit Contractor (RAC) initiative currently authorized by federal law to identify areas of both overpayment and underpayment to acute care hospitals by the Medicare program.

During calendar year 2009, several private payers (likely in reaction to the focus on one-day stays by Medicare nationally) contacted the HSCRC staff regarding the wide variation in the use of outpatient observation services by Maryland hospitals. These private payers believed that Maryland hospital practices were leading to an overuse of inpatient levels of care for patients that could be treated as outpatient observation cases. Overuse of inpatient services for cases that could be treated on an outpatient observation basis results in excess medical cost and potential additional clinical risks for patients (exposure to generally higher rates of complications for inpatient cases than for outpatient cases). ODS cases also can be surgical cases that are admitted,

and the surgery is performed in an inpatient basis (instead of being performed on an ambulatory basis).

The overuse of inpatient services for medical and surgical cases arguably inflates the overall cost of hospital care in Maryland. There is also evidence that suggests that there may be negative quality of care related implications associated with excessive inpatient treatment. These considerations, along with the factors noted above, caused the HSCRC to analyze Maryland hospital performance on ODS cases, both over time and relative to hospitals in other states.

HSCRC staff review found that Maryland hospitals, relative to national standards, have admitted a much higher percentage of ODS (both medical and surgical) cases as a proportion of total inpatient admission. Maryland admits 6 percent more one-day stays overall and 4 percent more Medicare one-day stay cases than hospitals in the rest of the US.

At its May 5, 2010 monthly meeting, the Commission approved the following recommendations to incentivize hospitals to move ODS cases into outpatient observation:

- Exclude ODS cases from hospitals' inpatient Charge per Case targets treating the cases as a separate category for compliance and other rate regulatory purposes;
- Provide revenue-neutral reallocation of revenue to hospitals that were early adopters of observation;
- Establish a short term (FY 2011 - FY 2014) soft target system for scaling revenue related to ODS and observation;
- Allow for same day surgery rate tiering; and
- Develop strategies in the CPV to handle observation.

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 first five-year Nurse Support Program I (NSP I) cycle in 2001. In 2007, the HSCRC approved a new five-year cycle of NSP I funding. 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.

Over the last 4 years, approximately \$50 million has been provided to 50 acute care and specialty hospitals in Maryland for NSP I projects addressing 3 areas: 1) nursing retention and recruitment; 2) educational attainment; and 3) improvement of nursing practice environment.

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. In May 2005, the HSCRC created the Nurse Support Program II (NSP II) and approved funding of 0.1% of regulated patient revenue each year for 10 years for use in expanding the pool of nurses in the State by 1) increasing the capacity of Maryland nursing programs, 2) developing more nursing faculty, and 3) creating a pipeline for future nursing faculty. Under the NSP II Program, funding is available to support two types of initiatives: Competitive Institutional Grants and Statewide Initiatives. Institutions seeking Competitive Institutional Grants are encouraged to collaborate with the Statewide Initiative grantees which provide scholarships and living expenses grants to graduate nursing faculty and grants for new nursing faculty. For FY 2012, the Commission approved funding for 16 Competitive Institutional Grants, totaling \$7.7 million.

During the last 6 years of NSP II, the Commission has approved nearly \$52 million in funding for 67 Competitive Institutional Grant awards. The projects involve 78 hospital and higher education institution partners and consortium members. An additional \$14.8 million was awarded for Statewide Initiatives in the last 5 years, for a total of over \$66 million in awards for the NSP II.

E. Hospital Discharge Data

1. Inpatient Discharge Data

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. Regulations require Maryland hospitals 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. Acute hospitals report chronic care discharges under separate reporting structures. Likewise, psychiatric hospitals report discharges separate from the acute care facilities.

2. Outpatient Discharge Data

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 Outpatient Database Reporting Regulations, effective June 4, 2007, allowed for the consolidating of the Commission's current ambulatory surgery and ambulatory care data set into one uniform outpatient hospital data set. Hospitals submit outpatient care data to the HSCRC within 60 days following the close of a quarter.

3. Financial-Discharge Data Reconciliation

Hospital reporting of charges and units by rate center in the Inpatient and Outpatient discharge data submissions should match the same information reported in the hospital's financial data. As the Commission implemented the CPV, HSCRC staff found it necessary to ensure a reconciliation between the discharge and financial data at the rate center level. To allow for this reconciliation, at its February 4, 2009 Public Meeting, the Commission voted unanimously to adopt amended regulations requiring hospitals to include units of measure, consistent with the financial data base, for all charges in the Inpatient and Outpatient Discharge data. During FY 2011, HSCRC and hospital staff worked to develop a reconciliation template and process. HSCRC staff now review reconciliations submitted by hospitals with each quarterly data submission.

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 2011, 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 June 1, 2011, the Commission adopted an amendment to Regulation .02, which was proposed for adoption on March 11, 2011. 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 October 13, 2010, the Commission adopted amendments to Regulation .03, which were proposed for adoption on August 27, 2010. The purpose of this action is to extend the time frame for submission of the annual hospital Interns and Residents Survey to the Commission from July to January.

Finally, on December 8, 2010, the Commission adopted amendments to Regulation .03, which were proposed for adoption on October 22, 2010. The purpose of this action is to require hospitals to file with the Commission an Annual Debt Collection Report in the form prescribed by the Commission.

COMAR 10.37.07

This new chapter concerns the Commission's *Health Information Exchange Data*. On April 15, 2011, the Commission proposed for adoption new Regulations .01- .07. The purpose of this action is to enable the Commission to fully measure and compare hospital-specific performance on readmissions and to use the data to further enhance and strengthen the financial incentives linked with performance. Additionally, the proposed regulations further the Commission's policy of reducing potentially avoidable readmissions to hospitals.

COMAR 10.37.10

This regulation concerns the Commission's *Rate Application and Approval Procedures*. During the past fiscal year, the Commission adopted amendments to Regulation .26, on October 13, 2010, which were proposed for adoption on July 30, 2010. 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 Chapters 60 and 61, Acts 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 72

This bill, entitled *Health Budget Reconciliation and Financing Act of 2011*, would alter certain provisions relating to certain hospital assessments; require the HSCRC for a certain fiscal year to approve a combination of hospital assessments and remittances in a certain amount for certain purposes; and require the Commission and the Department to adopt policies. (*Became Law; Ch.397*)

House Bill 216

This bill, entitled *HSCRC—User Fees*, would increase the total amount of user fees that the Health Services Cost Review Commission may assess on specified hospitals from \$5,500,000 to \$7,000,000. (*Became Law; Ch. 582*)

House Bill 600

This bill, companion to SB 960, entitled *Health Care Providers - Investigations - Information Sharing Among State Agencies*, would add to the list of entities to which the HSCRC may disclose physician information; alter the list of entities that may be medical review committees charged by law to evaluate matters relating to health care providers; require the Board of Physicians to disclose information contained in a record to the Secretary of Health and Mental Hygiene and specified agencies for a specified purpose; and specify that provisions of the Act do not alter the authority of the Secretary. (*Became Law; Ch. 309*)

House Bill 784

This bill, companion to SB 723, entitled *Medical Records - Health Information Exchanges*, would require the Maryland Health Care Commission (MHCC) to adopt regulations for the privacy and security of protected health information obtained or released through a health information exchange by specified persons; require the regulations to include protections for the secondary use of specified information; provide that the regulations do not apply to protected health information exchanged between and among specified persons. (*Became Law; Ch. 535*)

Senate Bill 723

This bill, companion to HB 784, entitled *Medical Records - Health Information Exchanges*, would require the MHCC to adopt regulations for the privacy and security of protected health information obtained or released through a health information exchange by specified persons; require the regulations to include protections for the secondary use of specified information; provide that the regulations do not apply to protected health information exchanged between and among specified persons. (*Became Law; Ch. 534*)

Senate Bill 960

This bill, companion to HB 600, entitled *Health Care Providers - Investigations - Information Sharing Among State Agencies*, would add to the list of entities to which the HSCRC may disclose physician information; alter the list of entities that may be medical review committees charged by law to evaluate matters relating to health care providers; require the Board of Physicians to disclose information contained in a record to the Secretary of Health and Mental Hygiene and specified agencies for a specified purpose; and specify that provisions of the Act do not alter the authority of the Secretary. (*Became Law; Ch. 308*)

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

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.

<u>Former Commissioners</u>	<u>Appointed</u>	<u>Term Expired</u>
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)
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	Dec. 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)
Frederick W. Puddester ¹²	July 1, 2010	June 30, 2011 (Resigned)
C. James Lowthers	July 1, 2007	June 30, 2011
Kevin J. Sexton	July 1, 2003	June 30, 2011

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

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.

¹² Frederick W. Puddester, appointed by the Governor to replace Chairman Donald A. Young, M.D.

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE



John M. Colmers
Chairman
Joseph R. Antos, Ph.D.
George H. Bone, M.D.
Jack C. Keane
Bernadette C. Loftus, M.D.
Thomas R. Mullen
Herbert S. Wong, Ph.D.

Stephen Ports
Principal Deputy Director
Policy & Operations

Gerard J. Schmith
Deputy Director
Hospital Rate Setting

Mary Beth Pohl
Deputy Director
Research and Methodology

HEALTH SERVICES COST REVIEW COMMISSION

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For release 12:00 p.m. EST
Wednesday, September 14, 2011

Average Amount Paid For a Hospital Stay in Maryland

The average amount paid for a hospital stay in Maryland rose below the national level of increase in Fiscal Year (FY) 2010. According to a report released today by the Maryland Health Services Cost Review Commission (HSCRC), patients at Maryland's hospitals paid, on average, \$10,983 for a hospital admission in FY 2010, slightly up from the \$10,767 paid in the previous fiscal year. This amounts to a 2 percent level of growth and is below the estimated national average increase of 3 percent for the same period. This means that Maryland patients paid \$113 million less than they would have paid if Maryland hospitals' revenue per admission had grown at the national average.

In addition to outperforming the nation in controlling the rate of growth in payments to hospitals, the mark-up in Maryland's costs (i.e., the difference between hospital costs and what hospitals ultimately charge patients) is also the lowest in the nation. The mark-up in Maryland hospitals averaged 24.5 percent, while the average mark-up for hospitals nationally is 198 percent, according to the most recent data from the American Hospital Association.

In the absence of rate setting, hospitals in the rest of the nation must artificially mark-up their charges excessively in order to cover shortfalls due to uncompensated care, discounts to large HMOs and other third-party payers, and inadequate payments 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.

Further, 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 with an estimated 3 percent increase for the rest of the nation for FY 2010. In 1976, the cost of an admission in Maryland hospitals was 26 percent above the national average. Had cost per admission in Maryland risen at the national rate during the period 1976 through 2010, hospital expenditures would have been \$3.2 billion more in FY 2010 alone. According to the American Hospital Association, Maryland hospitals experienced the lowest cumulative growth in cost per admission of any state in the nation from 1977 to 2009.

The HSCRC is proud of its track record of achievement to date and mindful of the important role that the All-Payer System can play in formulating effective health care policy in the future. According to the HSCRC Chairman, John Colmers:

“At a time when the nation is searching for health care policies that result in cost containment, improved access, and higher quality of service, Marylanders rightfully can take great pride in our unique All-Payer Rate Setting System. This system has produced a level of stability unmatched in the rest of the country. The results to date have shown themselves in lower hospital expenditure growth, in greater access to needed hospital care, and in unparalleled equity of payment. The future holds even greater promise for Maryland to be the standard bearer for the nation in efficient and effective health care delivery.”

The report also showed that:

1. Uncompensated care (i.e., bad debt and charity care) was \$926 million in FY 2010 (6.9 percent of gross patient revenue) compared to \$999 million in FY 2009.
2. Hospital operating profits continued to increase in FY 2010 and substantial gains on non-operating activities resulted in a significant increase in total hospital profitability:
 - Total profits (otherwise known as “excess profit”), which include profits and losses from operating and non-operating activities (both regulated and unregulated), increased substantially from a loss of \$2 million in FY 2009 (0.01 percent of total revenue) to \$481 million (3.8 percent of total revenue) in FY 2010, largely due to both realized and unrealized investment gains.
 - Operating profits on regulated activities alone in FY 2010 increased to \$715 million (6.2 percent of regulated net operating revenue) from the previous year’s \$669 million (5.9 percent of regulated net operating revenue).
 - Operating profits from both regulated and unregulated activities increased only slightly from \$319 million in FY 2009 (2.6 percent of total net operating revenue) to \$328 million (2.6 percent of total net operating revenue in FY 2009), largely due to increased losses sustained by hospitals for physician-related activity.
3. Total net regulated patient revenue increased by only 1.9 percent to \$11.4 billion in FY 2010 from \$11.2 billion in FY 2009, due, in part, to a 1.4 percent decrease in admissions. Chairman Colmers expressed pride in the All-Payer System and in its ability to spread its benefits to Marylanders. Chairman Colmers noted the accomplishments of the All-Payer System as well as the challenges that lie ahead:

“The Commission recognizes that the challenges going forward will center around total health care spending, and not just on the cost per admission to a hospital. The current level of expenditures, and particularly expenditure growth, is simply unsustainable. Yet, in Maryland, because of the All-Payer System, we continue to see the fruits of our almost forty years of labor. For example, for the first time since rate-setting began, hospital admissions have actually decreased. Thus, the HSCRC remains undaunted by the challenges and confident that with the innovation and industry collaboration that have long been hallmarks in our state, we can extend our focus into more comprehensive packages of care and, thereby, assure Maryland’s place as having the healthiest health care delivery system in the nation.”

Editor Note: The Disclosure of Hospital Financial and Statistical Data report can be found in PDF under Financial Data Reports/Financial Disclosure. The HSCRC website can be found at: [HTTP://www.hscrc.state.md.us](http://www.hscrc.state.md.us).

For further information call:
Stephen Ports

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For release 12:00 p.m. EST
September 14, 2011

410-764-2605

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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) 2010. According to figures released today by the Health Services Cost Review Commission (HSCRC), patients at Maryland's hospitals paid, on average, \$10,983 for a hospital admission in FY 2010, up 2% from the \$10,767 paid in FY 2009. The average amount paid by a patient nationally for a hospital stay was estimated to have risen by 3%, based on data from the Colorado Data Bank, a survey tool utilized by the hospital industry nation-wide to assess overall hospital performance.

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 24.5 percent compared with the average mark-up of 198 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 almost 200 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 1.6 percent during FY 2010. In FY 1976, the cost per adjusted admission to a Maryland hospital was 26 percent above the national average. In FY 2009, the year for which the most recent data are available from AHA, the average cost per adjusted admission in Maryland was 1% below the national average. From 1977 through 2009, 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 2010:

- 1) The average *charge* per admission for regulated activities increased 2.7 percent to \$12,922 in FY 2010 from \$12,582 in FY 2009.
- 2) The average *cost* per EIPA for regulated activities increased 1.6 percent to \$10,410 in FY 2010 from \$10,243 in FY 2009.
- 3) The average *payment* received by Maryland hospitals per EIPA for regulated activities increased by 2 percent to \$10,983 in FY 2010 from \$10,767 in FY 2009.
- 4) Profits on regulated activities increased in FY 2010, from \$669 million (5.9 percent of regulated net operating revenue) in FY 2009 to \$715 million (or 6.2 percent of regulated net operating revenue).
- 5) Profits on operations (which include profits and losses from regulated and *unregulated* day-to-day activities) increased only slightly from \$319 million (or 2.6 percent of total net operating revenue) in FY 2009 to \$328 million in FY 2010 (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) increased substantially from a loss of \$2 million in FY 2009 (or -0.01 percent of the total revenue) to \$481 million in FY 2010 (or 3.8 percent of the total revenue), largely due to realized and unrealized investment gains.

- 7) Total regulated net patient revenue rose slightly from approximately \$11.2 billion in FY 2009 to \$11.4 billion in FY 2010, an increase of 1.9 percent, due, in part, to a 1.4 percent decrease in admissions.

Outpatient gross revenue was \$4.4 billion. This represented an increase of 5 percent in FY 2010 compared with an increase of 9 percent in FY 2009. As a percentage of total revenue, outpatient revenue increased to 33 percent in FY 2010.

Regulated hospital admissions decreased from 703,323 in FY 2009 to 693,284 in FY 2010, or 1.4 percent. In addition, hospital emergency room and clinic visits increased from 4,340,139 in FY 2009 to 4,607,959 in FY 2010, or 6 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 2010, Maryland hospitals incurred \$926 million of uncompensated care, approximately seven cents of uncompensated care cost for every dollar of gross patient revenue; approximately 83 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, 2010, August 31, 2010
and December 31, 2010**

By:

HEALTH SERVICES COST REVIEW COMMISSION

September 14, 2011

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.

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.

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, 2010 are included with data from hospitals with June 30 and August 31, 2010 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.

In 2009, the Commission standardized the reporting of non-operating revenue and expenses to conform to the generally accepted accounting principles utilized in the preparation of hospital audited financial statements. Non-operating revenue and expenses reported include but are not limited to: unrestricted contributions, interest and investment income, realized investment gains and losses, unrealized investment gains and losses, and realized swap agreements gains and losses.

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)

Exhibit VII – Change in Excess Profit/Loss (Operating and Non-operating Activities)

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, 2010 and December 31, 2010).

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 under Financial Data Reports/Financial Disclosure on the HSCRC website at [HTTP://www.hscrc.state.md.us](http://www.hscrc.state.md.us).

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 November 19, 2009, the Western Maryland Health System closed Braddock Hospital and Memorial Hospital of Cumberland and opened Western Maryland Regional Medical Center.

**HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEARS 2010 - 2008**

ACUTE HOSPITALS TOTAL:

FISCAL YEAR ENDING	Year 2010	Year 2009	Year 2008
Gross Patient Revenue:			
Regulated Services	13,386,874,793	13,053,765,718	12,357,637,229
Unregulated Services	1,465,864,371	1,351,841,962	1,293,587,454
Total	14,852,739,164	14,405,607,680	13,651,224,683
Net Patient Revenue(NPR):			
Regulated Services	11,378,307,015	11,171,235,693	10,559,199,171
Unregulated Services	729,924,431	688,135,797	665,302,388
Total	12,108,231,446	11,859,371,490	11,224,501,559
Other Operating Revenue:			
Regulated Services	121,582,218	124,576,383	145,139,226
Unregulated Services	375,591,936	341,341,500	300,642,001
Total	497,174,154	465,917,883	445,781,227
Net Operating Revenue(NOR)			
Regulated Services	11,499,889,233	11,295,812,076	10,704,338,397
Unregulated Services	1,105,516,367	1,029,477,296	965,944,389
Total	12,605,405,600	12,325,289,372	11,670,282,786
Total Operating Expenses:			
Regulated Services	10,784,939,280	10,627,077,625	10,143,272,472
Total	12,277,293,119	12,005,981,091	11,399,480,954
Equivalent Inpatient ADMs (EIPA) :			
Regulated Services	1,036,000	1,037,501	1,011,171
Total	1,123,111	1,109,990	1,083,395
NPR per EIPA			
Regulated Services	10,982.92	10,767.45	10,442.55
Total	10,780.97	10,684.21	10,360.49
NOR per EIPA			
Regulated Services	11,100.28	10,877.52	10,586.08
Total	11,223.65	11,103.96	10,771.96
Operating Expenses per EIPA			
Regulated Services	10,410.17	10,242.96	10,031.21
Total	10,931.50	10,816.30	10,522.00
Net Operating Profit (Loss):			
Regulated Services	714,949,953	668,734,451	561,065,925
Unregulated Services	(386,837,472)	(349,426,169)	(290,264,092)
Total	328,112,481	319,308,282	270,801,833
Total Non-Operating Profit (Loss):	153,034,059	(321,089,660)	(113,346,967)
Non-Operating Revenue	173,932,166	(165,193,706)	11,087,375
Non-Operating Expense	20,898,107	155,895,954	124,434,342
Total Excess Profit	481,146,540	(1,781,378)	157,454,866
% Change in NPR per EIPA - Regulated	2.00	3.11	4.02
% Change in NOR per EIPA - Regulated	2.05	2.75	3.87
% Change in Operating Expense per EIPA - Regulated	1.63	2.11	4.02
% Change in Net Operating Profit - Regulated	6.91	19.19	4.64
% Net Operating Profit of Regulated NOR	6.22	5.92	5.24
% Change in Net Operating Profit- Total	2.76	17.91	(17.72)
% Net Total Operating Profit of Total NOR	2.60	2.59	2.32
% Change in Total Excess Profit	27,109.79	(101.13)	(72.97)
% Total Excess Profit of Total Revenue	3.77	(0.01)	1.35

**HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEARS 2010 - 2008**

ACUTE HOSPITALS TOTAL:

FISCAL YEAR ENDING	Year 2010	Year 2009	Year 2008
Gross Patient Revenue:			
Regulated Services	13,386,874,793	13,053,765,718	12,357,637,229
Unregulated Services	1,465,864,371	1,351,841,962	1,293,587,454
Total	14,852,739,164	14,405,607,680	13,651,224,683
Net Patient Revenue(NPR):			
Regulated Services	11,378,307,015	11,171,235,693	10,559,199,171
Unregulated Services	729,924,431	688,135,797	665,302,388
Total	12,108,231,446	11,859,371,490	11,224,501,559
Other Operating Revenue:			
Regulated Services	121,582,218	124,576,383	145,139,226
Unregulated Services	375,591,936	341,341,500	300,642,001
Total	497,174,154	465,917,883	445,781,227
Net Operating Revenue(NOR)			
Regulated Services	11,499,889,233	11,295,812,076	10,704,338,397
Unregulated Services	1,105,516,367	1,029,477,296	965,944,389
Total	12,605,405,600	12,325,289,372	11,670,282,786
Total Operating Expenses:			
Regulated Services	10,784,939,280	10,627,077,625	10,143,272,472
Total	12,277,293,119	12,005,981,091	11,399,480,954
Equivalent Inpatient ADMs (EIPA) :			
Regulated Services	1,036,000	1,037,501	1,011,171
Total	1,123,111	1,109,990	1,083,395
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Regulated Services	10,982.92	10,767.45	10,442.55
Total	10,780.97	10,684.21	10,360.49
NOR per EIPA			
Regulated Services	11,100.28	10,877.52	10,586.08
Total	11,223.65	11,103.96	10,771.96
Operating Expenses per EIPA			
Regulated Services	10,410.17	10,242.96	10,031.21
Total	10,931.50	10,816.30	10,522.00
Net Operating Profit (Loss):			
Regulated Services	714,949,953	668,734,451	561,065,925
Unregulated Services	(386,837,472)	(349,426,169)	(290,264,092)
Total	328,112,481	319,308,282	270,801,833
Total Non-Operating Profit (Loss):	153,034,059	(321,089,660)	(113,346,967)
Non-Operating Revenue	173,932,166	(165,193,706)	11,087,375
Non-Operating Expense	20,898,107	155,895,954	124,434,342
Total Excess Profit	481,146,540	(1,781,378)	157,454,866
% Change in NPR per EIPA - Regulated	2.00	3.11	4.02
% Change in NOR per EIPA - Regulated	2.05	2.75	3.87
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% Net Operating Profit of Regulated NOR	6.22	5.92	5.24
% Change in Net Operating Profit- Total	2.76	17.91	(17.72)
% Net Total Operating Profit of Total NOR	2.60	2.59	2.32
% Change in Total Excess Profit	27,109.79	(101.13)	(72.97)
% Total Excess Profit of Total Revenue	3.77	(0.01)	1.35

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

Hospital	2009				2010				%(\$) Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
All Acute Hospitals	703,323	1,037,501	10,627,077,625	10,242.96	693,284	1,036,000	10,784,939,280	10,410.18	1.63%
Anne Arundel Medical Center	24,545	37,124	323,481,921	8,713.45	24,309	38,222	338,052,332	8,844.44	1.50%
Atlantic General Hospital	3,781	7,631	59,338,561	7,776.37	3,964	8,251	63,446,909	7,689.29	(1.12%)
Baltimore Washington Medical Center	19,662	29,941	263,483,958	8,800.22	20,556	31,830	275,681,538	8,661.18	(1.58%)
Bon Secours Hospital	7,297	10,932	87,326,019	7,988.24	7,450	10,732	88,260,009	8,223.89	2.95%
Braddock Hospital	9,407	17,988	132,631,877	7,373.43	.	.	.	.	.
Calvert Memorial Hospital	8,333	14,749	90,842,718	6,159.18	7,929	15,490	97,660,195	6,304.87	2.37%
Carroll Hospital Center	16,178	21,787	161,702,356	7,422.12	16,139	22,366	167,347,659	7,482.11	0.81%
Chester River Hospital Center	3,446	6,595	51,011,116	7,734.50	3,286	6,386	51,116,572	8,004.84	3.50%
Civista Medical Center	7,776	11,783	88,810,903	7,536.91	8,305	12,436	93,008,782	7,478.94	(0.77%)
Doctors' Community Hospital	11,932	19,714	153,617,218	7,792.45	12,393	19,629	162,992,683	8,303.49	6.56%
Dorchester General Hospital	3,686	6,344	43,095,616	6,793.32	3,549	6,229	42,143,033	6,765.63	(0.41%)
Edward McCready Memorial Hospital	668	1,801	9,891,535	5,491.63	616	1,736	11,413,281	6,572.86	19.69%
Fort Washington Medical Center	3,140	6,295	36,925,172	5,865.82	3,094	5,963	36,523,900	6,125.43	4.43%
Franklin Square Hospital Center	28,001	39,391	322,365,732	8,183.76	27,770	40,072	321,032,279	8,011.33	(2.11%)
Frederick Memorial Hospital	17,503	27,652	221,636,962	8,015.20	18,910	29,886	232,289,402	7,772.63	(3.03%)
Garrett County Memorial Hospital	2,597	4,936	29,787,595	6,034.77	2,572	4,882	29,121,065	5,965.24	(1.15%)
Good Samaritan Hospital	17,381	23,949	227,853,252	9,514.13	17,046	24,188	230,578,507	9,532.88	0.20%
Greater Baltimore Medical Center	21,550	36,623	325,771,985	8,895.40	20,379	36,297	334,819,819	9,224.45	3.70%
Harbor Hospital	13,776	18,443	165,072,123	8,950.48	12,897	17,511	156,405,328	8,931.94	(0.21%)
Harford Memorial Hospital	7,235	11,686	75,803,751	6,486.92	6,720	11,255	76,898,545	6,832.53	5.33%
Holy Cross Hospital	27,980	38,000	309,458,016	8,143.55	28,480	38,770	311,789,082	8,041.92	(1.25%)
Howard County General Hospital	14,354	22,589	187,698,057	8,309.19	15,548	23,760	201,837,199	8,494.65	2.23%
James Lawrence Kernan Hospital	3,316	5,087	91,630,182	18,012.24	3,248	4,997	87,012,906	17,411.99	(3.33%)
Johns Hopkins Bayview Medical Center	21,959	33,167	427,307,515	12,883.58	21,961	33,626	427,728,068	12,720.23	(1.27%)
Johns Hopkins Hospital	46,887	69,843	1,359,674,406	19,467.66	46,599	70,234	1,425,987,171	20,303.23	4.29%
Laurel Regional Medical Center	6,450	10,045	83,281,501	8,290.46	6,197	9,669	85,563,681	8,849.29	6.74%
Maryland General Hospital	11,363	14,862	142,361,768	9,579.23	10,923	14,282	136,446,598	9,553.50	(0.27%)
Memorial Hosp and Med Ctr of Cumberla	7,660	11,167	83,282,630	7,457.92	.	.	.	.	.
Memorial Hospital at Easton	10,015	16,349	134,106,845	8,202.96	9,739	16,433	133,188,248	8,104.83	(1.20%)
Mercy Medical Center	18,437	33,604	304,063,622	9,048.31	18,447	33,527	307,650,947	9,176.30	1.41%
Montgomery General Hospital	10,263	14,591	115,736,158	7,931.97	9,764	14,228	115,963,398	8,150.33	2.75%
Northwest Hospital Center	12,782	20,971	159,137,100	7,588.35	13,292	21,733	161,514,213	7,431.89	(2.06%)
Peninsula Regional Medical Center	21,266	31,193	303,144,053	9,718.48	21,789	31,730	304,760,053	9,604.85	(1.17%)
Prince George's Hospital Center	14,355	18,250	212,101,859	11,622.32	13,724	17,809	209,892,050	11,785.80	1.41%

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

Hospital	2009				2010				%(\$) Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
Saint Agnes Hospital	21,596	30,686	275,685,027	8,983.98	21,720	30,735	275,390,240	8,960.12	(0.27%)
Saint Joseph Medical Center	23,448	31,752	322,090,976	10,143.82	18,931	28,322	299,994,287	10,592.09	4.42%
Saint Mary's Hospital	9,861	17,592	97,770,605	5,557.75	9,102	17,586	93,942,446	5,341.95	(3.88%)
Shady Grove Adventist Hospital	22,102	33,450	270,417,774	8,084.28	21,940	32,832	270,989,498	8,253.81	2.10%
Sinai Hospital of Baltimore	26,119	39,792	500,512,326	12,578.16	26,001	39,398	497,428,352	12,625.73	0.38%
Southern Maryland Hospital Center	17,095	23,928	179,924,946	7,519.52	17,156	23,770	178,386,000	7,504.82	(0.20%)
Suburban Hospital	14,602	19,929	195,403,393	9,805.19	13,693	19,302	198,393,041	10,278.48	4.83%
Union Hospital of Cecil County	8,521	15,761	99,599,700	6,319.36	7,986	15,251	102,497,000	6,720.65	6.35%
Union Memorial Hospital	20,587	27,166	326,289,867	12,011.07	19,226	26,044	311,343,631	11,954.50	(0.47%)
University MIEMSS	7,315	7,614	140,611,809	18,467.48	7,701	8,185	138,860,132	16,965.57	(8.13%)
University UMCC	1,270	2,583	66,041,802	25,571.20	1,227	2,369	60,541,351	25,555.84	(0.06%)
University of Maryland Medical Center	26,629	35,291	760,178,731	21,540.43	28,263	37,747	798,890,900	21,164.27	(1.75%)
Upper Chesapeake Medical Center	15,407	24,221	171,205,099	7,068.37	14,223	23,493	174,081,113	7,409.98	4.83%
Washington Adventist Hospital	17,570	23,034	236,950,644	10,286.96	15,983	20,602	222,235,425	10,787.22	4.86%
Washington County Hospital	16,220	24,851	200,960,847	8,086.52	16,192	24,861	211,006,835	8,487.61	4.96%
Western Maryland Regional M. C.	.	.	.	.	16,345	26,550	232,833,577	8,769.57	.

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

Hospital	2009				2010				%(\$) Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
Edward McCready Memorial Hospital	668	1,801	9,891,535	5,491.63	616	1,736	11,413,281	6,572.86	19.69%
Laurel Regional Medical Center	6,450	10,045	83,281,501	8,290.46	6,197	9,669	85,563,681	8,849.29	6.74%
Doctors' Community Hospital	11,932	19,714	153,617,218	7,792.45	12,393	19,629	162,992,683	8,303.49	6.56%
Union Hospital of Cecil County	8,521	15,761	99,599,700	6,319.36	7,986	15,251	102,497,000	6,720.65	6.35%
Harford Memorial Hospital	7,235	11,686	75,803,751	6,486.92	6,720	11,255	76,898,545	6,832.53	5.33%
Washington County Hospital	16,220	24,851	200,960,847	8,086.52	16,192	24,861	211,006,835	8,487.61	4.96%
Washington Adventist Hospital	17,570	23,034	236,950,644	10,286.96	15,983	20,602	222,235,425	10,787.22	4.86%
Upper Chesapeake Medical Center	15,407	24,221	171,205,099	7,068.37	14,223	23,493	174,081,113	7,409.98	4.83%
Suburban Hospital	14,602	19,929	195,403,393	9,805.19	13,693	19,302	198,393,041	10,278.48	4.83%
Fort Washington Medical Center	3,140	6,295	36,925,172	5,865.82	3,094	5,963	36,523,900	6,125.43	4.43%
Saint Joseph Medical Center	23,448	31,752	322,090,976	10,143.82	18,931	28,322	299,994,287	10,592.09	4.42%
Johns Hopkins Hospital	46,887	69,843	1,359,674,406	19,467.66	46,599	70,234	1,425,987,171	20,303.23	4.29%
Greater Baltimore Medical Center	21,550	36,623	325,771,985	8,895.40	20,379	36,297	334,819,819	9,224.45	3.70%
Chester River Hospital Center	3,446	6,595	51,011,116	7,734.50	3,286	6,386	51,116,572	8,004.84	3.50%
Bon Secours Hospital	7,297	10,932	87,326,019	7,988.24	7,450	10,732	88,260,009	8,223.89	2.95%
Montgomery General Hospital	10,263	14,591	115,736,158	7,931.97	9,764	14,228	115,963,398	8,150.33	2.75%
Calvert Memorial Hospital	8,333	14,749	90,842,718	6,159.18	7,929	15,490	97,660,195	6,304.87	2.37%
Howard County General Hospital	14,354	22,589	187,698,057	8,309.19	15,548	23,760	201,837,199	8,494.65	2.23%
Shady Grove Adventist Hospital	22,102	33,450	270,417,774	8,084.28	21,940	32,832	270,989,498	8,253.81	2.10%
All Acute Hospitals	703,323	1,037,501	10,627,077,625	10,242.96	693,284	1,036,000	10,784,939,280	10,410.18	1.63%
Anne Arundel Medical Center	24,545	37,124	323,481,921	8,713.45	24,309	38,222	338,052,332	8,844.44	1.50%
Mercy Medical Center	18,437	33,604	304,063,622	9,048.31	18,447	33,527	307,650,947	9,176.30	1.41%
Prince George's Hospital Center	14,355	18,250	212,101,859	11,622.32	13,724	17,809	209,892,050	11,785.80	1.41%
Carroll Hospital Center	16,178	21,787	161,702,356	7,422.12	16,139	22,366	167,347,659	7,482.11	0.81%
Sinai Hospital of Baltimore	26,119	39,792	500,512,326	12,578.16	26,001	39,398	497,428,352	12,625.73	0.38%
Good Samaritan Hospital	17,381	23,949	227,853,252	9,514.13	17,046	24,188	230,578,507	9,532.88	0.20%
University UMCC	1,270	2,583	66,041,802	25,571.20	1,227	2,369	60,541,351	25,555.84	(0.06%)
Southern Maryland Hospital Center	17,095	23,928	179,924,946	7,519.52	17,156	23,770	178,386,000	7,504.82	(0.20%)
Harbor Hospital	13,776	18,443	165,072,123	8,950.48	12,897	17,511	156,405,328	8,931.94	(0.21%)
Saint Agnes Hospital	21,596	30,686	275,685,027	8,983.98	21,720	30,735	275,390,240	8,960.12	(0.27%)
Maryland General Hospital	11,363	14,862	142,361,768	9,579.23	10,923	14,282	136,446,598	9,553.50	(0.27%)
Dorchester General Hospital	3,686	6,344	43,095,616	6,793.32	3,549	6,229	42,143,033	6,765.63	(0.41%)
Union Memorial Hospital	20,587	27,166	326,289,867	12,011.07	19,226	26,044	311,343,631	11,954.50	(0.47%)
Civista Medical Center	7,776	11,783	88,810,903	7,536.91	8,305	12,436	93,008,782	7,478.94	(0.77%)

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

Hospital	2009				2010				%(\$) Change
	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	Admis- sions	EIPAs	Operating Expenses	Expense per EIPA	
Atlantic General Hospital	3,781	7,631	59,338,561	7,776.37	3,964	8,251	63,446,909	7,689.29	(1.12%)
Garrett County Memorial Hospital	2,597	4,936	29,787,595	6,034.77	2,572	4,882	29,121,065	5,965.24	(1.15%)
Peninsula Regional Medical Center	21,266	31,193	303,144,053	9,718.48	21,789	31,730	304,760,053	9,604.85	(1.17%)
Memorial Hospital at Easton	10,015	16,349	134,106,845	8,202.96	9,739	16,433	133,188,248	8,104.83	(1.20%)
Holy Cross Hospital	27,980	38,000	309,458,016	8,143.55	28,480	38,770	311,789,082	8,041.92	(1.25%)
Johns Hopkins Bayview Medical Center	21,959	33,167	427,307,515	12,883.58	21,961	33,626	427,728,068	12,720.23	(1.27%)
Baltimore Washington Medical Center	19,662	29,941	263,483,958	8,800.22	20,556	31,830	275,681,538	8,661.18	(1.58%)
University of Maryland Medical Center	26,629	35,291	760,178,731	21,540.43	28,263	37,747	798,890,900	21,164.27	(1.75%)
Northwest Hospital Center	12,782	20,971	159,137,100	7,588.35	13,292	21,733	161,514,213	7,431.89	(2.06%)
Franklin Square Hospital Center	28,001	39,391	322,365,732	8,183.76	27,770	40,072	321,032,279	8,011.33	(2.11%)
Frederick Memorial Hospital	17,503	27,652	221,636,962	8,015.20	18,910	29,886	232,289,402	7,772.63	(3.03%)
James Lawrence Kernan Hospital	3,316	5,087	91,630,182	18,012.24	3,248	4,997	87,012,906	17,411.99	(3.33%)
Saint Mary's Hospital	9,861	17,592	97,770,605	5,557.75	9,102	17,586	93,942,446	5,341.95	(3.88%)
University MIEMSS	7,315	7,614	140,611,809	18,467.48	7,701	8,185	138,860,132	16,965.57	(8.13%)
Memorial Hosp and Med Ctr of Cumberla	7,660	11,167	83,282,630	7,457.92	.	.	.	.	.
Braddock Hospital	9,407	17,988	132,631,877	7,373.43	.	.	.	.	.
Western Maryland Regional M. C.	.	.	.	.	16,345	26,550	232,833,577	8,769.57	.

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

Hospital	2009			2010			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Anne Arundel Medical Center	24,545	259,508,000	10,572.74	24,309	264,504,200	10,880.92	(0.96%)	2.91%
Atlantic General Hospital	3,781	37,898,500	10,023.41	3,964	40,445,900	10,203.30	4.84%	1.79%
Baltimore Washington Medical Center	19,662	203,144,700	10,331.84	20,556	214,439,600	10,431.97	4.55%	0.97%
Bon Secours Hospital	7,297	81,531,400	11,173.28	7,450	84,217,600	11,304.38	2.10%	1.17%
Braddock Hospital	9,407	87,266,700	9,276.78	.	.	.	.	.
Calvert Memorial Hospital	8,333	62,949,000	7,554.18	7,929	61,484,500	7,754.38	(4.85%)	2.65%
Carroll Hospital Center	16,178	145,658,300	9,003.48	16,139	145,929,800	9,042.06	(0.24%)	0.43%
Chester River Hospital Center	3,446	31,827,400	9,236.04	3,286	30,844,000	9,386.49	(4.64%)	1.63%
Civista Medical Center	7,776	68,380,300	8,793.76	8,305	74,448,900	8,964.35	6.80%	1.94%
Doctors' Community Hospital	11,932	114,226,400	9,573.11	12,393	123,791,200	9,988.80	3.86%	4.34%
Dorchester General Hospital	3,686	30,640,600	8,312.70	3,549	29,605,400	8,341.90	(3.72%)	0.35%
Edward McCready Memorial Hospital	668	6,237,916	9,338.20	616	6,627,281	10,758.57	(7.78%)	15.21%
Fort Washington Medical Center	3,140	23,564,891	7,504.74	3,094	23,219,508	7,504.69	(1.46%)	(0.00%)
Franklin Square Hospital Center	28,001	294,993,700	10,535.11	27,770	293,113,600	10,555.05	(0.82%)	0.19%
Frederick Memorial Hospital	17,503	168,905,000	9,650.06	18,910	178,735,500	9,451.90	8.04%	(2.05%)
Garrett County Memorial Hospital	2,597	19,368,300	7,457.95	2,572	20,932,500	8,138.61	(0.96%)	9.13%
Good Samaritan Hospital	17,381	207,780,200	11,954.44	17,046	207,770,800	12,188.83	(1.93%)	1.96%
Greater Baltimore Medical Center	21,550	231,350,500	10,735.52	20,379	231,627,600	11,365.99	(5.43%)	5.87%
Harbor Hospital	13,776	150,075,100	10,893.95	12,897	145,212,700	11,259.42	(6.38%)	3.35%
Harford Memorial Hospital	7,235	59,583,000	8,235.38	6,720	59,792,300	8,897.66	(7.12%)	8.04%
Holy Cross Hospital	27,980	290,448,900	10,380.59	28,480	302,151,400	10,609.25	1.79%	2.20%
Howard County General Hospital	14,354	146,585,900	10,212.20	15,548	160,213,300	10,304.43	8.32%	0.90%
James Lawrence Kernan Hospital	3,316	68,951,200	20,793.49	3,248	65,994,600	20,318.53	(2.05%)	(2.28%)
Johns Hopkins Bayview Medical Center	21,959	339,973,800	15,482.21	21,961	338,376,700	15,408.07	0.01%	(0.48%)
Johns Hopkins Hospital	46,887	1,087,731,000	23,198.99	46,599	1,133,951,400	24,334.24	(0.61%)	4.89%
Laurel Regional Medical Center	6,450	58,840,300	9,122.53	6,197	65,916,100	10,636.78	(3.92%)	16.60%
Maryland General Hospital	11,363	139,055,000	12,237.53	10,923	136,768,700	12,521.17	(3.87%)	2.32%
Memorial Hosp and Med Ctr of Cumberla	7,660	72,844,300	9,509.70	.	.	.	.	.
Memorial Hospital at Easton	10,015	98,034,400	9,788.76	9,739	95,278,600	9,783.20	(2.76%)	(0.06%)
Mercy Medical Center	18,437	209,676,600	11,372.60	18,447	213,884,800	11,594.56	0.05%	1.95%
Montgomery General Hospital	10,263	98,908,000	9,637.34	9,764	102,782,100	10,526.64	(4.86%)	9.23%
Northwest Hospital Center	12,782	129,040,400	10,095.48	13,292	131,180,300	9,869.12	3.99%	(2.24%)
Peninsula Regional Medical Center	21,266	262,668,700	12,351.58	21,789	270,774,400	12,427.11	2.46%	0.61%
Prince George's Hospital Center	14,355	204,968,200	14,278.52	13,724	193,887,500	14,127.62	(4.40%)	(1.06%)
Saint Agnes Hospital	21,596	252,575,400	11,695.47	21,720	252,642,900	11,631.81	0.57%	(0.54%)
Saint Joseph Medical Center	23,448	294,531,800	12,561.06	18,931	250,704,300	13,243.06	(19.26%)	5.43%
Saint Mary's Hospital	9,861	69,564,200	7,054.48	9,102	65,203,431	7,163.64	(7.70%)	1.55%

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

Hospital	2009			2010			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Shady Grove Adventist Hospital	22,102	218,890,107	9,903.63	21,940	224,107,548	10,214.56	(0.73%)	3.14%
Sinai Hospital of Baltimore	26,119	411,736,200	15,763.86	26,001	408,990,900	15,729.81	(0.45%)	(0.22%)
Southern Maryland Hospital Center	17,095	160,629,700	9,396.30	17,156	161,134,900	9,392.34	0.36%	(0.04%)
Suburban Hospital	14,602	167,237,800	11,453.07	13,693	166,084,300	12,129.14	(6.23%)	5.90%
Union Hospital of Cecil County	8,521	68,542,000	8,043.89	7,986	66,449,000	8,320.69	(6.28%)	3.44%
Union Memorial Hospital	20,587	313,625,300	15,234.14	19,226	295,217,300	15,355.11	(6.61%)	0.79%
University MIEMSS	7,315	148,744,200	20,334.14	7,701	154,748,900	20,094.65	5.28%	(1.18%)
University UMCC	1,270	26,011,300	20,481.34	1,227	28,594,800	23,304.65	(3.39%)	13.78%
University of Maryland Medical Center	26,629	709,361,500	26,638.68	28,263	759,029,500	26,855.94	6.14%	0.82%
Upper Chesapeake Medical Center	15,407	139,662,300	9,064.86	14,223	137,038,400	9,634.99	(7.68%)	6.29%
Washington Adventist Hospital	17,570	216,819,418	12,340.32	15,983	205,866,110	12,880.32	(9.03%)	4.38%
Washington County Hospital	16,220	158,613,400	9,778.88	16,192	163,020,800	10,067.98	(0.17%)	2.96%
Western Maryland Regional M. C.	.	.	.	16,345	171,669,500	10,502.88	.	.
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	703,323	8,849,161,232	12,581.93	693,284	8,958,405,378	12,921.70	(1.43%)	2.70%

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

Hospital	2009			2010			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Laurel Regional Medical Center	6,450	58,840,300	9,122.53	6,197	65,916,100	10,636.78	(3.92%)	16.60%
Edward McCready Memorial Hospital	668	6,237,916	9,338.20	616	6,627,281	10,758.57	(7.78%)	15.21%
University UMCC	1,270	26,011,300	20,481.34	1,227	28,594,800	23,304.65	(3.39%)	13.78%
Montgomery General Hospital	10,263	98,908,000	9,637.34	9,764	102,782,100	10,526.64	(4.86%)	9.23%
Garrett County Memorial Hospital	2,597	19,368,300	7,457.95	2,572	20,932,500	8,138.61	(0.96%)	9.13%
Harford Memorial Hospital	7,235	59,583,000	8,235.38	6,720	59,792,300	8,897.66	(7.12%)	8.04%
Upper Chesapeake Medical Center	15,407	139,662,300	9,064.86	14,223	137,038,400	9,634.99	(7.68%)	6.29%
Suburban Hospital	14,602	167,237,800	11,453.07	13,693	166,084,300	12,129.14	(6.23%)	5.90%
Greater Baltimore Medical Center	21,550	231,350,500	10,735.52	20,379	231,627,600	11,365.99	(5.43%)	5.87%
Saint Joseph Medical Center	23,448	294,531,800	12,561.06	18,931	250,704,300	13,243.06	(19.26%)	5.43%
Johns Hopkins Hospital	46,887	1,087,731,000	23,198.99	46,599	1,133,951,400	24,334.24	(0.61%)	4.89%
Washington Adventist Hospital	17,570	216,819,418	12,340.32	15,983	205,866,110	12,880.32	(9.03%)	4.38%
Doctors' Community Hospital	11,932	114,226,400	9,573.11	12,393	123,791,200	9,988.80	3.86%	4.34%
Union Hospital of Cecil County	8,521	68,542,000	8,043.89	7,986	66,449,000	8,320.69	(6.28%)	3.44%
Harbor Hospital	13,776	150,075,100	10,893.95	12,897	145,212,700	11,259.42	(6.38%)	3.35%
Shady Grove Adventist Hospital	22,102	218,890,107	9,903.63	21,940	224,107,548	10,214.56	(0.73%)	3.14%
Washington County Hospital	16,220	158,613,400	9,778.88	16,192	163,020,800	10,067.98	(0.17%)	2.96%
Anne Arundel Medical Center	24,545	259,508,000	10,572.74	24,309	264,504,200	10,880.92	(0.96%)	2.91%
Calvert Memorial Hospital	8,333	62,949,000	7,554.18	7,929	61,484,500	7,754.38	(4.85%)	2.65%
Maryland General Hospital	11,363	139,055,000	12,237.53	10,923	136,768,700	12,521.17	(3.87%)	2.32%
Holy Cross Hospital	27,980	290,448,900	10,380.59	28,480	302,151,400	10,609.25	1.79%	2.20%
Good Samaritan Hospital	17,381	207,780,200	11,954.44	17,046	207,770,800	12,188.83	(1.93%)	1.96%
Mercy Medical Center	18,437	209,676,600	11,372.60	18,447	213,884,800	11,594.56	0.05%	1.95%
Civista Medical Center	7,776	68,380,300	8,793.76	8,305	74,448,900	8,964.35	6.80%	1.94%
Atlantic General Hospital	3,781	37,898,500	10,023.41	3,964	40,445,900	10,203.30	4.84%	1.79%
Chester River Hospital Center	3,446	31,827,400	9,236.04	3,286	30,844,000	9,386.49	(4.64%)	1.63%
Saint Mary's Hospital	9,861	69,564,200	7,054.48	9,102	65,203,431	7,163.64	(7.70%)	1.55%
Bon Secours Hospital	7,297	81,531,400	11,173.28	7,450	84,217,600	11,304.38	2.10%	1.17%
Baltimore Washington Medical Center	19,662	203,144,700	10,331.84	20,556	214,439,600	10,431.97	4.55%	0.97%
Howard County General Hospital	14,354	146,585,900	10,212.20	15,548	160,213,300	10,304.43	8.32%	0.90%
University of Maryland Medical Center	26,629	709,361,500	26,638.68	28,263	759,029,500	26,855.94	6.14%	0.82%
Union Memorial Hospital	20,587	313,625,300	15,234.14	19,226	295,217,300	15,355.11	(6.61%)	0.79%
Peninsula Regional Medical Center	21,266	262,668,700	12,351.58	21,789	270,774,400	12,427.11	2.46%	0.61%
Carroll Hospital Center	16,178	145,658,300	9,003.48	16,139	145,929,800	9,042.06	(0.24%)	0.43%

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

Hospital	2009			2010			Volume % Change	Revenue % Change
	Admis- sions	Inpatient Revenue \$	Revenue Per Admission	Admis- sions	Inpatient Revenue \$	Revenue Per Admission		
Dorchester General Hospital	3,686	30,640,600	8,312.70	3,549	29,605,400	8,341.90	(3.72%)	0.35%
Franklin Square Hospital Center	28,001	294,993,700	10,535.11	27,770	293,113,600	10,555.05	(0.82%)	0.19%
Fort Washington Medical Center	3,140	23,564,891	7,504.74	3,094	23,219,508	7,504.69	(1.46%)	(0.00%)
Southern Maryland Hospital Center	17,095	160,629,700	9,396.30	17,156	161,134,900	9,392.34	0.36%	(0.04%)
Memorial Hospital at Easton	10,015	98,034,400	9,788.76	9,739	95,278,600	9,783.20	(2.76%)	(0.06%)
Sinai Hospital of Baltimore	26,119	411,736,200	15,763.86	26,001	408,990,900	15,729.81	(0.45%)	(0.22%)
Johns Hopkins Bayview Medical Center	21,959	339,973,800	15,482.21	21,961	338,376,700	15,408.07	0.01%	(0.48%)
Saint Agnes Hospital	21,596	252,575,400	11,695.47	21,720	252,642,900	11,631.81	0.57%	(0.54%)
Prince George's Hospital Center	14,355	204,968,200	14,278.52	13,724	193,887,500	14,127.62	(4.40%)	(1.06%)
University MIEMSS	7,315	148,744,200	20,334.14	7,701	154,748,900	20,094.65	5.28%	(1.18%)
Frederick Memorial Hospital	17,503	168,905,000	9,650.06	18,910	178,735,500	9,451.90	8.04%	(2.05%)
Northwest Hospital Center	12,782	129,040,400	10,095.48	13,292	131,180,300	9,869.12	3.99%	(2.24%)
James Lawrence Kernan Hospital	3,316	68,951,200	20,793.49	3,248	65,994,600	20,318.53	(2.05%)	(2.28%)
Memorial Hosp and Med Ctr of Cumberla	7,660	72,844,300	9,509.70	.	.	.	.	.
Braddock Hospital	9,407	87,266,700	9,276.78
Western Maryland Regional M. C.	.	.	.	16,345	171,669,500	10,502.88	.	.
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	703,323	8,849,161,232	12,581.93	693,284	8,958,405,378	12,921.70	(1.43%)	2.70%

CHANGE IN UNCOMPENSATED CARE (UCC) : EXHIBIT III-a
 REGULATED OPERATIONS
 Listed in Alphabetical Order by Region

Hospital Area	Hospital	2009			2010			% 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	392,507,100	16,811,415	4.28	415,890,500	19,615,913	4.72	16.68
	Baltimore Washington Medical Center	309,341,800	24,774,236	8.01	332,045,200	25,355,718	7.64	2.35
	Bon Secours Hospital	122,144,200	21,903,253	17.93	121,320,200	21,647,660	17.84	-1.17
	Doctors' Community Hospital	188,720,500	18,127,922	9.61	196,074,400	16,244,341	8.28	-10.39
	Fort Washington Medical Center	47,242,143	6,935,582	14.68	44,747,960	5,866,412	13.11	-15.42
	Franklin Square Hospital Center	414,987,900	30,124,835	7.26	422,965,000	25,280,517	5.98	-16.08
	Good Samaritan Hospital	286,296,100	15,172,695	5.30	294,819,900	17,250,100	5.85	13.69
	Greater Baltimore Medical Center	393,162,100	11,296,260	2.87	412,551,300	12,894,171	3.13	14.15
	Harbor Hospital	200,915,200	17,234,100	8.58	197,161,200	14,756,299	7.48	-14.38
	Holy Cross Hospital	394,466,500	29,871,516	7.57	411,325,700	32,258,317	7.84	7.99
	Howard County General Hospital	230,685,500	13,151,663	5.70	244,838,400	14,324,394	5.85	8.92
	James Lawrence Kernan Hospital	105,778,700	7,976,879	7.54	101,537,800	7,874,000	7.75	-1.29
	Johns Hopkins Bayview Medical Center	513,495,600	53,870,000	10.49	518,108,900	40,544,200	7.83	-24.74
	Johns Hopkins Hospital	1,620,280,400	106,940,061	6.60	1,709,103,100	69,493,300	4.07	-35.02
	Laurel Regional Medical Center	91,640,000	10,567,812	11.53	102,846,900	12,572,241	12.22	18.97
	Maryland General Hospital	181,868,000	23,902,302	13.14	178,831,900	18,183,454	10.17	-23.93
	Mercy Medical Center	382,169,900	30,487,033	7.98	388,727,200	31,845,360	8.19	4.46
	Montgomery General Hospital	140,619,400	8,463,900	6.02	149,773,600	10,553,957	7.05	24.69
	Northwest Hospital Center	211,714,700	17,538,800	8.28	214,481,500	18,018,500	8.40	2.74
	Prince George's Hospital Center	260,576,400	40,695,557	15.62	251,597,300	37,489,810	14.90	-7.88
	Saint Agnes Hospital	358,890,700	22,549,287	6.28	357,504,800	22,936,406	6.42	1.72
	Saint Joseph Medical Center	398,844,400	16,297,867	4.09	375,076,400	19,033,699	5.07	16.79
	Shady Grove Adventist Hospital	331,274,906	22,940,583	6.92	335,364,985	21,197,920	6.32	-7.60
	Sinai Hospital of Baltimore	627,278,200	48,565,300	7.74	619,723,100	34,503,000	5.57	-28.96
	Southern Maryland Hospital Center	224,831,800	18,092,278	8.05	223,251,200	18,915,433	8.47	4.55
	Suburban Hospital	228,243,300	11,622,100	5.09	234,114,100	11,285,000	4.82	-2.90
	Union Memorial Hospital	413,847,100	25,786,533	6.23	399,909,200	20,485,036	5.12	-20.56
	University MIEMSS	154,824,600	38,156,591	24.65	164,471,100	38,977,010	23.70	2.15
	University UMCC	52,896,400	7,735,748	14.62	55,208,300	7,041,000	12.75	-8.98
	University of Maryland Medical Cente	940,100,100	86,346,170	9.18	1,013,735,200	83,094,000	8.20	-3.77
	Upper Chesapeake Medical Center	219,562,700	15,294,900	6.97	226,352,700	15,245,150	6.74	-0.33
	Washington Adventist Hospital	284,247,984	24,567,884	8.64	265,356,838	24,778,718	9.34	0.86
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M E T R O		10,723,454,333	843,801,062	7.87	10,978,815,883	769,561,036	7.01	-8.80

CHANGE IN UNCOMPENSATED CARE (UCC) : EXHIBIT III-a
 REGULATED OPERATIONS
 Listed in Alphabetical Order by Region

Hospital Area	Hospital	2009			2010			% 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	76,484,900	4,750,100	6.21	84,190,900	5,635,600	6.69	18.64
	Braddock Hospital	166,869,000	8,389,000	5.03	.	.	.	.
	Calvert Memorial Hospital	111,417,900	6,528,075	5.86	120,112,700	7,215,131	6.01	10.52
	Carroll Hospital Center	196,154,700	8,748,590	4.46	202,238,000	8,885,880	4.39	1.57
	Chester River Hospital Center	60,914,200	6,454,293	10.60	59,939,400	5,539,678	9.24	-14.17
	Civista Medical Center	103,621,000	6,237,400	6.02	111,481,500	7,152,500	6.42	14.67
	Dorchester General Hospital	52,734,300	4,365,261	8.28	51,961,600	2,531,934	4.87	-42.00
	Edward McCready Memorial Hospital	16,819,985	1,747,845	10.39	18,681,464	2,253,275	12.06	28.92
	Frederick Memorial Hospital	266,844,200	15,403,081	5.77	282,475,300	16,012,032	5.67	3.95
	Garrett County Memorial Hospital	36,812,400	3,364,672	9.14	39,731,000	3,469,744	8.73	3.12
	Harford Memorial Hospital	96,235,600	11,314,200	11.76	100,141,200	10,596,400	10.58	-6.34
	Memorial Hosp and Med Ctr of Cumberl	106,194,800	4,831,300	4.55	.	.	.	.
	Memorial Hospital at Easton	160,032,300	7,928,623	4.95	160,769,200	6,975,875	4.34	-12.02
	Peninsula Regional Medical Center	385,277,000	24,844,400	6.45	394,310,100	25,144,200	6.38	1.21
	Saint Mary's Hospital	124,100,600	6,718,040	5.41	125,978,346	9,276,662	7.36	38.09
	Union Hospital of Cecil County	126,780,200	12,808,400	10.10	126,899,200	12,059,500	9.50	-5.85
	Washington County Hospital	243,018,300	20,694,200	8.52	250,295,900	20,774,200	8.30	0.39
	Western Maryland Regional M. C.	.	.	.	278,853,100	13,080,000	4.69	.
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R U R A L		2,330,311,385	155,127,480	6.66	2,408,058,910	156,602,612	6.50	0.95
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		13,053,765,718	998,928,542	7.65	13,386,874,793	926,163,648	6.92	-7.28

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

Hospital Area	Hospital	2009			2010			% Change UCC Amount
		Gross Revenues	Charity & Bad Debts	UCC %	Gross Revenues	Charity & Bad Debts	UCC %	
M E T R O	University MIEMSS	154,824,600	38,156,591	24.65	164,471,100	38,977,010	23.70	2.15
	Bon Secours Hospital	122,144,200	21,903,253	17.93	121,320,200	21,647,660	17.84	-1.17
	Prince George's Hospital Center	260,576,400	40,695,557	15.62	251,597,300	37,489,810	14.90	-7.88
	Fort Washington Medical Center	47,242,143	6,935,582	14.68	44,747,960	5,866,412	13.11	-15.42
	University UMCC	52,896,400	7,735,748	14.62	55,208,300	7,041,000	12.75	-8.98
	Laurel Regional Medical Center	91,640,000	10,567,812	11.53	102,846,900	12,572,241	12.22	18.97
	Maryland General Hospital	181,868,000	23,902,302	13.14	178,831,900	18,183,454	10.17	-23.93
	Washington Adventist Hospital	284,247,984	24,567,884	8.64	265,356,838	24,778,718	9.34	0.86
	Southern Maryland Hospital Center	224,831,800	18,092,278	8.05	223,251,200	18,915,433	8.47	4.55
	Northwest Hospital Center	211,714,700	17,538,800	8.28	214,481,500	18,018,500	8.40	2.74
	Doctors' Community Hospital	188,720,500	18,127,922	9.61	196,074,400	16,244,341	8.28	-10.39
	University of Maryland Medical Cente	940,100,100	86,346,170	9.18	1,013,735,200	83,094,000	8.20	-3.77
	Mercy Medical Center	382,169,900	30,487,033	7.98	388,727,200	31,845,360	8.19	4.46
	Holy Cross Hospital	394,466,500	29,871,516	7.57	411,325,700	32,258,317	7.84	7.99
	Johns Hopkins Bayview Medical Center	513,495,600	53,870,000	10.49	518,108,900	40,544,200	7.83	-24.74
	James Lawrence Kernan Hospital	105,778,700	7,976,879	7.54	101,537,800	7,874,000	7.75	-1.29
	Baltimore Washington Medical Center	309,341,800	24,774,236	8.01	332,045,200	25,355,718	7.64	2.35
	Harbor Hospital	200,915,200	17,234,100	8.58	197,161,200	14,756,299	7.48	-14.38
	Montgomery General Hospital	140,619,400	8,463,900	6.02	149,773,600	10,553,957	7.05	24.69
	Upper Chesapeake Medical Center	219,562,700	15,294,900	6.97	226,352,700	15,245,150	6.74	-0.33
	Saint Agnes Hospital	358,890,700	22,549,287	6.28	357,504,800	22,936,406	6.42	1.72
	Shady Grove Adventist Hospital	331,274,906	22,940,583	6.92	335,364,985	21,197,920	6.32	-7.60
	Franklin Square Hospital Center	414,987,900	30,124,835	7.26	422,965,000	25,280,517	5.98	-16.08
	Good Samaritan Hospital	286,296,100	15,172,695	5.30	294,819,900	17,250,100	5.85	13.69
	Howard County General Hospital	230,685,500	13,151,663	5.70	244,838,400	14,324,394	5.85	8.92
	Sinai Hospital of Baltimore	627,278,200	48,565,300	7.74	619,723,100	34,503,000	5.57	-28.96
	Union Memorial Hospital	413,847,100	25,786,533	6.23	399,909,200	20,485,036	5.12	-20.56
	Saint Joseph Medical Center	398,844,400	16,297,867	4.09	375,076,400	19,033,699	5.07	16.79
	Suburban Hospital	228,243,300	11,622,100	5.09	234,114,100	11,285,000	4.82	-2.90
	Anne Arundel Medical Center	392,507,100	16,811,415	4.28	415,890,500	19,615,913	4.72	16.68
	Johns Hopkins Hospital	1,620,280,400	106,940,061	6.60	1,709,103,100	69,493,300	4.07	-35.02
	Greater Baltimore Medical Center	393,162,100	11,296,260	2.87	412,551,300	12,894,171	3.13	14.15
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M E T R O		10,723,454,333	843,801,062	7.87	10,978,815,883	769,561,036	7.01	-8.80

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

Hospital Area	Hospital	2009			2010			% Change UCC Amount
		Gross Revenues	Charity & Bad Debts	UCC %	Gross Revenues	Charity & Bad Debts	UCC %	
R U R A L	Edward McCready Memorial Hospital	16,819,985	1,747,845	10.39	18,681,464	2,253,275	12.06	28.92
	Harford Memorial Hospital	96,235,600	11,314,200	11.76	100,141,200	10,596,400	10.58	-6.34
	Union Hospital of Cecil County	126,780,200	12,808,400	10.10	126,899,200	12,059,500	9.50	-5.85
	Chester River Hospital Center	60,914,200	6,454,293	10.60	59,939,400	5,539,678	9.24	-14.17
	Garrett County Memorial Hospital	36,812,400	3,364,672	9.14	39,731,000	3,469,744	8.73	3.12
	Washington County Hospital	243,018,300	20,694,200	8.52	250,295,900	20,774,200	8.30	0.39
	Saint Mary's Hospital	124,100,600	6,718,040	5.41	125,978,346	9,276,662	7.36	38.09
	Atlantic General Hospital	76,484,900	4,750,100	6.21	84,190,900	5,635,600	6.69	18.64
	Civista Medical Center	103,621,000	6,237,400	6.02	111,481,500	7,152,500	6.42	14.67
	Peninsula Regional Medical Center	385,277,000	24,844,400	6.45	394,310,100	25,144,200	6.38	1.21
	Calvert Memorial Hospital	111,417,900	6,528,075	5.86	120,112,700	7,215,131	6.01	10.52
	Frederick Memorial Hospital	266,844,200	15,403,081	5.77	282,475,300	16,012,032	5.67	3.95
	Dorchester General Hospital	52,734,300	4,365,261	8.28	51,961,600	2,531,934	4.87	-42.00
	Western Maryland Regional M. C.	.	.	.	278,853,100	13,080,000	4.69	.
	Carroll Hospital Center	196,154,700	8,748,590	4.46	202,238,000	8,885,880	4.39	1.57
	Memorial Hospital at Easton	160,032,300	7,928,623	4.95	160,769,200	6,975,875	4.34	-12.02
	Memorial Hosp and Med Ctr of Cumberl	106,194,800	4,831,300	4.55	.	.	.	.
	Braddock Hospital	166,869,000	8,389,000	5.03	.	.	.	.
=====		=====	=====	=====	=====	=====	=====	=====
R U R A L		2,330,311,385	155,127,480	6.66	2,408,058,910	156,602,612	6.50	0.95
		=====	=====	=====	=====	=====	=====	=====
		13,053,765,718	998,928,542	7.65	13,386,874,793	926,163,648	6.92	-7.28

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

Hospital	2009			2010			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
All Acute Hospitals	11,171,235,693	1,037,501	10,767.45	11,378,307,015	1,036,000	10,982.92	2.00
Anne Arundel Medical Center	344,010,185	37,124	9,266.41	358,018,187	38,222	9,366.81	1.08
Atlantic General Hospital	66,120,200	7,631	8,665.10	70,677,900	8,251	8,565.63	-1.15
Baltimore Washington Medical Center	262,470,466	29,941	8,766.37	281,900,262	31,830	8,856.55	1.03
Bon Secours Hospital	93,446,808	10,932	8,548.15	97,905,389	10,732	9,122.63	6.72
Calvert Memorial Hospital	97,651,503	14,749	6,620.81	102,380,283	15,490	6,609.59	-0.17
Carroll Hospital Center	172,583,312	21,787	7,921.56	176,005,258	22,366	7,869.19	-0.66
Chester River Hospital Center	50,049,509	6,595	7,588.70	50,998,039	6,386	7,986.27	5.24
Civista Medical Center	88,273,027	11,783	7,491.26	94,973,916	12,436	7,636.95	1.94
Doctors' Community Hospital	156,598,647	19,714	7,943.69	167,544,370	19,629	8,535.37	7.45
Dorchester General Hospital	44,424,176	6,344	7,002.74	44,769,075	6,229	7,187.21	2.63
Edward McCready Memorial Hospital	13,674,977	1,801	7,592.14	14,374,135	1,736	8,278.00	9.03
Fort Washington Medical Center	38,272,727	6,295	6,079.89	36,812,178	5,963	6,173.78	1.54
Franklin Square Hospital Center	355,664,346	39,391	9,029.09	363,651,606	40,072	9,074.89	0.51
Frederick Memorial Hospital	228,268,395	27,652	8,255.02	243,069,472	29,886	8,133.35	-1.47
Garrett County Memorial Hospital	31,258,085	4,936	6,332.68	32,709,321	4,882	6,700.27	5.80
Good Samaritan Hospital	245,593,552	23,949	10,254.89	246,725,068	24,188	10,200.43	-0.53
Greater Baltimore Medical Center	351,006,608	36,623	9,584.44	359,160,116	36,297	9,895.04	3.24
Harbor Hospital	169,691,122	18,443	9,200.93	164,310,074	17,511	9,383.37	1.98
Harford Memorial Hospital	78,372,221	11,686	6,706.72	81,680,300	11,255	7,257.39	8.21
Holy Cross Hospital	332,740,684	38,000	8,756.24	341,997,483	38,770	8,821.08	0.74
Howard County General Hospital	202,845,676	22,589	8,979.76	211,253,743	23,760	8,890.97	-0.99
James Lawrence Kernan Hospital	93,226,825	5,087	18,326.10	87,319,800	4,997	17,473.40	-4.65
Johns Hopkins Bayview Medical Center	431,873,500	33,167	13,021.25	430,968,800	33,626	12,816.61	-1.57
Johns Hopkins Hospital	1,412,843,376	69,843	20,228.93	1,480,465,000	70,234	21,078.89	4.20
Laurel Regional Medical Center	76,473,729	10,045	7,612.76	85,075,631	9,669	8,798.81	15.58
Maryland General Hospital	156,919,437	14,862	10,558.79	153,660,657	14,282	10,758.77	1.89
Memorial Hosp and Med Ctr of Cumberla	88,316,900	11,167	7,908.74	.	.	.	.
Memorial Hospital at Easton	139,245,218	16,349	8,517.27	137,414,364	16,433	8,362.00	-1.82
Mercy Medical Center	334,232,485	33,604	9,946.08	335,374,561	33,527	10,003.21	0.57
Montgomery General Hospital	121,977,000	14,591	8,359.68	124,219,621	14,228	8,730.61	4.44
Northwest Hospital Center	178,142,957	20,971	8,494.63	178,377,100	21,733	8,207.81	-3.38
Peninsula Regional Medical Center	331,729,600	31,193	10,634.91	332,910,100	31,730	10,492.03	-1.34

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

Hospital	2009			2010			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
Prince George's Hospital Center	210,964,197	18,250	11,559.98	204,287,834	17,809	11,471.11	-0.77
Saint Agnes Hospital	307,252,556	30,686	10,012.70	307,715,930	30,735	10,011.87	-0.01
Saint Joseph Medical Center	339,694,906	31,752	10,698.23	307,247,166	28,322	10,848.17	1.40
Saint Mary's Hospital	105,768,160	17,592	6,012.37	102,454,852	17,586	5,826.00	-3.10
Shady Grove Adventist Hospital	283,847,908	33,450	8,485.78	292,739,292	32,832	8,916.27	5.07
Sinai Hospital of Baltimore	536,920,130	39,792	13,493.11	534,915,500	39,398	13,577.23	0.62
Southern Maryland Hospital Center	188,617,305	23,928	7,882.80	186,636,112	23,770	7,851.91	-0.39
Suburban Hospital	199,185,500	19,929	9,994.98	201,587,614	19,302	10,443.99	4.49
Union Hospital of Cecil County	105,285,300	15,761	6,680.09	104,653,300	15,251	6,862.04	2.72
Union Memorial Hospital	353,456,109	27,166	13,011.09	336,918,166	26,044	12,936.47	-0.57
University MIEMSS	125,289,009	7,614	16,455.03	139,630,090	8,185	17,059.64	3.67
University UMCC	41,266,652	2,583	15,978.33	41,627,000	2,369	17,571.68	9.97
University of Maryland Medical Center	819,239,930	35,291	23,213.99	873,940,200	37,747	23,152.48	-0.26
Upper Chesapeake Medical Center	187,017,300	24,221	7,721.19	188,744,950	23,493	8,034.16	4.05
Washington Adventist Hospital	233,793,878	23,034	10,149.91	225,153,003	20,602	10,928.84	7.67
Washington County Hospital	203,634,400	24,851	8,194.10	209,148,200	24,861	8,412.85	2.67
Western Maryland Regional M. C.	.	.	.	234,206,000	26,550	8,821.26	.

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

Hospital	2009			2010			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
University of Maryland Medical Center	819,239,930	35,291	23,213.99	873,940,200	37,747	23,152.48	-0.26
Johns Hopkins Hospital	1,412,843,376	69,843	20,228.93	1,480,465,000	70,234	21,078.89	4.20
University UMCC	41,266,652	2,583	15,978.33	41,627,000	2,369	17,571.68	9.97
James Lawrence Kernan Hospital	93,226,825	5,087	18,326.10	87,319,800	4,997	17,473.40	-4.65
University MIEMSS	125,289,009	7,614	16,455.03	139,630,090	8,185	17,059.64	3.67
Sinai Hospital of Baltimore	536,920,130	39,792	13,493.11	534,915,500	39,398	13,577.23	0.62
Union Memorial Hospital	353,456,109	27,166	13,011.09	336,918,166	26,044	12,936.47	-0.57
Johns Hopkins Bayview Medical Center	431,873,500	33,167	13,021.25	430,968,800	33,626	12,816.61	-1.57
Prince George's Hospital Center	210,964,197	18,250	11,559.98	204,287,834	17,809	11,471.11	-0.77
All Acute Hospitals	11,171,235,693	1,037,501	10,767.45	11,378,307,015	1,036,000	10,982.92	2.00
Washington Adventist Hospital	233,793,878	23,034	10,149.91	225,153,003	20,602	10,928.84	7.67
Saint Joseph Medical Center	339,694,906	31,752	10,698.23	307,247,166	28,322	10,848.17	1.40
Maryland General Hospital	156,919,437	14,862	10,558.79	153,660,657	14,282	10,758.77	1.89
Peninsula Regional Medical Center	331,729,600	31,193	10,634.91	332,910,100	31,730	10,492.03	-1.34
Suburban Hospital	199,185,500	19,929	9,994.98	201,587,614	19,302	10,443.99	4.49
Good Samaritan Hospital	245,593,552	23,949	10,254.89	246,725,068	24,188	10,200.43	-0.53
Saint Agnes Hospital	307,252,556	30,686	10,012.70	307,715,930	30,735	10,011.87	-0.01
Mercy Medical Center	334,232,485	33,604	9,946.08	335,374,561	33,527	10,003.21	0.57
Greater Baltimore Medical Center	351,006,608	36,623	9,584.44	359,160,116	36,297	9,895.04	3.24
Harbor Hospital	169,691,122	18,443	9,200.93	164,310,074	17,511	9,383.37	1.98
Anne Arundel Medical Center	344,010,185	37,124	9,266.41	358,018,187	38,222	9,366.81	1.08
Bon Secours Hospital	93,446,808	10,932	8,548.15	97,905,389	10,732	9,122.63	6.72
Franklin Square Hospital Center	355,664,346	39,391	9,029.09	363,651,606	40,072	9,074.89	0.51
Shady Grove Adventist Hospital	283,847,908	33,450	8,485.78	292,739,292	32,832	8,916.27	5.07
Howard County General Hospital	202,845,676	22,589	8,979.76	211,253,743	23,760	8,890.97	-0.99
Baltimore Washington Medical Center	262,470,466	29,941	8,766.37	281,900,262	31,830	8,856.55	1.03
Western Maryland Regional M. C.	.	.	.	234,206,000	26,550	8,821.26	.
Holy Cross Hospital	332,740,684	38,000	8,756.24	341,997,483	38,770	8,821.08	0.74
Laurel Regional Medical Center	76,473,729	10,045	7,612.76	85,075,631	9,669	8,798.81	15.58
Montgomery General Hospital	121,977,000	14,591	8,359.68	124,219,621	14,228	8,730.61	4.44
Atlantic General Hospital	66,120,200	7,631	8,665.10	70,677,900	8,251	8,565.63	-1.15
Doctors' Community Hospital	156,598,647	19,714	7,943.69	167,544,370	19,629	8,535.37	7.45
Washington County Hospital	203,634,400	24,851	8,194.10	209,148,200	24,861	8,412.85	2.67
Memorial Hospital at Easton	139,245,218	16,349	8,517.27	137,414,364	16,433	8,362.00	-1.82
Edward McCready Memorial Hospital	13,674,977	1,801	7,592.14	14,374,135	1,736	8,278.00	9.03

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

Hospital	2009			2010			% Change NPR Per EIPA
	Net Patient Revenue	EIPAs	NPR Per EIPA	Net Patient Revenue	EIPAs	NPR Per EIPA	
Northwest Hospital Center	178,142,957	20,971	8,494.63	178,377,100	21,733	8,207.81	-3.38
Frederick Memorial Hospital	228,268,395	27,652	8,255.02	243,069,472	29,886	8,133.35	-1.47
Upper Chesapeake Medical Center	187,017,300	24,221	7,721.19	188,744,950	23,493	8,034.16	4.05
Chester River Hospital Center	50,049,509	6,595	7,588.70	50,998,039	6,386	7,986.27	5.24
Carroll Hospital Center	172,583,312	21,787	7,921.56	176,005,258	22,366	7,869.19	-0.66
Southern Maryland Hospital Center	188,617,305	23,928	7,882.80	186,636,112	23,770	7,851.91	-0.39
Civista Medical Center	88,273,027	11,783	7,491.26	94,973,916	12,436	7,636.95	1.94
Harford Memorial Hospital	78,372,221	11,686	6,706.72	81,680,300	11,255	7,257.39	8.21
Dorchester General Hospital	44,424,176	6,344	7,002.74	44,769,075	6,229	7,187.21	2.63
Union Hospital of Cecil County	105,285,300	15,761	6,680.09	104,653,300	15,251	6,862.04	2.72
Garrett County Memorial Hospital	31,258,085	4,936	6,332.68	32,709,321	4,882	6,700.27	5.80
Calvert Memorial Hospital	97,651,503	14,749	6,620.81	102,380,283	15,490	6,609.59	-0.17
Fort Washington Medical Center	38,272,727	6,295	6,079.89	36,812,178	5,963	6,173.78	1.54
Saint Mary's Hospital	105,768,160	17,592	6,012.37	102,454,852	17,586	5,826.00	-3.10
Memorial Hosp and Med Ctr of Cumberla	88,316,900	11,167	7,908.74	.	.	.	.
Braddock Hospital	142,005,200	17,988	7,894.52	.	.	.	.

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

Hospital	2009			2010			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
All Acute Hospitals	11,295,812,076	1,037,501	10,887.52	11,499,889,233	1,036,000	11,100.28	1.95
Anne Arundel Medical Center	349,124,785	37,124	9,404.18	360,830,187	38,222	9,440.38	0.38
Atlantic General Hospital	66,165,700	7,631	8,671.07	70,992,991	8,251	8,603.82	-0.78
Baltimore Washington Medical Center	263,301,691	29,941	8,794.13	283,374,875	31,830	8,902.88	1.24
Bon Secours Hospital	93,804,271	10,932	8,580.85	102,685,956	10,732	9,568.07	11.50
Braddock Hospital	142,005,200	17,988	7,894.52	.	.	.	.
Calvert Memorial Hospital	98,913,228	14,749	6,706.36	104,707,459	15,490	6,759.83	0.80
Carroll Hospital Center	173,755,553	21,787	7,975.36	177,318,406	22,366	7,927.90	-0.60
Chester River Hospital Center	50,448,562	6,595	7,649.20	51,271,495	6,386	8,029.10	4.97
Civista Medical Center	88,714,018	11,783	7,528.69	95,022,684	12,436	7,640.88	1.49
Doctors' Community Hospital	157,974,419	19,714	8,013.48	167,694,982	19,629	8,543.04	6.61
Dorchester General Hospital	45,070,325	6,344	7,104.60	45,470,660	6,229	7,299.85	2.75
Edward McCready Memorial Hospital	13,688,901	1,801	7,599.87	14,387,093	1,736	8,285.46	9.02
Fort Washington Medical Center	38,687,792	6,295	6,145.82	37,325,560	5,963	6,259.88	1.86
Franklin Square Hospital Center	357,895,394	39,391	9,085.73	366,053,438	40,072	9,134.82	0.54
Frederick Memorial Hospital	233,970,884	27,652	8,461.24	248,531,944	29,886	8,316.13	-1.72
Garrett County Memorial Hospital	31,369,000	4,936	6,355.15	32,921,208	4,882	6,743.67	6.11
Good Samaritan Hospital	247,846,688	23,949	10,348.97	249,424,890	24,188	10,312.05	-0.36
Greater Baltimore Medical Center	355,552,503	36,623	9,708.57	362,510,833	36,297	9,987.35	2.87
Harbor Hospital	172,363,135	18,443	9,345.81	166,517,673	17,511	9,509.44	1.75
Harford Memorial Hospital	79,082,621	11,686	6,767.51	82,444,000	11,255	7,325.25	8.24
Holy Cross Hospital	335,161,284	38,000	8,819.94	343,394,183	38,770	8,857.10	0.42
Howard County General Hospital	202,898,123	22,589	8,982.08	211,297,428	23,760	8,892.80	-0.99
James Lawrence Kernan Hospital	94,113,760	5,087	18,500.45	87,916,871	4,997	17,592.88	-4.91
Johns Hopkins Bayview Medical Center	441,163,400	33,167	13,301.35	437,999,400	33,626	13,025.69	-2.07
Johns Hopkins Hospital	1,425,445,076	69,843	20,409.36	1,493,443,862	70,234	21,263.68	4.19
Laurel Regional Medical Center	77,224,783	10,045	7,687.53	85,506,210	9,669	8,843.34	15.03
Maryland General Hospital	158,094,097	14,862	10,637.83	153,942,311	14,282	10,778.49	1.32
Memorial Hosp and Med Ctr of Cumberla	88,733,800	11,167	7,946.07	.	.	.	.
Memorial Hospital at Easton	141,015,514	16,349	8,625.55	139,221,175	16,433	8,471.95	-1.78
Mercy Medical Center	337,994,222	33,604	10,058.02	339,231,791	33,527	10,118.26	0.60
Montgomery General Hospital	123,134,800	14,591	8,439.03	125,736,633	14,228	8,837.23	4.72
Northwest Hospital Center	179,366,557	20,971	8,552.98	179,400,280	21,733	8,254.90	-3.49

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

Hospital	2009			2010			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
Peninsula Regional Medical Center	332,602,500	31,193	10,662.89	333,818,900	31,730	10,520.67	-1.33
Prince George's Hospital Center	211,849,168	18,250	11,608.47	206,067,664	17,809	11,571.06	-0.32
Saint Agnes Hospital	310,842,634	30,686	10,129.69	309,668,125	30,735	10,075.39	-0.54
Saint Joseph Medical Center	340,774,543	31,752	10,732.23	307,388,501	28,322	10,853.16	1.13
Saint Mary's Hospital	107,208,560	17,592	6,094.25	104,714,071	17,586	5,954.47	-2.29
Shady Grove Adventist Hospital	286,491,123	33,450	8,564.80	296,145,240	32,832	9,020.01	5.31
Sinai Hospital of Baltimore	547,144,141	39,792	13,750.04	543,402,000	39,398	13,792.63	0.31
Southern Maryland Hospital Center	188,844,852	23,928	7,892.31	187,095,816	23,770	7,871.25	-0.27
Suburban Hospital	204,241,200	19,929	10,248.67	208,053,811	19,302	10,778.99	5.17
Union Hospital of Cecil County	106,494,800	15,761	6,756.83	106,085,900	15,251	6,955.97	2.95
Union Memorial Hospital	357,374,722	27,166	13,155.34	340,745,526	26,044	13,083.43	-0.55
University MIEMSS	128,199,844	7,614	16,837.33	142,804,990	8,185	17,447.54	3.62
University UMCC	41,370,168	2,583	16,018.41	41,806,000	2,369	17,647.24	10.17
University of Maryland Medical Center	838,431,058	35,291	23,757.79	889,072,548	37,747	23,553.37	-0.86
Upper Chesapeake Medical Center	187,905,400	24,221	7,757.86	189,667,350	23,493	8,073.43	4.07
Washington Adventist Hospital	236,361,478	23,034	10,261.38	227,797,617	20,602	11,057.21	7.76
Washington County Hospital	205,595,800	24,851	8,273.02	213,278,000	24,861	8,578.96	3.70
Western Maryland Regional M. C.	.	.	.	235,700,700	26,550	8,877.56	.

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

Hospital	2009			2010			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
Washington County Hospital	205,595,800	24,851	8,273.02	213,278,000	24,861	8,578.96	3.70
University of Maryland Medical Center	838,431,058	35,291	23,757.79	889,072,548	37,747	23,553.37	-0.86
Prince George's Hospital Center	211,849,168	18,250	11,608.47	206,067,664	17,809	11,571.06	-0.32
Holy Cross Hospital	335,161,284	38,000	8,819.94	343,394,183	38,770	8,857.10	0.42
Frederick Memorial Hospital	233,970,884	27,652	8,461.24	248,531,944	29,886	8,316.13	-1.72
Harford Memorial Hospital	79,082,621	11,686	6,767.51	82,444,000	11,255	7,325.25	8.24
Saint Joseph Medical Center	340,774,543	31,752	10,732.23	307,388,501	28,322	10,853.16	1.13
Mercy Medical Center	337,994,222	33,604	10,058.02	339,231,791	33,527	10,118.26	0.60
Johns Hopkins Hospital	1,425,445,076	69,843	20,409.36	1,493,443,862	70,234	21,263.68	4.19
Dorchester General Hospital	45,070,325	6,344	7,104.60	45,470,660	6,229	7,299.85	2.75
Saint Agnes Hospital	310,842,634	30,686	10,129.69	309,668,125	30,735	10,075.39	-0.54
Sinai Hospital of Baltimore	547,144,141	39,792	13,750.04	543,402,000	39,398	13,792.63	0.31
Bon Secours Hospital	93,804,271	10,932	8,580.85	102,685,956	10,732	9,568.07	11.50
Franklin Square Hospital Center	357,895,394	39,391	9,085.73	366,053,438	40,072	9,134.82	0.54
Washington Adventist Hospital	236,361,478	23,034	10,261.38	227,797,617	20,602	11,057.21	7.76
Garrett County Memorial Hospital	31,369,000	4,936	6,355.15	32,921,208	4,882	6,743.67	6.11
Montgomery General Hospital	123,134,800	14,591	8,439.03	125,736,633	14,228	8,837.23	4.72
Peninsula Regional Medical Center	332,602,500	31,193	10,662.89	333,818,900	31,730	10,520.67	-1.33
Suburban Hospital	204,241,200	19,929	10,248.67	208,053,811	19,302	10,778.99	5.17
Anne Arundel Medical Center	349,124,785	37,124	9,404.18	360,830,187	38,222	9,440.38	0.38
Union Memorial Hospital	357,374,722	27,166	13,155.34	340,745,526	26,044	13,083.43	-0.55
Memorial Hosp and Med Ctr of Cumberla	88,733,800	11,167	7,946.07	.	.	.	.
Braddock Hospital	142,005,200	17,988	7,894.52	.	.	.	.
Western Maryland Regional M. C.	.	.	.	235,700,700	26,550	8,877.56	.
Saint Mary's Hospital	107,208,560	17,592	6,094.25	104,714,071	17,586	5,954.47	-2.29
Johns Hopkins Bayview Medical Center	441,163,400	33,167	13,301.35	437,999,400	33,626	13,025.69	-2.07
Chester River Hospital Center	50,448,562	6,595	7,649.20	51,271,495	6,386	8,029.10	4.97
Union Hospital of Cecil County	106,494,800	15,761	6,756.83	106,085,900	15,251	6,955.97	2.95
Carroll Hospital Center	173,755,553	21,787	7,975.36	177,318,406	22,366	7,927.90	-0.60
Harbor Hospital	172,363,135	18,443	9,345.81	166,517,673	17,511	9,509.44	1.75
Civista Medical Center	88,714,018	11,783	7,528.69	95,022,684	12,436	7,640.88	1.49
Memorial Hospital at Easton	141,015,514	16,349	8,625.55	139,221,175	16,433	8,471.95	-1.78
Maryland General Hospital	158,094,097	14,862	10,637.83	153,942,311	14,282	10,778.49	1.32
Calvert Memorial Hospital	98,913,228	14,749	6,706.36	104,707,459	15,490	6,759.83	0.80
Northwest Hospital Center	179,366,557	20,971	8,552.98	179,400,280	21,733	8,254.90	-3.49

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

Hospital	2009			2010			% Change NOR Per EIPA
	Net Operating Revenue	EIPAs	NOR Per EIPA	Net Operating Revenue	EIPAs	NOR Per EIPA	
Baltimore Washington Medical Center	263,301,691	29,941	8,794.13	283,374,875	31,830	8,902.88	1.24
Greater Baltimore Medical Center	355,552,503	36,623	9,708.57	362,510,833	36,297	9,987.35	2.87
Edward McCready Memorial Hospital	13,688,901	1,801	7,599.87	14,387,093	1,736	8,285.46	9.02
Howard County General Hospital	202,898,123	22,589	8,982.08	211,297,428	23,760	8,892.80	-0.99
Upper Chesapeake Medical Center	187,905,400	24,221	7,757.86	189,667,350	23,493	8,073.43	4.07
Doctors' Community Hospital	157,974,419	19,714	8,013.48	167,694,982	19,629	8,543.04	6.61
Southern Maryland Hospital Center	188,844,852	23,928	7,892.31	187,095,816	23,770	7,871.25	-0.27
Laurel Regional Medical Center	77,224,783	10,045	7,687.53	85,506,210	9,669	8,843.34	15.03
Fort Washington Medical Center	38,687,792	6,295	6,145.82	37,325,560	5,963	6,259.88	1.86
Atlantic General Hospital	66,165,700	7,631	8,671.07	70,992,991	8,251	8,603.82	-0.78
James Lawrence Kernan Hospital	94,113,760	5,087	18,500.45	87,916,871	4,997	17,592.88	-4.91
Good Samaritan Hospital	247,846,688	23,949	10,348.97	249,424,890	24,188	10,312.05	-0.36
Shady Grove Adventist Hospital	286,491,123	33,450	8,564.80	296,145,240	32,832	9,020.01	5.31
University MIEMSS	128,199,844	7,614	16,837.33	142,804,990	8,185	17,447.54	3.62
University UMCC	41,370,168	2,583	16,018.41	41,806,000	2,369	17,647.24	10.17
All Acute Hospitals	11,295,812,076	1,037,501	10,887.52	11,499,889,233	1,036,000	11,100.28	1.95

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

Hospital	2009			2010			% 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	668,734,451	-349,426,169	319,308,282	714,949,953	-386,837,472	328,112,481	6.91	2.76
Anne Arundel Medical Center	25,642,864	-8,708,326	16,934,538	22,777,855	-5,349,286	17,428,569	-11.17	2.92
Atlantic General Hospital	6,827,139	-6,583,843	243,296	7,546,082	-6,681,784	864,298	10.53	255.25
Baltimore Washington Medical Center	-182,268	-1,672,295	-1,854,562	7,693,337	-699,844	6,993,493	4320.90	477.10
Bon Secours Hospital	6,478,252	-16,366,315	-9,888,063	14,425,947	-13,108,545	1,317,402	122.68	113.32
Braddock Hospital	9,373,323	-5,916,823	3,456,500	.	.	.	.	.
Calvert Memorial Hospital	8,070,510	-6,583,384	1,487,126	7,047,263	-9,778,742	-2,731,479	-12.68	-283.68
Carroll Hospital Center	12,053,197	-7,924,085	4,129,112	9,970,747	-11,266,620	-1,295,873	-17.28	-131.38
Chester River Hospital Center	-562,554	678,862	116,308	154,923	-1,828,923	-1,674,000	127.54	-1539.29
Civista Medical Center	-96,885	-2,427,803	-2,524,688	2,013,901	-331,444	1,682,457	2178.65	166.64
Doctors' Community Hospital	4,357,201	860,450	5,217,652	4,702,299	-1,244,303	3,457,996	7.92	-33.73
Dorchester General Hospital	1,974,709	-1,072,990	901,718	3,327,627	-1,698,594	1,629,033	68.51	80.66
Edward McCready Memorial Hospital	3,797,366	-2,281,201	1,516,165	2,973,812	-1,633,747	1,340,065	-21.69	-11.61
Fort Washington Medical Center	1,762,620	-403,582	1,359,038	801,660	-405,102	396,557	-54.52	-70.82
Franklin Square Hospital Center	35,529,662	-17,801,107	17,728,555	45,021,159	-18,354,770	26,666,389	26.71	50.41
Frederick Memorial Hospital	12,333,922	-10,390,830	1,943,092	16,242,542	-11,687,377	4,555,165	31.69	134.43
Garrett County Memorial Hospital	1,581,406	330,212	1,911,618	3,800,143	674,411	4,474,553	140.30	134.07
Good Samaritan Hospital	19,993,436	-12,078,459	7,914,976	18,846,383	-14,306,761	4,539,622	-5.74	-42.65
Greater Baltimore Medical Center	29,780,518	-11,324,454	18,456,064	27,691,014	-12,976,829	14,714,185	-7.02	-20.27
Harbor Hospital	7,291,012	-1,475,827	5,815,185	10,112,345	-3,850,528	6,261,817	38.70	7.68
Harford Memorial Hospital	3,278,870	-848,949	2,429,921	5,545,455	-2,250,355	3,295,100	69.13	35.61
Holy Cross Hospital	25,703,268	-6,702,084	19,001,184	31,605,101	-9,619,518	21,985,583	22.96	15.71
Howard County General Hospital	15,200,066	-6,734,024	8,466,043	9,460,229	-7,492,625	1,967,604	-37.76	-76.76
James Lawrence Kernan Hospital	2,483,578	-272,734	2,210,844	903,964	-1,037,884	-133,920	-63.60	-106.06
Johns Hopkins Bayview Medical Center	13,855,885	-12,285,451	1,570,434	10,271,332	-9,350,932	920,400	-25.87	-41.39
Johns Hopkins Hospital	65,770,670	-3,635,344	62,135,326	67,456,691	-7,789,768	59,666,923	2.56	-3.97
Laurel Regional Medical Center	-6,056,718	-5,697,601	-11,754,319	-57,471	-5,518,125	-5,575,596	99.05	52.57
Maryland General Hospital	15,732,329	-14,809,467	922,862	17,495,713	-14,569,076	2,926,637	11.21	217.13
Memorial Hosp and Med Ctr of Cumberla	5,451,170	-534,270	4,916,900	.	.	.	.	.
Memorial Hospital at Easton	6,908,669	1,176,434	8,085,103	6,032,927	-661,040	5,371,887	-12.68	-33.56
Mercy Medical Center	33,930,600	-2,604,120	31,326,480	31,580,844	-6,348,884	25,231,960	-6.93	-19.45
Montgomery General Hospital	7,398,642	-4,259,742	3,138,900	9,773,235	-5,437,076	4,336,159	32.09	38.14

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

Hospital	2009			2010			% 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	20,229,457	-7,795,068	12,434,389	17,886,067	-8,306,686	9,579,381	-11.58	-22.96
Peninsula Regional Medical Center	29,458,447	-17,422,447	12,036,000	29,058,847	-22,028,847	7,030,000	-1.36	-41.59
Prince George's Hospital Center	-252,691	-14,963,185	-15,215,876	-3,824,386	-16,511,170	-20,335,556	-1413.46	-33.65
Saint Agnes Hospital	35,157,607	-17,472,860	17,684,747	34,277,885	-18,829,100	15,448,785	-2.50	-12.64
Saint Joseph Medical Center	18,683,567	-23,508,912	-4,825,345	7,394,214	-25,110,379	-17,716,165	-60.42	-267.15
Saint Mary's Hospital	9,437,955	-7,636,854	1,801,101	10,771,624	-6,487,365	4,284,259	14.13	137.87
Shady Grove Adventist Hospital	16,073,349	-1,160,228	14,913,121	25,155,742	-2,906,821	22,248,922	56.51	49.19
Sinai Hospital of Baltimore	46,631,815	-34,658,451	11,973,364	45,973,648	-36,534,648	9,439,000	-1.41	-21.17
Southern Maryland Hospital Center	8,919,906	-6,250,996	2,668,910	8,709,816	-5,439,111	3,270,705	-2.36	22.55
Suburban Hospital	8,837,807	-1,065,807	7,772,000	9,660,770	-540,627	9,120,142	9.31	17.35
Union Hospital of Cecil County	6,895,100	-4,446,700	2,448,400	3,588,900	-5,583,600	-1,994,700	-47.95	-181.47
Union Memorial Hospital	31,084,855	-20,759,991	10,324,864	29,401,895	-21,324,934	8,076,961	-5.41	-21.77
University MIEMSS	-12,411,966	-4,021,765	-16,433,731	3,944,858	-4,213,500	-268,642	131.78	98.37
University UMCC	-24,671,635	213,645	-24,457,990	-18,735,351	6,146,700	-12,588,651	24.06	48.53
University of Maryland Medical Center	78,252,327	-14,689,875	63,562,452	90,181,648	-17,993,655	72,187,993	15.24	13.57
Upper Chesapeake Medical Center	16,700,301	-3,576,701	13,123,600	15,586,237	-4,750,187	10,836,050	-6.67	-17.43
Washington Adventist Hospital	-589,166	-999,567	-1,588,733	5,562,192	-1,504,684	4,057,509	1044.08	355.39
Washington County Hospital	4,634,953	-861,253	3,773,700	2,271,165	-2,437,465	-166,300	-51.00	-104.41
Western Maryland Regional M. C.	.	.	.	2,867,123	-7,877,323	-5,010,200	.	.

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

Hospital	2009			2010			% 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	668,734,451	-349,426,169	319,308,282	714,949,953	-386,837,472	328,112,481	6.91	2.76
University of Maryland Medical Center	78,252,327	-14,689,875	63,562,452	90,181,648	-17,993,655	72,187,993	15.24	13.57
Johns Hopkins Hospital	65,770,670	-3,635,344	62,135,326	67,456,691	-7,789,768	59,666,923	2.56	-3.97
Franklin Square Hospital Center	35,529,662	-17,801,107	17,728,555	45,021,159	-18,354,770	26,666,389	26.71	50.41
Mercy Medical Center	33,930,600	-2,604,120	31,326,480	31,580,844	-6,348,884	25,231,960	-6.93	-19.45
Shady Grove Adventist Hospital	16,073,349	-1,160,228	14,913,121	25,155,742	-2,906,821	22,248,922	56.51	49.19
Holy Cross Hospital	25,703,268	-6,702,084	19,001,184	31,605,101	-9,619,518	21,985,583	22.96	15.71
Anne Arundel Medical Center	25,642,864	-8,708,326	16,934,538	22,777,855	-5,349,286	17,428,569	-11.17	2.92
Saint Agnes Hospital	35,157,607	-17,472,860	17,684,747	34,277,885	-18,829,100	15,448,785	-2.50	-12.64
Greater Baltimore Medical Center	29,780,518	-11,324,454	18,456,064	27,691,014	-12,976,829	14,714,185	-7.02	-20.27
Upper Chesapeake Medical Center	16,700,301	-3,576,701	13,123,600	15,586,237	-4,750,187	10,836,050	-6.67	-17.43
Northwest Hospital Center	20,229,457	-7,795,068	12,434,389	17,886,067	-8,306,686	9,579,381	-11.58	-22.96
Sinai Hospital of Baltimore	46,631,815	-34,658,451	11,973,364	45,973,648	-36,534,648	9,439,000	-1.41	-21.17
Suburban Hospital	8,837,807	-1,065,807	7,772,000	9,660,770	-540,627	9,120,142	9.31	17.35
Union Memorial Hospital	31,084,855	-20,759,991	10,324,864	29,401,895	-21,324,934	8,076,961	-5.41	-21.77
Peninsula Regional Medical Center	29,458,447	-17,422,447	12,036,000	29,058,847	-22,028,847	7,030,000	-1.36	-41.59
Baltimore Washington Medical Center	-182,268	-1,672,295	-1,854,562	7,693,337	-699,844	6,993,493	4320.90	477.10
Harbor Hospital	7,291,012	-1,475,827	5,815,185	10,112,345	-3,850,528	6,261,817	38.70	7.68
Memorial Hospital at Easton	6,908,669	1,176,434	8,085,103	6,032,927	-661,040	5,371,887	-12.68	-33.56
Frederick Memorial Hospital	12,333,922	-10,390,830	1,943,092	16,242,542	-11,687,377	4,555,165	31.69	134.43
Good Samaritan Hospital	19,993,436	-12,078,459	7,914,976	18,846,383	-14,306,761	4,539,622	-5.74	-42.65
Garrett County Memorial Hospital	1,581,406	330,212	1,911,618	3,800,143	674,411	4,474,553	140.30	134.07
Montgomery General Hospital	7,398,642	-4,259,742	3,138,900	9,773,235	-5,437,076	4,336,159	32.09	38.14
Saint Mary's Hospital	9,437,955	-7,636,854	1,801,101	10,771,624	-6,487,365	4,284,259	14.13	137.87
Washington Adventist Hospital	-589,166	-999,567	-1,588,733	5,562,192	-1,504,684	4,057,509	1044.08	355.39
Doctors' Community Hospital	4,357,201	860,450	5,217,652	4,702,299	-1,244,303	3,457,996	7.92	-33.73
Harford Memorial Hospital	3,278,870	-848,949	2,429,921	5,545,455	-2,250,355	3,295,100	69.13	35.61
Southern Maryland Hospital Center	8,919,906	-6,250,996	2,668,910	8,709,816	-5,439,111	3,270,705	-2.36	22.55
Maryland General Hospital	15,732,329	-14,809,467	922,862	17,495,713	-14,569,076	2,926,637	11.21	217.13
Howard County General Hospital	15,200,066	-6,734,024	8,466,043	9,460,229	-7,492,625	1,967,604	-37.76	-76.76
Civista Medical Center	-96,885	-2,427,803	-2,524,688	2,013,901	-331,444	1,682,457	2178.65	166.64
Dorchester General Hospital	1,974,709	-1,072,990	901,718	3,327,627	-1,698,594	1,629,033	68.51	80.66

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

Hospital	2009			2010			% 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		
Edward McCready Memorial Hospital	3,797,366	-2,281,201	1,516,165	2,973,812	-1,633,747	1,340,065	-21.69	-11.61
Bon Secours Hospital	6,478,252	-16,366,315	-9,888,063	14,425,947	-13,108,545	1,317,402	122.68	113.32
Johns Hopkins Bayview Medical Center	13,855,885	-12,285,451	1,570,434	10,271,332	-9,350,932	920,400	-25.87	-41.39
Atlantic General Hospital	6,827,139	-6,583,843	243,296	7,546,082	-6,681,784	864,298	10.53	255.25
Fort Washington Medical Center	1,762,620	-403,582	1,359,038	801,660	-405,102	396,557	-54.52	-70.82
James Lawrence Kernan Hospital	2,483,578	-272,734	2,210,844	903,964	-1,037,884	-133,920	-63.60	-106.06
Washington County Hospital	4,634,953	-861,253	3,773,700	2,271,165	-2,437,465	-166,300	-51.00	-104.41
University MIEMSS	-12,411,966	-4,021,765	-16,433,731	3,944,858	-4,213,500	-268,642	131.78	98.37
Carroll Hospital Center	12,053,197	-7,924,085	4,129,112	9,970,747	-11,266,620	-1,295,873	-17.28	-131.38
Chester River Hospital Center	-562,554	678,862	116,308	154,923	-1,828,923	-1,674,000	127.54	-1539.29
Union Hospital of Cecil County	6,895,100	-4,446,700	2,448,400	3,588,900	-5,583,600	-1,994,700	-47.95	-181.47
Calvert Memorial Hospital	8,070,510	-6,583,384	1,487,126	7,047,263	-9,778,742	-2,731,479	-12.68	-283.68
Western Maryland Regional M. C.	.	.	.	2,867,123	-7,877,323	-5,010,200	.	.
Laurel Regional Medical Center	-6,056,718	-5,697,601	-11,754,319	-57,471	-5,518,125	-5,575,596	99.05	52.57
University UMCC	-24,671,635	213,645	-24,457,990	-18,735,351	6,146,700	-12,588,651	24.06	48.53
Saint Joseph Medical Center	18,683,567	-23,508,912	-4,825,345	7,394,214	-25,110,379	-17,716,165	-60.42	-267.15
Prince George's Hospital Center	-252,691	-14,963,185	-15,215,876	-3,824,386	-16,511,170	-20,335,556	-1413.46	-33.65
Memorial Hosp and Med Ctr of Cumberla	5,451,170	-534,270	4,916,900	.	.	.	.	.
Braddock Hospital	9,373,323	-5,916,823	3,456,500	.	.	.	.	.

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

Hospital	2009 Excess Profit/Loss	2010 Excess Profit/Loss	% Change in Excess Profit/Loss
All Acute Hospitals	-1,781,378	481,146,540	27109.79
Anne Arundel Medical Center	-21,638,462	34,665,569	260.20
Atlantic General Hospital	1,262,394	2,126,542	68.45
Baltimore Washington Medical Center	-7,670,118	8,591,893	212.02
Bon Secours Hospital	-11,267,209	1,865,586	116.56
Braddock Hospital	4,760,700	.	.
Calvert Memorial Hospital	2,193,983	-2,265,778	-203.27
Carroll Hospital Center	-2,560,645	-3,740,907	-46.09
Chester River Hospital Center	72,308	-1,028,000	-1521.71
Civista Medical Center	-1,487,298	1,861,102	225.13
Doctors' Community Hospital	-12,362,211	-3,510,447	71.60
Dorchester General Hospital	913,427	1,682,027	84.14
Edward McCready Memorial Hospital	1,719,163	1,516,980	-11.76
Fort Washington Medical Center	1,364,754	402,052	-70.54
Franklin Square Hospital Center	17,969,335	27,059,557	50.59
Frederick Memorial Hospital	-12,574,532	8,254,165	165.64
Garrett County Memorial Hospital	1,642,779	4,972,957	202.72
Good Samaritan Hospital	9,296,714	7,105,822	-23.57
Greater Baltimore Medical Center	16,624,670	14,723,222	-11.44
Harbor Hospital	5,989,641	6,382,869	6.57
Harford Memorial Hospital	9,690,721	8,485,100	-12.44
Holy Cross Hospital	161,784	31,752,383	19526.40
Howard County General Hospital	5,001,457	-4,233,236	-184.64
James Lawrence Kernan Hospital	789,645	1,175,080	48.81
Johns Hopkins Bayview Medical Center	-5,324,366	2,345,000	144.04
Johns Hopkins Hospital	6,934,063	80,254,086	1057.39
Laurel Regional Medical Center	-11,690,969	481,300	104.12
Maryland General Hospital	-1,411,338	3,754,637	366.03

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

Hospital	2009 Excess Profit/Loss	2010 Excess Profit/Loss	% Change in Excess Profit/Loss
Memorial Hosp and Med Ctr of Cumberla	6,256,300	.	.
Memorial Hospital at Easton	1,932,904	9,911,967	412.80
Mercy Medical Center	-3,022,584	31,246,825	1133.78
Montgomery General Hospital	301,700	7,127,178	2262.34
Northwest Hospital Center	3,668,358	16,901,598	360.74
Peninsula Regional Medical Center	-5,841,000	19,087,000	426.78
Prince George's Hospital Center	11,477,713	-3,617,321	-131.52
Saint Agnes Hospital	-19,440,249	42,823,157	320.28
Saint Joseph Medical Center	-14,277,963	-12,273,157	14.04
Saint Mary's Hospital	1,618,559	2,407,725	48.76
Shady Grove Adventist Hospital	13,657,827	24,591,710	80.06
Sinai Hospital of Baltimore	-3,081,636	19,063,000	718.60
Southern Maryland Hospital Center	2,719,464	3,392,618	24.75
Suburban Hospital	4,240,700	8,908,982	110.08
Union Hospital of Cecil County	-5,517,300	3,199,100	157.98
Union Memorial Hospital	6,820,843	14,712,858	115.70
University MIEMSS	-18,600,731	1,697,358	109.13
University UMCC	-25,344,990	-11,782,651	53.51
University of Maryland Medical Center	8,123,452	48,906,993	502.05
Upper Chesapeake Medical Center	36,600,600	10,861,050	-70.33
Washington Adventist Hospital	-1,659,936	4,543,188	373.70
Washington County Hospital	-813,800	3,017,000	470.73
Western Maryland Regional M. C.	.	1,740,800	.
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TOTAL EXCESS PROFIT/LOSS : EXHIBIT VII-b
Listed by Excess Profit/Loss

Hospital	2009 Excess Profit/Loss	2010 Excess Profit/Loss	% Change in Excess Profit/Loss
All Acute Hospitals	-1,781,378	481,146,540	27109.79
Johns Hopkins Hospital	6,934,063	80,254,086	1057.39
University of Maryland Medical Center	8,123,452	48,906,993	502.05
Saint Agnes Hospital	-19,440,249	42,823,157	320.28
Anne Arundel Medical Center	-21,638,462	34,665,569	260.20
Holy Cross Hospital	161,784	31,752,383	19526.40
Mercy Medical Center	-3,022,584	31,246,825	1133.78
Franklin Square Hospital Center	17,969,335	27,059,557	50.59
Shady Grove Adventist Hospital	13,657,827	24,591,710	80.06
Peninsula Regional Medical Center	-5,841,000	19,087,000	426.78
Sinai Hospital of Baltimore	-3,081,636	19,063,000	718.60
Northwest Hospital Center	3,668,358	16,901,598	360.74
Greater Baltimore Medical Center	16,624,670	14,723,222	-11.44
Union Memorial Hospital	6,820,843	14,712,858	115.70
Upper Chesapeake Medical Center	36,600,600	10,861,050	-70.33
Memorial Hospital at Easton	1,932,904	9,911,967	412.80
Suburban Hospital	4,240,700	8,908,982	110.08
Baltimore Washington Medical Center	-7,670,118	8,591,893	212.02
Harford Memorial Hospital	9,690,721	8,485,100	-12.44
Frederick Memorial Hospital	-12,574,532	8,254,165	165.64
Montgomery General Hospital	301,700	7,127,178	2262.34
Good Samaritan Hospital	9,296,714	7,105,822	-23.57
Harbor Hospital	5,989,641	6,382,869	6.57
Garrett County Memorial Hospital	1,642,779	4,972,957	202.72
Washington Adventist Hospital	-1,659,936	4,543,188	373.70
Maryland General Hospital	-1,411,338	3,754,637	366.03
Southern Maryland Hospital Center	2,719,464	3,392,618	24.75
Union Hospital of Cecil County	-5,517,300	3,199,100	157.98
Washington County Hospital	-813,800	3,017,000	470.73

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

Hospital	2009 Excess Profit/Loss	2010 Excess Profit/Loss	% Change in Excess Profit/Loss
Saint Mary's Hospital	1,618,559	2,407,725	48.76
Johns Hopkins Bayview Medical Center	-5,324,366	2,345,000	144.04
Atlantic General Hospital	1,262,394	2,126,542	68.45
Bon Secours Hospital	-11,267,209	1,865,586	116.56
Civista Medical Center	-1,487,298	1,861,102	225.13
Western Maryland Regional M. C.	.	1,740,800	.
University MIEMSS	-18,600,731	1,697,358	109.13
Dorchester General Hospital	913,427	1,682,027	84.14
Edward McCready Memorial Hospital	1,719,163	1,516,980	-11.76
James Lawrence Kernan Hospital	789,645	1,175,080	48.81
Laurel Regional Medical Center	-11,690,969	481,300	104.12
Fort Washington Medical Center	1,364,754	402,052	-70.54
Chester River Hospital Center	72,308	-1,028,000	-1521.71
Calvert Memorial Hospital	2,193,983	-2,265,778	-203.27
Doctors' Community Hospital	-12,362,211	-3,510,447	71.60
Prince George's Hospital Center	11,477,713	-3,617,321	-131.52
Carroll Hospital Center	-2,560,645	-3,740,907	-46.09
Howard County General Hospital	5,001,457	-4,233,236	-184.64
University UMCC	-25,344,990	-11,782,651	53.51
Saint Joseph Medical Center	-14,277,963	-12,273,157	14.04
Memorial Hosp and Med Ctr of Cumberla	6,256,300	.	.
Braddock Hospital	4,760,700	.	.
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HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

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Anne Arundel Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	415,890,500	392,507,100	361,340,400
Unregulated Services	32,748,267	27,404,887	23,114,909
TOTAL	448,638,767	419,911,987	384,455,309
Net Patient Revenue(NPR):			
Regulated Services	358,018,187	344,010,185	322,026,051
Unregulated Services	14,836,859	12,013,871	9,627,116
TOTAL	372,855,046	356,024,056	331,653,167
Other Operating Revenue:			
Regulated Services	2,812,000	5,114,600	7,471,808
Unregulated Services	15,834,823	15,905,882	14,516,990
TOTAL	18,646,823	21,020,482	21,988,798
Net Operating Revenue(NOR)			
Regulated Services	360,830,187	349,124,785	329,497,859
Unregulated Services	30,671,682	27,919,753	24,144,106
Total	391,501,869	377,044,538	353,641,965
Total Operating Expenses:			
Regulated Services	338,052,332	323,481,921	297,433,067
Total	374,073,300	360,110,000	331,664,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	38,222	37,124	35,227
Total	38,942	37,466	35,910
NPR per EIPA :			
Regulated Services	9,366.81	9,266.41	9,141.39
Total	9,574.70	9,502.58	9,235.55
NOR per EIPA :			
Regulated Services	9,440.38	9,404.18	9,353.49
Total	10,053.54	10,063.63	9,847.88
Operating Expenses per EIPA :			
Regulated Services	8,844.44	8,713.45	8,443.26
Total	9,605.98	9,611.63	9,235.86
Net Operating Profit(Loss):			
Regulated Services	22,777,855	25,642,864	32,064,792
Unregulated Services	-5,349,286	-8,708,326	-10,086,827
Total	17,428,569	16,934,538	21,977,965
Total Non-Operating Profit(Loss):	17,237,000	-38,573,000	-8,954,000
Non-Operating Revenue	17,237,000	-38,573,000	-8,954,000
Non-Operating Expenses	0	0	0
Total Excess Profit	34,665,569	-21,638,462	13,023,965
% Change in NPR per EIPA - Regulated	1.08	1.37	8.34
% Change in NOR per EIPA - Regulated	0.38	0.54	7.62
% Change in Oper. Expense per EIPA- Regulated	1.50	3.20	7.10
% Change in Net Operating Profit- Regulated	-11.17	-20.03	14.89
% Net Operating Profit of Regulated NOR	6.31	7.34	9.73
% Change in Net Operating Profit- Total	2.92	-22.95	14.46
% Net Total Operating Profit of Total NOR	4.45	4.49	6.21
% Change in Total Excess Profit	260.20	-266.14	-68.05
% Total Excess Profit of Total Revenue	8.48	-6.39	3.78

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Atlantic General Hospital

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	84,190,900	76,484,900	73,435,000
Unregulated Services	14,410,425	11,979,655	11,391,230
TOTAL	98,601,325	88,464,555	84,826,230
Net Patient Revenue(NPR):			
Regulated Services	70,677,900	66,120,200	64,089,800
Unregulated Services	8,931,325	7,817,255	7,381,030
TOTAL	79,609,225	73,937,455	71,470,830
Other Operating Revenue:			
Regulated Services	315,091	45,500	74,700
Unregulated Services	629,004	395,800	383,500
TOTAL	944,095	441,300	458,200
Net Operating Revenue(NOR)			
Regulated Services	70,992,991	66,165,700	64,164,500
Unregulated Services	9,560,329	8,213,055	7,764,530
Total	80,553,320	74,378,755	71,929,030
Total Operating Expenses:			
Regulated Services	63,446,909	59,338,561	54,458,617
Total	79,689,022	74,135,459	67,839,750
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	8,251	7,631	7,259
Total	9,664	8,826	8,385
NPR per EIPA :			
Regulated Services	8,565.63	8,665.10	8,829.01
Total	8,237.99	8,377.42	8,523.64
NOR per EIPA :			
Regulated Services	8,603.82	8,671.07	8,839.30
Total	8,335.69	8,427.43	8,578.28
Operating Expenses per EIPA :			
Regulated Services	7,689.29	7,776.37	7,502.22
Total	8,246.25	8,399.86	8,090.59
Net Operating Profit(Loss):			
Regulated Services	7,546,082	6,827,139	9,705,883
Unregulated Services	-6,681,784	-6,583,843	-5,616,604
Total	864,298	243,296	4,089,280
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,262,244	1,019,098	1,204,760
Non-Operating Expenses	0	167,547	65,154
Total Excess Profit	2,126,542	1,262,394	5,294,040
% Change in NPR per EIPA - Regulated			
	-1.15	-1.86	17.80
% Change in NOR per EIPA - Regulated			
	-0.78	-1.90	17.88
% Change in Oper. Expense per EIPA- Regulated			
	-1.12	3.65	13.83
% Change in Net Operating Profit- Regulated			
	10.53	-29.66	44.65
% Net Operating Profit of Regulated NOR			
	10.63	10.32	15.13
% Change in Net Operating Profit- Total			
	255.25	-94.05	177.09
% Net Total Operating Profit of Total NOR			
	1.07	0.33	5.69
% Change in Total Excess Profit			
	68.45	-76.15	92.76
% Total Excess Profit of Total Revenue			
	2.60	1.67	7.23

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Baltimore Washington Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	332,045,200	309,341,800	284,240,600
Unregulated Services	0	10,732,909	24,259,477
TOTAL	332,045,200	320,074,709	308,500,077
Net Patient Revenue(NPR):			
Regulated Services	281,900,262	262,470,466	241,660,282
Unregulated Services	0	10,732,909	8,363,092
TOTAL	281,900,262	273,203,375	250,023,374
Other Operating Revenue:			
Regulated Services	1,474,613	831,225	673,623
Unregulated Services	9,809,146	1,465,079	1,606,411
TOTAL	11,283,759	2,296,304	2,280,034
Net Operating Revenue(NOR)			
Regulated Services	283,374,875	263,301,691	242,333,905
Unregulated Services	9,809,146	12,197,989	9,969,503
Total	293,184,021	275,499,679	252,303,408
Total Operating Expenses:			
Regulated Services	275,681,538	263,483,958	232,400,584
Total	286,190,528	277,354,241	244,421,256
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	31,830	29,941	29,258
Total	31,830	30,979	31,755
NPR per EIPA :			
Regulated Services	8,856.55	8,766.37	8,259.61
Total	8,856.55	8,818.86	7,873.46
NOR per EIPA :			
Regulated Services	8,902.88	8,794.13	8,282.63
Total	9,211.06	8,892.98	7,945.26
Operating Expenses per EIPA :			
Regulated Services	8,661.18	8,800.22	7,943.12
Total	8,991.34	8,952.85	7,697.04
Net Operating Profit(Loss):			
Regulated Services	7,693,337	-182,268	9,933,321
Unregulated Services	-699,844	-1,672,295	-2,051,168
Total	6,993,493	-1,854,562	7,882,152
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,598,400	-5,815,556	924,000
Non-Operating Expenses	0	0	0
Total Excess Profit	8,591,893	-7,670,118	8,806,152
% Change in NPR per EIPA - Regulated	1.03	6.14	0.95
% Change in NOR per EIPA - Regulated	1.24	6.18	0.76
% Change in Oper. Expense per EIPA- Regulated	-1.58	10.79	1.50
% Change in Net Operating Profit- Regulated	4,320.90	-101.83	-9.29
% Net Operating Profit of Regulated NOR	2.71	-0.07	4.10
% Change in Net Operating Profit- Total	477.10	-123.53	-1.87
% Net Total Operating Profit of Total NOR	2.39	-0.67	3.12
% Change in Total Excess Profit	212.02	-187.10	-21.13
% Total Excess Profit of Total Revenue	2.91	-2.84	3.48

HEALTH SERVICES COST REVIEW COMMISSION
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Bon Secours Hospital

FISCAL YEAR ENDING	August 2010	August 2009	August 2008
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Gross Patient Revenue:			
Regulated Services	121,320,200	122,144,200	102,178,500
Unregulated Services	22,737,655	16,537,773	26,780,231
TOTAL	144,057,855	138,681,973	128,958,731
Net Patient Revenue(NPR):			
Regulated Services	97,905,389	93,446,808	79,785,576
Unregulated Services	12,960,820	8,221,786	8,028,169
TOTAL	110,866,209	101,668,594	87,813,745
Other Operating Revenue:			
Regulated Services	4,780,567	357,463	221,092
Unregulated Services	5,635,538	9,026,292	5,717,012
TOTAL	10,416,105	9,383,755	5,938,104
Net Operating Revenue(NOR)			
Regulated Services	102,685,956	93,804,271	80,006,668
Unregulated Services	18,596,358	17,248,078	13,745,181
Total	121,282,314	111,052,349	93,751,849
Total Operating Expenses:			
Regulated Services	88,260,009	87,326,019	83,627,741
Total	119,964,912	120,940,412	114,833,069
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	10,732	10,932	9,539
Total	12,744	10,319	12,021
NPR per EIPA :			
Regulated Services	9,122.63	8,548.15	8,364.19
Total	8,699.79	9,852.69	7,305.19
NOR per EIPA :			
Regulated Services	9,568.07	8,580.85	8,387.37
Total	9,517.15	10,762.07	7,799.18
Operating Expenses per EIPA :			
Regulated Services	8,223.89	7,988.24	8,766.98
Total	9,413.78	11,720.32	9,552.92
Net Operating Profit(Loss):			
Regulated Services	14,425,947	6,478,252	-3,621,073
Unregulated Services	-13,108,545	-16,366,315	-17,460,147
Total	1,317,402	-9,888,063	-21,081,220
Total Non-Operating Profit(Loss):	548,184	-1,379,146	-1,096,779
Non-Operating Revenue	684,932	-1,334,281	-822,868
Non-Operating Expenses	136,748	44,865	273,911
Total Excess Profit	1,865,586	-11,267,209	-22,177,999
% Change in NPR per EIPA - Regulated	6.72	2.20	7.96
% Change in NOR per EIPA - Regulated	11.50	2.31	7.41
% Change in Oper. Expense per EIPA- Regulated	2.95	-8.88	9.28
% Change in Net Operating Profit- Regulated	122.68	278.90	-68.65
% Net Operating Profit of Regulated NOR	14.05	6.91	-4.53
% Change in Net Operating Profit- Total	113.32	53.10	-37.32
% Net Total Operating Profit of Total NOR	1.09	-8.90	-22.49
% Change in Total Excess Profit	116.56	49.20	-48.41
% Total Excess Profit of Total Revenue	1.53	-10.27	-23.87

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FISCAL YEAR 2008 TO 2010

Braddock Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	.	166,869,000	153,946,000
Unregulated Services	.	20,069,100	17,439,100
TOTAL	.	186,938,100	171,385,100
Net Patient Revenue(NPR):			
Regulated Services	.	142,005,200	132,321,300
Unregulated Services	.	15,873,900	13,344,200
TOTAL	.	157,879,100	145,665,500
Other Operating Revenue:			
Regulated Services	.	0	100
Unregulated Services	.	1,136,700	1,355,800
TOTAL	.	1,136,700	1,355,900
Net Operating Revenue(NOR)			
Regulated Services	.	142,005,200	132,321,400
Unregulated Services	.	17,010,600	14,700,000
Total	.	159,015,800	147,021,400
Total Operating Expenses:			
Regulated Services	.	132,631,877	124,455,861
Total	.	155,559,300	145,262,400
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	.	17,988	17,703
Total	.	19,033	18,257
NPR per EIPA :			
Regulated Services	.	7,894.52	7,474.30
Total	.	8,295.08	7,978.64
NOR per EIPA :			
Regulated Services	.	7,894.52	7,474.31
Total	.	8,354.80	8,052.91
Operating Expenses per EIPA :			
Regulated Services	.	7,373.43	7,030.02
Total	.	8,173.19	7,956.56
Net Operating Profit(Loss):			
Regulated Services	.	9,373,323	7,865,539
Unregulated Services	.	-5,916,823	-6,106,539
Total	.	3,456,500	1,759,000
Total Non-Operating Profit(Loss):	.	1,304,200	1,820,600
Non-Operating Revenue	.	1,304,200	1,820,600
Non-Operating Expenses	.	0	0
Total Excess Profit	.	4,760,700	3,579,600
% Change in NPR per EIPA - Regulated	.	5.62	-0.60
% Change in NOR per EIPA - Regulated	.	5.62	-0.68
% Change in Oper. Expense per EIPA- Regulated	.	4.88	3.04
% Change in Net Operating Profit- Regulated	.	19.17	-33.26
% Net Operating Profit of Regulated NOR	.	6.60	5.94
% Change in Net Operating Profit- Total	.	96.50	-74.36
% Net Total Operating Profit of Total NOR	.	2.17	1.20
% Change in Total Excess Profit	.	33.00	-58.40
% Total Excess Profit of Total Revenue	.	2.97	2.40

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Calvert Memorial Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	120,112,700	111,417,900	102,346,100
Unregulated Services	14,236,128	17,563,082	17,422,425
TOTAL	134,348,828	128,980,982	119,768,525
Net Patient Revenue(NPR):			
Regulated Services	102,380,283	97,651,503	89,356,335
Unregulated Services	8,307,640	11,124,424	11,493,515
TOTAL	110,687,922	108,775,927	100,849,850
Other Operating Revenue:			
Regulated Services	2,327,176	1,261,725	1,982,050
Unregulated Services	1,559,025	2,154,803	1,861,904
TOTAL	3,886,201	3,416,528	3,843,954
Net Operating Revenue(NOR)			
Regulated Services	104,707,459	98,913,228	91,338,385
Unregulated Services	9,866,664	13,279,227	13,355,419
Total	114,574,123	112,192,455	104,693,804
Total Operating Expenses:			
Regulated Services	97,660,195	90,842,718	85,314,807
Total	117,305,602	110,705,329	103,545,879
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	15,490	14,749	13,562
Total	17,305	16,908	15,652
NPR per EIPA :			
Regulated Services	6,609.59	6,620.81	6,588.93
Total	6,396.25	6,433.23	6,443.16
NOR per EIPA :			
Regulated Services	6,759.83	6,706.36	6,735.08
Total	6,620.82	6,635.29	6,688.75
Operating Expenses per EIPA :			
Regulated Services	6,304.87	6,159.18	6,290.91
Total	6,778.66	6,547.34	6,615.41
Net Operating Profit(Loss):			
Regulated Services	7,047,263	8,070,510	6,023,578
Unregulated Services	-9,778,742	-6,583,384	-4,875,653
Total	-2,731,479	1,487,126	1,147,925
Total Non-Operating Profit(Loss):	465,701	706,857	2,146,991
Non-Operating Revenue	612,528	721,866	2,146,991
Non-Operating Expenses	146,827	15,009	0
Total Excess Profit	-2,265,778	2,193,983	3,294,916
% Change in NPR per EIPA - Regulated	-0.17	0.48	4.53
% Change in NOR per EIPA - Regulated	0.80	-0.43	4.35
% Change in Oper. Expense per EIPA- Regulated	2.37	-2.09	6.06
% Change in Net Operating Profit- Regulated	-12.68	33.98	-11.32
% Net Operating Profit of Regulated NOR	6.73	8.16	6.59
% Change in Net Operating Profit- Total	-283.68	29.55	-68.16
% Net Total Operating Profit of Total NOR	-2.38	1.33	1.10
% Change in Total Excess Profit	-203.27	-33.41	-37.79
% Total Excess Profit of Total Revenue	-1.97	1.94	3.08

HEALTH SERVICES COST REVIEW COMMISSION
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Carroll Hospital Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	202,238,000	196,154,700	186,262,700
Unregulated Services	50,764,598	54,410,406	51,808,089
TOTAL	253,002,598	250,565,106	238,070,789
Net Patient Revenue(NPR):			
Regulated Services	176,005,258	172,583,312	163,557,665
Unregulated Services	44,035,380	45,711,404	43,060,055
TOTAL	220,040,638	218,294,716	206,617,720
Other Operating Revenue:			
Regulated Services	1,313,148	1,172,241	1,605,916
Unregulated Services	15,632,319	15,577,658	14,391,389
TOTAL	16,945,467	16,749,899	15,997,305
Net Operating Revenue(NOR)			
Regulated Services	177,318,406	173,755,553	165,163,581
Unregulated Services	59,667,699	61,289,062	57,451,444
Total	236,986,105	235,044,615	222,615,025
Total Operating Expenses:			
Regulated Services	167,347,659	161,702,356	149,106,455
Total	238,281,978	230,915,503	212,069,754
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	22,366	21,787	21,413
Total	27,981	27,830	27,369
NPR per EIPA :			
Regulated Services	7,869.19	7,921.56	7,638.22
Total	7,864.03	7,843.92	7,549.33
NOR per EIPA :			
Regulated Services	7,927.90	7,975.36	7,713.21
Total	8,469.65	8,445.79	8,133.84
Operating Expenses per EIPA :			
Regulated Services	7,482.11	7,422.12	6,963.34
Total	8,515.96	8,297.42	7,748.54
Net Operating Profit(Loss):			
Regulated Services	9,970,747	12,053,197	16,057,126
Unregulated Services	-11,266,620	-7,924,085	-5,511,855
Total	-1,295,873	4,129,112	10,545,271
Total Non-Operating Profit(Loss):	-2,445,034	-6,689,757	1,095,000
Non-Operating Revenue	7,332,943	2,059,874	6,469,800
Non-Operating Expenses	9,777,977	8,749,631	5,374,800
Total Excess Profit	-3,740,907	-2,560,645	11,640,271
% Change in NPR per EIPA - Regulated	-0.66	3.71	7.38
% Change in NOR per EIPA - Regulated	-0.60	3.40	7.54
% Change in Oper. Expense per EIPA- Regulated	0.81	6.59	6.58
% Change in Net Operating Profit- Regulated	-17.28	-24.94	19.46
% Net Operating Profit of Regulated NOR	5.62	6.94	9.72
% Change in Net Operating Profit- Total	-131.38	-60.84	3.46
% Net Total Operating Profit of Total NOR	-0.55	1.76	4.74
% Change in Total Excess Profit	-46.09	-122.00	-35.17
% Total Excess Profit of Total Revenue	-1.53	-1.08	5.08

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

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Chester River Hospital Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	59,939,400	60,914,200	55,440,200
Unregulated Services	2,871,574	2,283,120	2,274,172
TOTAL	62,810,974	63,197,320	57,714,372
Net Patient Revenue(NPR):			
Regulated Services	50,998,039	50,049,509	44,720,120
Unregulated Services	971,935	2,082,791	1,300,585
TOTAL	51,969,974	52,132,300	46,020,706
Other Operating Revenue:			
Regulated Services	273,456	399,053	3,798,163
Unregulated Services	294,571	343,206	470,247
TOTAL	568,026	742,259	4,268,410
Net Operating Revenue(NOR)			
Regulated Services	51,271,495	50,448,562	48,518,284
Unregulated Services	1,266,505	2,425,998	1,770,832
Total	52,538,000	52,874,559	50,289,116
Total Operating Expenses:			
Regulated Services	51,116,572	51,011,116	51,171,682
Total	54,212,000	52,758,252	52,078,107
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	6,386	6,595	6,141
Total	6,692	6,842	6,373
NPR per EIPA :			
Regulated Services	7,986.27	7,588.70	7,282.38
Total	7,766.41	7,618.93	7,221.57
NOR per EIPA :			
Regulated Services	8,029.10	7,649.20	7,900.89
Total	7,851.29	7,727.41	7,891.37
Operating Expenses per EIPA :			
Regulated Services	8,004.84	7,734.50	8,332.98
Total	8,101.46	7,710.41	8,172.09
Net Operating Profit(Loss):			
Regulated Services	154,923	-562,554	-2,653,398
Unregulated Services	-1,828,923	678,862	864,407
Total	-1,674,000	116,308	-1,788,991
Total Non-Operating Profit(Loss):	646,000	-44,000	2,242,494
Non-Operating Revenue	646,000	411,000	2,328,859
Non-Operating Expenses	0	455,000	86,365
Total Excess Profit	-1,028,000	72,308	453,503
% Change in NPR per EIPA - Regulated	5.24	4.21	17.62
% Change in NOR per EIPA - Regulated	4.97	-3.19	26.40
% Change in Oper. Expense per EIPA- Regulated	3.50	-7.18	29.85
% Change in Net Operating Profit- Regulated	127.54	78.80	-106.33
% Net Operating Profit of Regulated NOR	0.30	-1.12	-5.47
% Change in Net Operating Profit- Total	-1,539.29	106.50	-112.64
% Net Total Operating Profit of Total NOR	-3.19	0.22	-3.56
% Change in Total Excess Profit	-1,521.71	-84.06	193.51
% Total Excess Profit of Total Revenue	-1.93	0.14	0.86

HEALTH SERVICES COST REVIEW COMMISSION
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Civista Medical Center

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	111,481,500	103,621,000	100,064,600
Unregulated Services	1,664,800	4,069,300	1,526,100
TOTAL	113,146,300	107,690,300	101,590,700
Net Patient Revenue(NPR):			
Regulated Services	94,973,916	88,273,027	83,291,229
Unregulated Services	863,000	1,646,300	937,900
TOTAL	95,836,916	89,919,327	84,229,129
Other Operating Revenue:			
Regulated Services	48,768	440,991	294,251
Unregulated Services	472,398	435,384	333,451
TOTAL	521,166	876,375	627,702
Net Operating Revenue(NOR)			
Regulated Services	95,022,684	88,714,018	83,585,480
Unregulated Services	1,335,398	2,081,684	1,271,351
Total	96,358,082	90,795,702	84,856,831
Total Operating Expenses:			
Regulated Services	93,008,782	88,810,903	89,777,024
Total	94,675,625	93,320,390	91,333,317
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	12,436	11,783	11,375
Total	12,599	12,227	11,531
NPR per EIPA :			
Regulated Services	7,636.95	7,491.26	7,322.16
Total	7,607.00	7,354.18	7,304.70
NOR per EIPA :			
Regulated Services	7,640.88	7,528.69	7,348.03
Total	7,648.37	7,425.85	7,359.13
Operating Expenses per EIPA :			
Regulated Services	7,478.94	7,536.91	7,892.33
Total	7,514.83	7,632.34	7,920.80
Net Operating Profit(Loss):			
Regulated Services	2,013,901	-96,885	-6,191,544
Unregulated Services	-331,444	-2,427,803	-284,942
Total	1,682,457	-2,524,688	-6,476,486
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	178,645	1,037,391	1,030,775
Non-Operating Expenses	0	0	0
Total Excess Profit	1,861,102	-1,487,298	-5,445,711
% Change in NPR per EIPA - Regulated			
	1.94	2.31	7.54
% Change in NOR per EIPA - Regulated			
	1.49	2.46	7.73
% Change in Oper. Expense per EIPA- Regulated			
	-0.77	-4.50	13.49
% Change in Net Operating Profit- Regulated			
	2,178.65	98.44	-295.19
% Net Operating Profit of Regulated NOR			
	2.12	-0.11	-7.41
% Change in Net Operating Profit- Total			
	166.64	61.02	-220.00
% Net Total Operating Profit of Total NOR			
	1.75	-2.78	-7.63
% Change in Total Excess Profit			
	225.13	72.69	-312.13
% Total Excess Profit of Total Revenue			
	1.93	-1.62	-6.34

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Doctors' Community Hospital

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	196,074,400	188,720,500	174,473,200
Unregulated Services	8,367,242	5,567,940	7,935,667
TOTAL	204,441,642	194,288,440	182,408,867
Net Patient Revenue(NPR):			
Regulated Services	167,544,370	156,598,647	144,755,979
Unregulated Services	8,128,977	5,398,926	7,705,931
TOTAL	175,673,347	161,997,573	152,461,910
Other Operating Revenue:			
Regulated Services	150,612	1,375,772	4,202,911
Unregulated Services	8,124,007	6,459,268	2,373,446
TOTAL	8,274,619	7,835,040	6,576,357
Net Operating Revenue(NOR)			
Regulated Services	167,694,982	157,974,419	148,958,890
Unregulated Services	16,252,984	11,858,194	10,079,377
Total	183,947,966	169,832,613	159,038,267
Total Operating Expenses:			
Regulated Services	162,992,683	153,617,218	143,922,416
Total	180,489,970	164,614,961	152,951,975
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	19,629	19,714	19,267
Total	20,467	20,295	19,951
NPR per EIPA :			
Regulated Services	8,535.37	7,943.69	7,513.08
Total	8,583.21	7,982.06	7,641.98
NOR per EIPA :			
Regulated Services	8,543.04	8,013.48	7,731.22
Total	8,987.50	8,368.11	7,971.61
Operating Expenses per EIPA :			
Regulated Services	8,303.49	7,792.45	7,469.82
Total	8,818.55	8,111.02	7,666.55
Net Operating Profit(Loss):			
Regulated Services	4,702,299	4,357,201	5,036,473
Unregulated Services	-1,244,303	860,450	1,049,818
Total	3,457,996	5,217,652	6,086,292
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	-6,968,443	-17,579,863	-10,789,776
Non-Operating Expenses	-5,095,951	-17,579,863	-3,392,514
	1,872,492	0	7,397,262
Total Excess Profit	-3,510,447	-12,362,211	-4,703,484
% Change in NPR per EIPA - Regulated			
	7.45	5.73	-7.05
% Change in NOR per EIPA - Regulated			
	6.61	3.65	-7.21
% Change in Oper. Expense per EIPA- Regulated			
	6.56	4.32	-5.36
% Change in Net Operating Profit- Regulated			
	7.92	-13.49	-34.66
% Net Operating Profit of Regulated NOR			
	2.80	2.76	3.38
% Change in Net Operating Profit- Total			
	-33.73	-14.27	-20.34
% Net Total Operating Profit of Total NOR			
	1.88	3.07	3.83
% Change in Total Excess Profit			
	71.60	-162.83	-197.28
% Total Excess Profit of Total Revenue			
	-1.96	-8.12	-3.02

HEALTH SERVICES COST REVIEW COMMISSION
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Dorchester General Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	51,961,600	52,734,300	47,996,300
Unregulated Services	1,576,649	1,757,285	2,040,182
TOTAL	53,538,249	54,491,585	50,036,482
Net Patient Revenue(NPR):			
Regulated Services	44,769,075	44,424,176	41,070,915
Unregulated Services	605,883	1,332,557	1,247,054
TOTAL	45,374,958	45,756,733	42,317,969
Other Operating Revenue:			
Regulated Services	701,585	646,148	587,242
Unregulated Services	304,606	313,983	314,879
TOTAL	1,006,191	960,131	902,121
Net Operating Revenue(NOR)			
Regulated Services	45,470,660	45,070,325	41,658,157
Unregulated Services	910,489	1,646,540	1,561,933
Total	46,381,149	46,716,865	43,220,090
Total Operating Expenses:			
Regulated Services	42,143,033	43,095,616	39,694,261
Total	44,752,116	45,815,146	42,511,188
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	6,229	6,344	6,220
Total	6,418	6,555	6,485
NPR per EIPA :			
Regulated Services	7,187.21	7,002.74	6,602.83
Total	7,069.96	6,980.19	6,525.92
NOR per EIPA :			
Regulated Services	7,299.85	7,104.60	6,697.24
Total	7,226.74	7,126.66	6,665.04
Operating Expenses per EIPA :			
Regulated Services	6,765.63	6,793.32	6,381.51
Total	6,972.91	6,989.11	6,555.72
Net Operating Profit(Loss):			
Regulated Services	3,327,627	1,974,709	1,963,896
Unregulated Services	-1,698,594	-1,072,990	-1,254,994
Total	1,629,033	901,718	708,902
Total Non-Operating Profit(Loss):	52,994	11,709	157
Non-Operating Revenue	52,994	11,709	157
Non-Operating Expenses	0	0	0
Total Excess Profit	1,682,027	913,427	709,059
% Change in NPR per EIPA - Regulated	2.63	6.06	9.69
% Change in NOR per EIPA - Regulated	2.75	6.08	8.82
% Change in Oper. Expense per EIPA- Regulated	-0.41	6.45	15.71
% Change in Net Operating Profit- Regulated	68.51	0.55	-49.90
% Net Operating Profit of Regulated NOR	7.32	4.38	4.71
% Change in Net Operating Profit- Total	80.66	27.20	-72.00
% Net Total Operating Profit of Total NOR	3.51	1.93	1.64
% Change in Total Excess Profit	84.14	28.82	-75.64
% Total Excess Profit of Total Revenue	3.62	1.95	1.64

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Edward McCready Memorial Hospital

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	18,681,464	16,819,985	17,086,858
Unregulated Services	2,680,395	2,727,918	2,648,584
TOTAL	21,361,859	19,547,903	19,735,442
Net Patient Revenue(NPR):			
Regulated Services	14,374,135	13,674,977	13,780,080
Unregulated Services	1,717,361	1,467,279	1,524,248
TOTAL	16,091,496	15,142,256	15,304,328
Other Operating Revenue:			
Regulated Services	12,958	13,924	35,745
Unregulated Services	0	10,999	12,464
TOTAL	12,958	24,923	48,209
Net Operating Revenue(NOR)			
Regulated Services	14,387,093	13,688,901	13,815,825
Unregulated Services	1,717,361	1,478,278	1,536,712
Total	16,104,454	15,167,179	15,352,537
Total Operating Expenses:			
Regulated Services	11,413,281	9,891,535	11,456,983
Total	14,764,389	13,651,014	13,618,274
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	1,736	1,801	2,319
Total	2,009	1,992	2,598
NPR per EIPA :			
Regulated Services	8,278.00	7,592.14	5,941.69
Total	8,011.51	7,602.77	5,890.44
NOR per EIPA :			
Regulated Services	8,285.46	7,599.87	5,957.10
Total	8,017.96	7,615.29	5,908.99
Operating Expenses per EIPA :			
Regulated Services	6,572.86	5,491.63	4,940.02
Total	7,350.78	6,854.04	5,241.50
Net Operating Profit(Loss):			
Regulated Services	2,973,812	3,797,366	2,358,842
Unregulated Services	-1,633,747	-2,281,201	-624,579
Total	1,340,065	1,516,165	1,734,263
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	176,915	202,998	221,318
Non-Operating Expenses	0	0	0
Total Excess Profit	1,516,980	1,719,163	1,955,581
% Change in NPR per EIPA - Regulated			
	9.03	27.78	-0.00
% Change in NOR per EIPA - Regulated			
	9.02	27.58	0.12
% Change in Oper. Expense per EIPA- Regulated			
	19.69	11.17	-9.37
% Change in Net Operating Profit- Regulated			
	-21.69	60.98	122.32
% Net Operating Profit of Regulated NOR			
	20.67	27.74	17.07
% Change in Net Operating Profit- Total			
	-11.61	-12.58	19.32
% Net Total Operating Profit of Total NOR			
	8.32	10.00	11.30
% Change in Total Excess Profit			
	-11.76	-12.09	24.21
% Total Excess Profit of Total Revenue			
	9.32	11.19	12.56

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Fort Washington Medical Center

FISCAL YEAR ENDING	December 2010 -----	December 2009 -----	December 2008 -----
Gross Patient Revenue:			
Regulated Services	44,747,960	47,242,143	47,584,845
Unregulated Services	751,514	758,007	714,633
TOTAL	45,499,474	48,000,150	48,299,478
Net Patient Revenue(NPR):			
Regulated Services	36,812,178	38,272,727	38,076,625
Unregulated Services	751,514	758,007	714,633
TOTAL	37,563,692	39,030,734	38,791,258
Other Operating Revenue:			
Regulated Services	513,382	415,065	346,816
Unregulated Services	31,783	36,615	39,580
TOTAL	545,165	451,680	386,396
Net Operating Revenue(NOR)			
Regulated Services	37,325,560	38,687,792	38,423,441
Unregulated Services	783,297	794,622	754,213
Total	38,108,857	39,482,414	39,177,654
Total Operating Expenses:			
Regulated Services	36,523,900	36,925,172	36,903,906
Total	37,712,300	38,123,376	37,811,109
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	5,963	6,295	5,928
Total	6,023	6,243	5,883
NPR per EIPA :			
Regulated Services	6,173.78	6,079.89	6,423.30
Total	6,236.27	6,251.60	6,593.90
NOR per EIPA :			
Regulated Services	6,259.88	6,145.82	6,481.80
Total	6,326.78	6,323.95	6,659.58
Operating Expenses per EIPA :			
Regulated Services	6,125.43	5,865.82	6,225.47
Total	6,260.94	6,106.27	6,427.29
Net Operating Profit(Loss):			
Regulated Services	801,660	1,762,620	1,519,535
Unregulated Services	-405,102	-403,582	-152,990
Total	396,557	1,359,038	1,366,545
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	5,495	5,716	10,355
Non-Operating Expenses	0	0	0
Total Excess Profit	402,052	1,364,754	1,376,900
% Change in NPR per EIPA - Regulated	1.54	-5.35	-0.53
% Change in NOR per EIPA - Regulated	1.86	-5.18	-0.80
% Change in Oper. Expense per EIPA- Regulated	4.43	-5.78	-1.60
% Change in Net Operating Profit- Regulated	-54.52	16.00	31.76
% Net Operating Profit of Regulated NOR	2.15	4.56	3.95
% Change in Net Operating Profit- Total	-70.82	-0.55	85.15
% Net Total Operating Profit of Total NOR	1.04	3.44	3.49
% Change in Total Excess Profit	-70.54	-0.88	82.54
% Total Excess Profit of Total Revenue	1.05	3.46	3.51

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Franklin Square Hospital Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	422,965,000	414,987,900	401,669,900
Unregulated Services	102,350,792	97,498,639	89,134,777
TOTAL	525,315,792	512,486,539	490,804,677
Net Patient Revenue(NPR):			
Regulated Services	363,651,606	355,664,346	338,447,374
Unregulated Services	39,566,212	37,669,552	35,782,018
TOTAL	403,217,818	393,333,898	374,229,392
Other Operating Revenue:			
Regulated Services	2,401,832	2,231,048	2,530,466
Unregulated Services	4,968,176	5,061,555	4,448,034
TOTAL	7,370,008	7,292,603	6,978,500
Net Operating Revenue(NOR)			
Regulated Services	366,053,438	357,895,394	340,977,840
Unregulated Services	44,534,388	42,731,107	40,230,052
Total	410,587,826	400,626,501	381,207,892
Total Operating Expenses:			
Regulated Services	321,032,279	322,365,732	306,094,837
Total	383,921,437	382,897,946	360,690,863
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	40,072	39,391	38,639
Total	44,476	43,667	42,577
NPR per EIPA :			
Regulated Services	9,074.89	9,029.09	8,759.27
Total	9,066.06	9,007.55	8,789.47
NOR per EIPA :			
Regulated Services	9,134.82	9,085.73	8,824.76
Total	9,231.77	9,174.56	8,953.37
Operating Expenses per EIPA :			
Regulated Services	8,011.33	8,183.76	7,921.97
Total	8,632.20	8,768.56	8,471.49
Net Operating Profit(Loss):			
Regulated Services	45,021,159	35,529,662	34,883,003
Unregulated Services	-18,354,770	-17,801,107	-14,365,974
Total	26,666,389	17,728,555	20,517,029
Total Non-Operating Profit(Loss):	393,168	240,780	306,813
Non-Operating Revenue	447,480	240,780	306,813
Non-Operating Expenses	54,312	0	0
Total Excess Profit	27,059,557	17,969,335	20,823,842
% Change in NPR per EIPA - Regulated	0.51	3.08	1.74
% Change in NOR per EIPA - Regulated	0.54	2.96	1.55
% Change in Oper. Expense per EIPA- Regulated	-2.11	3.30	-1.74
% Change in Net Operating Profit- Regulated	26.71	1.85	53.92
% Net Operating Profit of Regulated NOR	12.30	9.93	10.23
% Change in Net Operating Profit- Total	50.41	-13.59	90.73
% Net Total Operating Profit of Total NOR	6.49	4.43	5.38
% Change in Total Excess Profit	50.59	-13.71	90.36
% Total Excess Profit of Total Revenue	6.58	4.48	5.46

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Frederick Memorial Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	282,475,300	266,844,200	244,818,200
Unregulated Services	90,235,157	87,196,916	83,016,155
TOTAL	372,710,457	354,041,116	327,834,355
Net Patient Revenue(NPR):			
Regulated Services	243,069,472	228,268,395	212,190,095
Unregulated Services	48,895,604	47,844,372	46,238,724
TOTAL	291,965,076	276,112,767	258,428,819
Other Operating Revenue:			
Regulated Services	5,462,472	5,702,489	3,379,206
Unregulated Services	5,589,579	6,073,112	9,035,813
TOTAL	11,052,051	11,775,601	12,415,019
Net Operating Revenue(NOR)			
Regulated Services	248,531,944	233,970,884	215,569,301
Unregulated Services	54,485,183	53,917,484	55,274,537
Total	303,017,127	287,888,368	270,843,838
Total Operating Expenses:			
Regulated Services	232,289,402	221,636,962	205,133,756
Total	298,461,962	285,945,276	269,138,481
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	29,886	27,652	26,773
Total	40,713	37,979	35,851
NPR per EIPA :			
Regulated Services	8,133.35	8,255.02	7,925.58
Total	7,171.36	7,270.11	7,208.35
NOR per EIPA :			
Regulated Services	8,316.13	8,461.24	8,051.79
Total	7,442.82	7,580.17	7,554.64
Operating Expenses per EIPA :			
Regulated Services	7,772.63	8,015.20	7,662.01
Total	7,330.94	7,529.00	7,507.07
Net Operating Profit(Loss):			
Regulated Services	16,242,542	12,333,922	10,435,545
Unregulated Services	-11,687,377	-10,390,830	-8,730,188
Total	4,555,165	1,943,092	1,705,357
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	3,699,000	-14,517,624	-9,360,789
Non-Operating Expenses	0	0	14,270,292
Total Excess Profit	8,254,165	-12,574,532	-7,655,432
% Change in NPR per EIPA - Regulated	-1.47	4.16	5.37
% Change in NOR per EIPA - Regulated	-1.72	5.09	5.33
% Change in Oper. Expense per EIPA- Regulated	-3.03	4.61	4.75
% Change in Net Operating Profit- Regulated	31.69	18.19	23.87
% Net Operating Profit of Regulated NOR	6.54	5.27	4.84
% Change in Net Operating Profit- Total	134.43	13.94	-67.66
% Net Total Operating Profit of Total NOR	1.50	0.67	0.63
% Change in Total Excess Profit	165.64	-64.26	-153.65
% Total Excess Profit of Total Revenue	2.69	-4.60	-2.78

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Garrett County Memorial Hospital

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	39,731,000	36,812,400	32,853,800
Unregulated Services	8,363,635	8,470,855	7,849,988
TOTAL	48,094,635	45,283,255	40,703,788
Net Patient Revenue(NPR):			
Regulated Services	32,709,321	31,258,085	27,513,600
Unregulated Services	5,782,327	5,788,328	5,242,841
TOTAL	38,491,648	37,046,414	32,756,441
Other Operating Revenue:			
Regulated Services	211,887	110,915	483,329
Unregulated Services	381,134	381,695	229,564
TOTAL	593,021	492,610	712,893
Net Operating Revenue(NOR)			
Regulated Services	32,921,208	31,369,000	27,996,929
Unregulated Services	6,163,461	6,170,023	5,472,405
Total	39,084,669	37,539,024	33,469,334
Total Operating Expenses:			
Regulated Services	29,121,065	29,787,595	28,380,547
Total	34,610,116	35,627,406	33,992,569
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	4,882	4,936	4,830
Total	5,835	6,009	5,956
NPR per EIPA :			
Regulated Services	6,700.27	6,332.68	5,696.44
Total	6,597.16	6,165.51	5,499.85
NOR per EIPA :			
Regulated Services	6,743.67	6,355.15	5,796.51
Total	6,698.80	6,247.50	5,619.55
Operating Expenses per EIPA :			
Regulated Services	5,965.24	6,034.77	5,875.94
Total	5,931.89	5,929.35	5,707.40
Net Operating Profit(Loss):			
Regulated Services	3,800,143	1,581,406	-383,618
Unregulated Services	674,411	330,212	-139,617
Total	4,474,553	1,911,618	-523,235
Total Non-Operating Profit(Loss):	498,404	-268,839	1,096,760
Non-Operating Revenue	613,504	140,662	1,096,760
Non-Operating Expenses	115,100	409,501	0
Total Excess Profit	4,972,957	1,642,779	573,525
% Change in NPR per EIPA - Regulated	5.80	11.17	-1.54
% Change in NOR per EIPA - Regulated	6.11	9.64	-1.52
% Change in Oper. Expense per EIPA- Regulated	-1.15	2.70	3.14
% Change in Net Operating Profit- Regulated	140.30	512.23	-142.72
% Net Operating Profit of Regulated NOR	11.54	5.04	-1.37
% Change in Net Operating Profit- Total	134.07	465.35	-205.47
% Net Total Operating Profit of Total NOR	11.45	5.09	-1.56
% Change in Total Excess Profit	202.72	186.44	-35.61
% Total Excess Profit of Total Revenue	12.53	4.36	1.66

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Good Samaritan Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	294,819,900	286,296,100	265,411,400
Unregulated Services	123,302,881	116,863,438	93,585,701
TOTAL	418,122,781	403,159,538	358,997,101
Net Patient Revenue(NPR):			
Regulated Services	246,725,068	245,593,552	223,688,794
Unregulated Services	48,148,513	48,493,772	40,182,648
TOTAL	294,873,581	294,087,324	263,871,442
Other Operating Revenue:			
Regulated Services	2,699,822	2,253,136	2,089,921
Unregulated Services	1,017,267	1,347,200	1,155,664
TOTAL	3,717,089	3,600,336	3,245,585
Net Operating Revenue(NOR)			
Regulated Services	249,424,890	247,846,688	225,778,715
Unregulated Services	49,165,780	49,840,972	41,338,312
Total	298,590,670	297,687,660	267,117,026
Total Operating Expenses:			
Regulated Services	230,578,507	227,853,252	212,539,046
Total	294,051,048	289,772,684	262,597,999
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	24,188	23,949	22,601
Total	29,947	28,831	26,692
NPR per EIPA :			
Regulated Services	10,200.43	10,254.89	9,897.19
Total	9,846.47	10,200.56	9,885.78
NOR per EIPA :			
Regulated Services	10,312.05	10,348.97	9,989.66
Total	9,970.59	10,325.44	10,007.38
Operating Expenses per EIPA :			
Regulated Services	9,532.88	9,514.13	9,403.86
Total	9,819.00	10,050.91	9,838.08
Net Operating Profit(Loss):			
Regulated Services	18,846,383	19,993,436	13,239,669
Unregulated Services	-14,306,761	-12,078,459	-8,720,642
Total	4,539,622	7,914,976	4,519,027
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	2,566,200	1,381,738	3,243,755
Non-Operating Expenses	0	0	0
Total Excess Profit	7,105,822	9,296,714	7,762,782
% Change in NPR per EIPA - Regulated	-0.53	3.61	1.65
% Change in NOR per EIPA - Regulated	-0.36	3.60	1.40
% Change in Oper. Expense per EIPA- Regulated	0.20	1.17	-0.05
% Change in Net Operating Profit- Regulated	-5.74	51.01	36.62
% Net Operating Profit of Regulated NOR	7.56	8.07	5.86
% Change in Net Operating Profit- Total	-42.65	75.15	-37.16
% Net Total Operating Profit of Total NOR	1.52	2.66	1.69
% Change in Total Excess Profit	-23.57	19.76	-21.73
% Total Excess Profit of Total Revenue	2.36	3.11	2.87

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Greater Baltimore Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	412,551,300	393,162,100	359,118,800
Unregulated Services	33,189,606	28,222,151	66,194,712
TOTAL	445,740,906	421,384,251	425,313,512
Net Patient Revenue(NPR):			
Regulated Services	359,160,116	351,006,608	327,568,381
Unregulated Services	17,622,366	16,603,476	34,737,351
TOTAL	376,782,482	367,610,084	362,305,732
Other Operating Revenue:			
Regulated Services	3,350,717	4,545,895	4,201,397
Unregulated Services	7,496,660	7,615,507	9,217,406
TOTAL	10,847,377	12,161,402	13,418,803
Net Operating Revenue(NOR)			
Regulated Services	362,510,833	355,552,503	331,769,778
Unregulated Services	25,119,026	24,218,983	43,954,757
Total	387,629,859	379,771,486	375,724,535
Total Operating Expenses:			
Regulated Services	334,819,819	325,771,985	316,188,935
Total	372,915,674	361,315,422	373,066,497
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	36,297	36,623	37,150
Total	36,439	36,990	43,623
NPR per EIPA :			
Regulated Services	9,895.04	9,584.44	8,817.53
Total	10,340.20	9,938.11	8,305.38
NOR per EIPA :			
Regulated Services	9,987.35	9,708.57	8,930.62
Total	10,637.88	10,266.88	8,612.98
Operating Expenses per EIPA :			
Regulated Services	9,224.45	8,895.40	8,511.22
Total	10,234.08	9,767.93	8,552.05
Net Operating Profit(Loss):			
Regulated Services	27,691,014	29,780,518	15,580,843
Unregulated Services	-12,976,829	-11,324,454	-12,922,805
Total	14,714,185	18,456,064	2,658,038
Total Non-Operating Profit(Loss):	9,037	-1,831,394	1,691,333
Non-Operating Revenue	2,438,826	947,777	3,814,376
Non-Operating Expenses	2,429,789	2,779,171	2,123,043
Total Excess Profit	14,723,222	16,624,670	4,349,371
% Change in NPR per EIPA - Regulated	3.24	8.70	6.92
% Change in NOR per EIPA - Regulated	2.87	8.71	6.76
% Change in Oper. Expense per EIPA- Regulated	3.70	4.51	11.47
% Change in Net Operating Profit- Regulated	-7.02	91.14	-44.20
% Net Operating Profit of Regulated NOR	7.64	8.38	4.70
% Change in Net Operating Profit- Total	-20.27	594.35	-78.11
% Net Total Operating Profit of Total NOR	3.80	4.86	0.71
% Change in Total Excess Profit	-11.44	282.23	-74.50
% Total Excess Profit of Total Revenue	3.77	4.37	1.15

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Harbor Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	197,161,200	200,915,200	194,020,200
Unregulated Services	37,703,996	36,590,738	37,178,568
TOTAL	234,865,196	237,505,938	231,198,768
Net Patient Revenue(NPR):			
Regulated Services	164,310,074	169,691,122	161,116,541
Unregulated Services	15,375,573	14,811,677	16,331,426
TOTAL	179,685,647	184,502,799	177,447,967
Other Operating Revenue:			
Regulated Services	2,207,599	2,672,013	1,646,159
Unregulated Services	8,090,569	7,116,396	7,255,612
TOTAL	10,298,168	9,788,409	8,901,771
Net Operating Revenue(NOR)			
Regulated Services	166,517,673	172,363,135	162,762,700
Unregulated Services	23,466,142	21,928,073	23,587,038
Total	189,983,815	194,291,208	186,349,738
Total Operating Expenses:			
Regulated Services	156,405,328	165,072,123	156,929,854
Total	183,721,998	188,476,023	179,690,880
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	17,511	18,443	18,190
Total	18,358	19,382	19,419
NPR per EIPA :			
Regulated Services	9,383.37	9,200.93	8,857.48
Total	9,787.72	9,519.50	9,137.91
NOR per EIPA :			
Regulated Services	9,509.44	9,345.81	8,947.98
Total	10,348.68	10,024.53	9,596.32
Operating Expenses per EIPA :			
Regulated Services	8,931.94	8,950.48	8,627.32
Total	10,007.59	9,724.50	9,253.41
Net Operating Profit(Loss):			
Regulated Services	10,112,345	7,291,012	5,832,846
Unregulated Services	-3,850,528	-1,475,827	826,012
Total	6,261,817	5,815,185	6,658,858
Total Non-Operating Profit(Loss):	121,052	174,456	370,628
Non-Operating Revenue	121,052	174,456	370,628
Non-Operating Expenses	0	0	0
Total Excess Profit	6,382,869	5,989,641	7,029,486
% Change in NPR per EIPA - Regulated	1.98	3.88	3.80
% Change in NOR per EIPA - Regulated	1.75	4.45	3.78
% Change in Oper. Expense per EIPA- Regulated	-0.21	3.75	1.80
% Change in Net Operating Profit- Regulated	38.70	25.00	129.15
% Net Operating Profit of Regulated NOR	6.07	4.23	3.58
% Change in Net Operating Profit- Total	7.68	-12.67	53.29
% Net Total Operating Profit of Total NOR	3.30	2.99	3.57
% Change in Total Excess Profit	6.57	-14.79	40.71
% Total Excess Profit of Total Revenue	3.36	3.08	3.76

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Harford Memorial Hospital

FISCAL YEAR ENDING	December 2010 -----	December 2009 -----	December 2008 -----
Gross Patient Revenue:			
Regulated Services	100,141,200	96,235,600	98,289,100
Unregulated Services	94,100	177,100	1,349,700
TOTAL	100,235,300	96,412,700	99,638,800
Net Patient Revenue(NPR):			
Regulated Services	81,680,300	78,372,221	79,516,660
Unregulated Services	37,700	120,700	815,900
TOTAL	81,718,000	78,492,921	80,332,560
Other Operating Revenue:			
Regulated Services	763,700	710,400	130,400
Unregulated Services	476,300	470,700	550,600
TOTAL	1,240,000	1,181,100	681,000
Net Operating Revenue(NOR)			
Regulated Services	82,444,000	79,082,621	79,647,060
Unregulated Services	514,000	591,400	1,366,500
Total	82,958,000	79,674,021	81,013,560
Total Operating Expenses:			
Regulated Services	76,898,545	75,803,751	75,087,925
Total	79,662,900	77,244,100	77,095,805
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	11,255	11,686	12,664
Total	11,265	11,707	12,833
NPR per EIPA :			
Regulated Services	7,257.39	6,706.72	6,279.14
Total	7,253.92	6,704.71	6,260.04
NOR per EIPA :			
Regulated Services	7,325.25	6,767.51	6,289.44
Total	7,364.00	6,805.60	6,313.11
Operating Expenses per EIPA :			
Regulated Services	6,832.53	6,486.92	5,929.42
Total	7,071.50	6,598.04	6,007.82
Net Operating Profit(Loss):			
Regulated Services	5,545,455	3,278,870	4,559,135
Unregulated Services	-2,250,355	-848,949	-641,380
Total	3,295,100	2,429,921	3,917,755
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	5,190,000	7,260,800	-18,761,000
Non-Operating Expenses	0	218,600	0
Total	5,190,000	7,479,400	18,761,000
Total Excess Profit	8,485,100	9,690,721	-14,843,245
% Change in NPR per EIPA - Regulated	8.21	6.81	4.16
% Change in NOR per EIPA - Regulated	8.24	7.60	4.24
% Change in Oper. Expense per EIPA- Regulated	5.33	9.40	1.81
% Change in Net Operating Profit- Regulated	69.13	-28.08	99.52
% Net Operating Profit of Regulated NOR	6.73	4.15	5.72
% Change in Net Operating Profit- Total	35.61	-37.98	384.57
% Net Total Operating Profit of Total NOR	3.97	3.05	4.84
% Change in Total Excess Profit	-12.44	165.29	-410.82
% Total Excess Profit of Total Revenue	9.63	11.12	-18.32

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Holy Cross Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	411,325,700	394,466,500	383,143,400
Unregulated Services	35,005,000	33,989,800	29,409,187
TOTAL	446,330,700	428,456,300	412,552,587
Net Patient Revenue(NPR):			
Regulated Services	341,997,483	332,740,684	326,703,070
Unregulated Services	21,223,300	21,529,500	17,763,050
TOTAL	363,220,783	354,270,184	344,466,120
Other Operating Revenue:			
Regulated Services	1,396,700	2,420,600	1,845,644
Unregulated Services	11,161,300	11,330,300	6,712,735
TOTAL	12,558,000	13,750,900	8,558,379
Net Operating Revenue(NOR)			
Regulated Services	343,394,183	335,161,284	328,548,714
Unregulated Services	32,384,600	32,859,800	24,475,785
Total	375,778,783	368,021,084	353,024,499
Total Operating Expenses:			
Regulated Services	311,789,082	309,458,016	293,545,246
Total	353,793,200	349,019,900	329,472,259
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	38,770	38,000	35,896
Total	42,070	41,216	38,234
NPR per EIPA :			
Regulated Services	8,821.08	8,756.24	9,101.29
Total	8,633.78	8,595.40	9,009.41
NOR per EIPA :			
Regulated Services	8,857.10	8,819.94	9,152.71
Total	8,932.28	8,929.03	9,233.25
Operating Expenses per EIPA :			
Regulated Services	8,041.92	8,143.55	8,177.58
Total	8,409.68	8,468.02	8,617.25
Net Operating Profit(Loss):			
Regulated Services	31,605,101	25,703,268	35,003,468
Unregulated Services	-9,619,518	-6,702,084	-11,451,228
Total	21,985,583	19,001,184	23,552,240
Total Non-Operating Profit(Loss):	9,766,800	-18,839,400	-2,961,225
Non-Operating Revenue	9,766,800	-18,839,400	-4,846,225
Non-Operating Expenses	0	0	-1,885,000
Total Excess Profit	31,752,383	161,784	20,591,015
% Change in NPR per EIPA - Regulated	0.74	-3.79	12.50
% Change in NOR per EIPA - Regulated	0.42	-3.64	12.02
% Change in Oper. Expense per EIPA- Regulated	-1.25	-0.42	5.08
% Change in Net Operating Profit- Regulated	22.96	-26.57	149.55
% Net Operating Profit of Regulated NOR	9.20	7.67	10.65
% Change in Net Operating Profit- Total	15.71	-19.32	46.27
% Net Total Operating Profit of Total NOR	5.85	5.16	6.67
% Change in Total Excess Profit	19,526.40	-99.21	-23.64
% Total Excess Profit of Total Revenue	8.24	0.05	5.91

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Howard County General Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	244,838,400	230,685,500	212,299,000
Unregulated Services	20,581,565	19,115,758	16,523,387
TOTAL	265,419,965	249,801,258	228,822,387
Net Patient Revenue(NPR):			
Regulated Services	211,253,743	202,845,676	188,616,540
Unregulated Services	11,661,033	10,365,793	8,787,404
TOTAL	222,914,776	213,211,469	197,403,944
Other Operating Revenue:			
Regulated Services	43,685	52,447	68,031
Unregulated Services	2,736,258	2,413,954	2,604,935
TOTAL	2,779,943	2,466,401	2,672,966
Net Operating Revenue(NOR)			
Regulated Services	211,297,428	202,898,123	188,684,571
Unregulated Services	14,397,291	12,779,747	11,392,339
Total	225,694,719	215,677,870	200,076,910
Total Operating Expenses:			
Regulated Services	201,837,199	187,698,057	179,292,066
Total	223,727,115	207,211,827	194,956,065
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	23,760	22,589	20,922
Total	22,852	21,689	20,198
NPR per EIPA :			
Regulated Services	8,890.97	8,979.76	9,015.10
Total	9,754.61	9,830.21	9,773.47
NOR per EIPA :			
Regulated Services	8,892.80	8,982.08	9,018.36
Total	9,876.25	9,943.92	9,905.81
Operating Expenses per EIPA :			
Regulated Services	8,494.65	8,309.19	8,569.43
Total	9,790.15	9,553.59	9,652.27
Net Operating Profit(Loss):			
Regulated Services	9,460,229	15,200,066	9,392,505
Unregulated Services	-7,492,625	-6,734,024	-4,271,660
Total	1,967,604	8,466,043	5,120,845
Total Non-Operating Profit(Loss):	-6,200,840	-3,464,586	-1,620,842
Non-Operating Revenue	809,508	1,467,414	-1,620,842
Non-Operating Expenses	7,010,348	4,932,000	0
Total Excess Profit	-4,233,236	5,001,457	3,500,003
% Change in NPR per EIPA - Regulated	-0.99	-0.39	14.04
% Change in NOR per EIPA - Regulated	-0.99	-0.40	14.00
% Change in Oper. Expense per EIPA- Regulated	2.23	-3.04	12.49
% Change in Net Operating Profit- Regulated	-37.76	61.83	50.50
% Net Operating Profit of Regulated NOR	4.48	7.49	4.98
% Change in Net Operating Profit- Total	-76.76	65.33	13.49
% Net Total Operating Profit of Total NOR	0.87	3.93	2.56
% Change in Total Excess Profit	-184.64	42.90	-48.67
% Total Excess Profit of Total Revenue	-1.87	2.30	1.76

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

James Lawrence Kernan Hospital

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	101,537,800	105,778,700	97,293,600
Unregulated Services	0	3,679,257	3,550,930
TOTAL	101,537,800	109,457,957	100,844,530
Net Patient Revenue(NPR):			
Regulated Services	87,319,800	93,226,825	86,853,388
Unregulated Services	-1,353,000	1,681,665	1,656,142
TOTAL	85,966,800	94,908,490	88,509,530
Other Operating Revenue:			
Regulated Services	597,071	886,935	4,652,504
Unregulated Services	4,866,129	1,610,065	447,496
TOTAL	5,463,200	2,497,000	5,100,000
Net Operating Revenue(NOR)			
Regulated Services	87,916,871	94,113,760	91,505,893
Unregulated Services	3,513,129	3,291,730	2,103,638
Total	91,430,000	97,405,490	93,609,530
Total Operating Expenses:			
Regulated Services	87,012,906	91,630,182	88,121,888
Total	91,563,920	95,194,646	91,803,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	4,997	5,087	5,063
Total	4,997	5,264	5,248
NPR per EIPA :			
Regulated Services	17,473.40	18,326.10	17,155.16
Total	17,202.65	18,029.56	16,866.69
NOR per EIPA :			
Regulated Services	17,592.88	18,500.45	18,074.11
Total	18,295.88	18,503.91	17,838.56
Operating Expenses per EIPA :			
Regulated Services	17,411.99	18,012.24	17,405.71
Total	18,322.68	18,083.92	17,494.30
Net Operating Profit(Loss):			
Regulated Services	903,964	2,483,578	3,384,005
Unregulated Services	-1,037,884	-272,734	-1,577,475
Total	-133,920	2,210,844	1,806,530
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,309,000	397,501	745,000
Non-Operating Expenses	0	1,818,700	0
Total Excess Profit	1,175,080	789,645	2,551,530
% Change in NPR per EIPA - Regulated			
	-4.65	6.83	1.13
% Change in NOR per EIPA - Regulated			
	-4.91	2.36	2.45
% Change in Oper. Expense per EIPA- Regulated			
	-3.33	3.48	-0.06
% Change in Net Operating Profit- Regulated			
	-63.60	-26.61	218.54
% Net Operating Profit of Regulated NOR			
	1.03	2.64	3.70
% Change in Net Operating Profit- Total			
	-106.06	22.38	122.98
% Net Total Operating Profit of Total NOR			
	-0.15	2.27	1.93
% Change in Total Excess Profit			
	48.81	-69.05	51.14
% Total Excess Profit of Total Revenue			
	1.27	0.81	2.70

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Johns Hopkins Bayview Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	518,108,900	513,495,600	492,861,500
Unregulated Services	9,797,300	9,715,700	14,694,800
TOTAL	527,906,200	523,211,300	507,556,300
Net Patient Revenue(NPR):			
Regulated Services	430,968,800	431,873,500	414,509,200
Unregulated Services	9,381,300	9,028,700	13,920,800
TOTAL	440,350,100	440,902,200	428,430,000
Other Operating Revenue:			
Regulated Services	7,030,600	9,289,900	8,409,300
Unregulated Services	37,923,500	41,450,300	43,878,100
TOTAL	44,954,100	50,740,200	52,287,400
Net Operating Revenue(NOR)			
Regulated Services	437,999,400	441,163,400	422,918,500
Unregulated Services	47,304,800	50,479,000	57,798,900
Total	485,304,200	491,642,400	480,717,400
Total Operating Expenses:			
Regulated Services	427,728,068	427,307,515	413,255,263
Total	484,383,800	490,071,966	476,097,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	33,626	33,167	32,999
Total	34,271	33,623	33,631
NPR per EIPA :			
Regulated Services	12,816.61	13,021.25	12,561.12
Total	12,849.16	13,112.95	12,739.09
NOR per EIPA :			
Regulated Services	13,025.69	13,301.35	12,815.95
Total	14,160.90	14,622.03	14,293.82
Operating Expenses per EIPA :			
Regulated Services	12,720.23	12,883.58	12,523.12
Total	14,134.04	14,575.32	14,156.44
Net Operating Profit(Loss):			
Regulated Services	10,271,332	13,855,885	9,663,237
Unregulated Services	-9,350,932	-12,285,451	-5,042,837
Total	920,400	1,570,434	4,620,400
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,424,600	-6,894,800	-3,196,000
Non-Operating Expenses	0	0	0
Total Excess Profit	2,345,000	-5,324,366	1,424,400
% Change in NPR per EIPA - Regulated	-1.57	3.66	12.37
% Change in NOR per EIPA - Regulated	-2.07	3.79	11.90
% Change in Oper. Expense per EIPA- Regulated	-1.27	2.88	11.53
% Change in Net Operating Profit- Regulated	-25.87	43.39	28.88
% Net Operating Profit of Regulated NOR	2.35	3.14	2.28
% Change in Net Operating Profit- Total	-41.39	-66.01	-11.05
% Net Total Operating Profit of Total NOR	0.19	0.32	0.96
% Change in Total Excess Profit	144.04	-473.80	-80.31
% Total Excess Profit of Total Revenue	0.48	-1.10	0.30

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Johns Hopkins Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	1,709,103,100	1,620,280,400	1,532,521,600
Unregulated Services	5,651,044	5,439,920	31,835,391
TOTAL	1,714,754,144	1,625,720,320	1,564,356,991
Net Patient Revenue(NPR):			
Regulated Services	1,480,465,000	1,412,843,376	1,324,205,233
Unregulated Services	4,780,844	5,242,157	30,988,065
TOTAL	1,485,245,844	1,418,085,533	1,355,193,298
Other Operating Revenue:			
Regulated Services	12,978,862	12,601,700	12,433,825
Unregulated Services	112,518,817	102,060,174	67,611,814
TOTAL	125,497,679	114,661,874	80,045,639
Net Operating Revenue(NOR)			
Regulated Services	1,493,443,862	1,425,445,076	1,336,639,058
Unregulated Services	117,299,661	107,302,331	98,599,879
Total	1,610,743,523	1,532,747,407	1,435,238,937
Total Operating Expenses:			
Regulated Services	1,425,987,171	1,359,674,406	1,298,299,098
Total	1,551,076,600	1,470,612,081	1,392,943,327
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	70,234	69,843	67,513
Total	70,947	70,526	69,409
NPR per EIPA :			
Regulated Services	21,078.89	20,228.93	19,614.16
Total	20,934.49	20,107.21	19,524.77
NOR per EIPA :			
Regulated Services	21,263.68	20,409.36	19,798.33
Total	22,703.37	21,733.02	20,678.01
Operating Expenses per EIPA :			
Regulated Services	20,303.23	19,467.66	19,230.44
Total	21,862.37	20,852.00	20,068.65
Net Operating Profit(Loss):			
Regulated Services	67,456,691	65,770,670	38,339,960
Unregulated Services	-7,789,768	-3,635,344	3,955,650
Total	59,666,923	62,135,326	42,295,610
Total Non-Operating Profit(Loss):	20,587,163	-55,201,263	27,352,276
Non-Operating Revenue	20,587,163	21,156,737	27,352,276
Non-Operating Expenses	0	76,358,000	0
Total Excess Profit	80,254,086	6,934,063	69,647,886
% Change in NPR per EIPA - Regulated	4.20	3.13	5.32
% Change in NOR per EIPA - Regulated	4.19	3.09	5.34
% Change in Oper. Expense per EIPA- Regulated	4.29	1.23	4.69
% Change in Net Operating Profit- Regulated	2.56	71.55	36.33
% Net Operating Profit of Regulated NOR	4.52	4.61	2.87
% Change in Net Operating Profit- Total	-3.97	46.91	20.27
% Net Total Operating Profit of Total NOR	3.70	4.05	2.95
% Change in Total Excess Profit	1,057.39	-90.04	14.90
% Total Excess Profit of Total Revenue	4.92	0.45	4.76

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Laurel Regional Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	102,846,900	91,640,000	93,150,500
Unregulated Services	4,249,425	4,540,332	4,305,862
TOTAL	107,096,325	96,180,332	97,456,362
Net Patient Revenue(NPR):			
Regulated Services	85,075,631	76,473,729	77,436,743
Unregulated Services	1,232,334	1,295,259	1,227,262
TOTAL	86,307,965	77,768,988	78,664,005
Other Operating Revenue:			
Regulated Services	430,579	751,054	489,471
Unregulated Services	0	0	0
TOTAL	430,579	751,054	489,471
Net Operating Revenue(NOR)			
Regulated Services	85,506,210	77,224,783	77,926,214
Unregulated Services	1,232,334	1,295,259	1,227,262
Total	86,738,544	78,520,042	79,153,476
Total Operating Expenses:			
Regulated Services	85,563,681	83,281,501	79,839,494
Total	92,314,140	90,274,361	86,122,739
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	9,669	10,045	9,766
Total	9,459	9,825	10,218
NPR per EIPA :			
Regulated Services	8,798.81	7,612.76	7,929.15
Total	9,124.70	7,915.10	7,698.94
NOR per EIPA :			
Regulated Services	8,843.34	7,687.53	7,979.27
Total	9,170.22	7,991.54	7,746.84
Operating Expenses per EIPA :			
Regulated Services	8,849.29	8,290.46	8,175.18
Total	9,759.69	9,187.86	8,428.93
Net Operating Profit(Loss):			
Regulated Services	-57,471	-6,056,718	-1,913,281
Unregulated Services	-5,518,125	-5,697,601	-5,055,983
Total	-5,575,596	-11,754,319	-6,969,263
Total Non-Operating Profit(Loss):	6,056,896	63,350	267,261
Non-Operating Revenue	6,056,896	63,350	267,261
Non-Operating Expenses	0	0	0
Total Excess Profit	481,300	-11,690,969	-6,702,002
% Change in NPR per EIPA - Regulated	15.58	-3.99	5.65
% Change in NOR per EIPA - Regulated	15.03	-3.66	5.04
% Change in Oper. Expense per EIPA- Regulated	6.74	1.41	2.87
% Change in Net Operating Profit- Regulated	99.05	-216.56	42.50
% Net Operating Profit of Regulated NOR	-0.07	-7.84	-2.46
% Change in Net Operating Profit- Total	52.57	-68.66	-1.78
% Net Total Operating Profit of Total NOR	-6.43	-14.97	-8.80
% Change in Total Excess Profit	104.12	-74.44	-14.33
% Total Excess Profit of Total Revenue	0.52	-14.88	-8.44

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Maryland General Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	178,831,900	181,868,000	180,632,100
Unregulated Services	8,126,907	8,435,023	981,764
TOTAL	186,958,807	190,303,023	181,613,864
Net Patient Revenue(NPR):			
Regulated Services	153,660,657	156,919,437	151,988,277
Unregulated Services	8,003,532	8,315,856	682,533
TOTAL	161,664,189	165,235,293	152,670,810
Other Operating Revenue:			
Regulated Services	281,654	1,174,660	330,836
Unregulated Services	1,312,747	1,054,110	1,168,354
TOTAL	1,594,401	2,228,770	1,499,190
Net Operating Revenue(NOR)			
Regulated Services	153,942,311	158,094,097	152,319,113
Unregulated Services	9,316,279	9,369,966	1,850,887
Total	163,258,590	167,464,063	154,170,000
Total Operating Expenses:			
Regulated Services	136,446,598	142,361,768	135,532,597
Total	160,331,953	166,541,201	151,361,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	14,282	14,862	15,031
Total	14,931	15,551	15,113
NPR per EIPA :			
Regulated Services	10,758.77	10,558.79	10,111.60
Total	10,827.11	10,625.53	10,102.10
NOR per EIPA :			
Regulated Services	10,778.49	10,637.83	10,133.61
Total	10,933.89	10,768.86	10,201.30
Operating Expenses per EIPA :			
Regulated Services	9,553.50	9,579.23	9,016.82
Total	10,737.89	10,709.51	10,015.43
Net Operating Profit(Loss):			
Regulated Services	17,495,713	15,732,329	16,786,516
Unregulated Services	-14,569,076	-14,809,467	-13,977,516
Total	2,926,637	922,862	2,809,000
Total Non-Operating Profit(Loss):	828,000	-2,334,200	889,000
Non-Operating Revenue	828,000	-2,334,200	889,000
Non-Operating Expenses	0	0	0
Total Excess Profit	3,754,637	-1,411,338	3,698,000
% Change in NPR per EIPA - Regulated	1.89	4.42	7.41
% Change in NOR per EIPA - Regulated	1.32	4.98	15.54
% Change in Oper. Expense per EIPA- Regulated	-0.27	6.24	10.31
% Change in Net Operating Profit- Regulated	11.21	-6.28	86.08
% Net Operating Profit of Regulated NOR	11.37	9.95	11.02
% Change in Net Operating Profit- Total	217.13	-67.15	1,573.49
% Net Total Operating Profit of Total NOR	1.79	0.55	1.82
% Change in Total Excess Profit	366.03	-138.16	107.42
% Total Excess Profit of Total Revenue	2.29	-0.85	2.38

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Memorial Hosp and Med Ctr of Cumberland

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	.	106,194,800	101,185,500
Unregulated Services	.	23,681,300	22,385,900
TOTAL	.	129,876,100	123,571,400
Net Patient Revenue(NPR):			
Regulated Services	.	88,316,900	84,603,800
Unregulated Services	.	15,029,900	15,262,600
TOTAL	.	103,346,800	99,866,400
Other Operating Revenue:			
Regulated Services	.	416,900	63,300
Unregulated Services	.	1,470,500	1,450,200
TOTAL	.	1,887,400	1,513,500
Net Operating Revenue(NOR)			
Regulated Services	.	88,733,800	84,667,100
Unregulated Services	.	16,500,400	16,712,800
Total	.	105,234,200	101,379,900
Total Operating Expenses:			
Regulated Services	.	83,282,630	82,700,644
Total	.	100,317,300	98,915,700
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	.	11,167	11,634
Total	.	13,657	14,207
NPR per EIPA :			
Regulated Services	.	7,908.74	7,272.34
Total	.	7,567.19	7,029.17
NOR per EIPA :			
Regulated Services	.	7,946.07	7,277.78
Total	.	7,705.39	7,135.69
Operating Expenses per EIPA :			
Regulated Services	.	7,457.92	7,108.75
Total	.	7,345.37	6,962.25
Net Operating Profit(Loss):			
Regulated Services	.	5,451,170	1,966,456
Unregulated Services	.	-534,270	497,744
Total	.	4,916,900	2,464,200
Total Non-Operating Profit(Loss):	.	1,339,400	2,516,600
Non-Operating Revenue	.	1,467,500	3,033,900
Non-Operating Expenses	.	128,100	517,300
Total Excess Profit	.	6,256,300	4,980,800
% Change in NPR per EIPA - Regulated	.	8.75	9.40
% Change in NOR per EIPA - Regulated	.	9.18	8.52
% Change in Oper. Expense per EIPA- Regulated	.	4.91	5.92
% Change in Net Operating Profit- Regulated	.	177.21	3,142.73
% Net Operating Profit of Regulated NOR	.	6.14	2.32
% Change in Net Operating Profit- Total	.	99.53	7,544.71
% Net Total Operating Profit of Total NOR	.	4.67	2.43
% Change in Total Excess Profit	.	25.61	98.18
% Total Excess Profit of Total Revenue	.	5.86	4.77

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Memorial Hospital at Easton

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	160,769,200	160,032,300	144,112,600
Unregulated Services	31,648,639	32,948,771	30,351,092
TOTAL	192,417,839	192,981,071	174,463,692
Net Patient Revenue(NPR):			
Regulated Services	137,414,364	139,245,218	125,016,601
Unregulated Services	12,376,870	13,312,423	12,189,249
TOTAL	149,791,234	152,557,641	137,205,850
Other Operating Revenue:			
Regulated Services	1,806,811	1,770,296	2,321,914
Unregulated Services	1,472,209	1,451,188	1,509,780
TOTAL	3,279,020	3,221,484	3,831,694
Net Operating Revenue(NOR)			
Regulated Services	139,221,175	141,015,514	127,338,515
Unregulated Services	13,849,079	14,763,611	13,699,029
Total	153,070,254	155,779,125	141,037,544
Total Operating Expenses:			
Regulated Services	133,188,248	134,106,845	125,451,524
Total	147,698,367	147,694,022	137,972,084
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	16,433	16,349	16,140
Total	19,668	19,715	19,539
NPR per EIPA :			
Regulated Services	8,362.00	8,517.27	7,745.65
Total	7,615.91	7,738.32	7,021.98
NOR per EIPA :			
Regulated Services	8,471.95	8,625.55	7,889.51
Total	7,782.63	7,901.73	7,218.08
Operating Expenses per EIPA :			
Regulated Services	8,104.83	8,202.96	7,772.60
Total	7,509.51	7,491.62	7,061.20
Net Operating Profit(Loss):			
Regulated Services	6,032,927	6,908,669	1,886,991
Unregulated Services	-661,040	1,176,434	1,178,469
Total	5,371,887	8,085,103	3,065,460
Total Non-Operating Profit(Loss):	4,540,080	-6,152,200	-609,827
Non-Operating Revenue	4,540,080	-6,152,200	-609,827
Non-Operating Expenses	0	0	0
Total Excess Profit	9,911,967	1,932,904	2,455,633
% Change in NPR per EIPA - Regulated	-1.82	9.96	0.87
% Change in NOR per EIPA - Regulated	-1.78	9.33	1.10
% Change in Oper. Expense per EIPA- Regulated	-1.20	5.54	4.16
% Change in Net Operating Profit- Regulated	-12.68	266.12	-62.37
% Net Operating Profit of Regulated NOR	4.33	4.90	1.48
% Change in Net Operating Profit- Total	-33.56	163.75	-14.75
% Net Total Operating Profit of Total NOR	3.51	5.19	2.17
% Change in Total Excess Profit	412.80	-21.29	-70.08
% Total Excess Profit of Total Revenue	6.29	1.29	1.75

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Mercy Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	388,727,200	382,169,900	353,240,000
Unregulated Services	4,801,123	5,560,503	5,922,547
TOTAL	393,528,323	387,730,403	359,162,547
Net Patient Revenue(NPR):			
Regulated Services	335,374,561	334,232,485	310,781,321
Unregulated Services	4,801,123	5,560,503	5,922,547
TOTAL	340,175,684	339,792,988	316,703,868
Other Operating Revenue:			
Regulated Services	3,857,230	3,761,737	4,681,500
Unregulated Services	11,283,344	12,033,663	12,074,420
TOTAL	15,140,574	15,795,400	16,755,920
Net Operating Revenue(NOR)			
Regulated Services	339,231,791	337,994,222	315,462,821
Unregulated Services	16,084,467	17,594,166	17,996,967
Total	355,316,258	355,588,388	333,459,788
Total Operating Expenses:			
Regulated Services	307,650,947	304,063,622	286,723,944
Total	330,084,298	324,261,908	306,485,734
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	33,527	33,604	32,666
Total	33,941	34,093	33,214
NPR per EIPA :			
Regulated Services	10,003.21	9,946.08	9,513.81
Total	10,022.63	9,966.54	9,535.25
NOR per EIPA :			
Regulated Services	10,118.26	10,058.02	9,657.12
Total	10,468.71	10,429.83	10,039.73
Operating Expenses per EIPA :			
Regulated Services	9,176.30	9,048.31	8,777.35
Total	9,725.30	9,510.99	9,227.60
Net Operating Profit(Loss):			
Regulated Services	31,580,844	33,930,600	28,738,877
Unregulated Services	-6,348,884	-2,604,120	-1,764,823
Total	25,231,960	31,326,480	26,974,054
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	6,014,865	-34,349,064	-6,891,000
Non-Operating Expenses	6,644,117	967,824	12,110,000
Non-Operating Expenses	629,252	35,316,888	19,001,000
Total Excess Profit	31,246,825	-3,022,584	20,083,054
% Change in NPR per EIPA - Regulated	0.57	4.54	0.12
% Change in NOR per EIPA - Regulated	0.60	4.15	-0.92
% Change in Oper. Expense per EIPA- Regulated	1.41	3.09	-0.05
% Change in Net Operating Profit- Regulated	-6.93	18.07	-0.78
% Net Operating Profit of Regulated NOR	9.31	10.04	9.11
% Change in Net Operating Profit- Total	-19.45	16.14	2.90
% Net Total Operating Profit of Total NOR	7.10	8.81	8.09
% Change in Total Excess Profit	1,133.78	-115.05	-35.76
% Total Excess Profit of Total Revenue	8.63	-0.85	5.81

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Montgomery General Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	149,773,600	140,619,400	135,140,700
Unregulated Services	6,599,491	4,110,000	681,200
TOTAL	156,373,091	144,729,400	135,821,900
Net Patient Revenue(NPR):			
Regulated Services	124,219,621	121,977,000	116,767,100
Unregulated Services	3,503,857	2,341,200	677,300
TOTAL	127,723,478	124,318,200	117,444,400
Other Operating Revenue:			
Regulated Services	1,517,012	1,157,800	1,409,300
Unregulated Services	624,241	439,300	302,100
TOTAL	2,141,253	1,597,100	1,711,400
Net Operating Revenue(NOR)			
Regulated Services	125,736,633	123,134,800	118,176,400
Unregulated Services	4,128,098	2,780,500	979,400
Total	129,864,731	125,915,300	119,155,800
Total Operating Expenses:			
Regulated Services	115,963,398	115,736,158	110,107,267
Total	125,528,572	122,776,400	114,666,300
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	14,228	14,591	14,058
Total	14,855	14,803	14,129
NPR per EIPA :			
Regulated Services	8,730.61	8,359.68	8,305.86
Total	8,598.02	8,397.91	8,312.14
NOR per EIPA :			
Regulated Services	8,837.23	8,439.03	8,406.11
Total	8,742.16	8,505.80	8,433.27
Operating Expenses per EIPA :			
Regulated Services	8,150.33	7,931.97	7,832.14
Total	8,450.26	8,293.76	8,115.52
Net Operating Profit(Loss):			
Regulated Services	9,773,235	7,398,642	8,069,133
Unregulated Services	-5,437,076	-4,259,742	-3,579,633
Total	4,336,159	3,138,900	4,489,500
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	2,791,019	-2,837,200	-4,141,400
Non-Operating Expenses	0	0	7,082,600
Total Excess Profit	7,127,178	301,700	348,100
% Change in NPR per EIPA - Regulated	4.44	0.65	3.76
% Change in NOR per EIPA - Regulated	4.72	0.39	4.26
% Change in Oper. Expense per EIPA- Regulated	2.75	1.27	4.55
% Change in Net Operating Profit- Regulated	32.09	-8.31	7.11
% Net Operating Profit of Regulated NOR	7.77	6.01	6.83
% Change in Net Operating Profit- Total	38.14	-30.08	-9.05
% Net Total Operating Profit of Total NOR	3.34	2.49	3.77
% Change in Total Excess Profit	2,262.34	-13.33	-95.21
% Total Excess Profit of Total Revenue	5.37	0.25	0.29

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Northwest Hospital Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	214,481,500	211,714,700	201,205,800
Unregulated Services	23,294,426	22,261,476	19,510,259
TOTAL	237,775,926	233,976,176	220,716,059
Net Patient Revenue(NPR):			
Regulated Services	178,377,100	178,142,957	170,962,500
Unregulated Services	9,727,678	8,944,551	8,106,696
TOTAL	188,104,778	187,087,508	179,069,196
Other Operating Revenue:			
Regulated Services	1,023,180	1,223,600	1,947,000
Unregulated Services	1,225,936	1,095,281	0
TOTAL	2,249,116	2,318,881	1,947,000
Net Operating Revenue(NOR)			
Regulated Services	179,400,280	179,366,557	172,909,500
Unregulated Services	10,953,614	10,039,832	8,106,696
Total	190,353,894	189,406,389	181,016,196
Total Operating Expenses:			
Regulated Services	161,514,213	159,137,100	154,091,772
Total	180,774,513	176,972,000	168,493,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	21,733	20,971	21,496
Total	23,180	22,427	22,547
NPR per EIPA :			
Regulated Services	8,207.81	8,494.63	7,953.41
Total	8,114.99	8,342.18	7,941.95
NOR per EIPA :			
Regulated Services	8,254.90	8,552.98	8,043.99
Total	8,212.02	8,445.57	8,028.30
Operating Expenses per EIPA :			
Regulated Services	7,431.89	7,588.35	7,168.56
Total	7,798.76	7,891.13	7,472.88
Net Operating Profit(Loss):			
Regulated Services	17,886,067	20,229,457	18,817,728
Unregulated Services	-8,306,686	-7,795,068	-6,294,532
Total	9,579,381	12,434,389	12,523,196
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	7,322,217	-8,766,031	-5,975,000
Non-Operating Expenses	0	0	0
Total Excess Profit	16,901,598	3,668,358	6,548,196
% Change in NPR per EIPA - Regulated	-3.38	6.80	1.69
% Change in NOR per EIPA - Regulated	-3.49	6.33	1.81
% Change in Oper. Expense per EIPA- Regulated	-2.06	5.86	1.20
% Change in Net Operating Profit- Regulated	-11.58	7.50	10.38
% Net Operating Profit of Regulated NOR	9.97	11.28	10.88
% Change in Net Operating Profit- Total	-22.96	-0.71	16.46
% Net Total Operating Profit of Total NOR	5.03	6.56	6.92
% Change in Total Excess Profit	360.74	-43.98	-75.18
% Total Excess Profit of Total Revenue	8.55	2.03	3.74

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Peninsula Regional Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	394,310,100	385,277,000	366,969,200
Unregulated Services	32,271,900	33,201,200	32,979,400
TOTAL	426,582,000	418,478,200	399,948,600
Net Patient Revenue(NPR):			
Regulated Services	332,910,100	331,729,600	318,253,000
Unregulated Services	17,521,900	18,785,400	18,728,400
TOTAL	350,432,000	350,515,000	336,981,400
Other Operating Revenue:			
Regulated Services	908,800	872,900	-28,500
Unregulated Services	1,172,500	1,123,300	1,127,200
TOTAL	2,081,300	1,996,200	1,098,700
Net Operating Revenue(NOR)			
Regulated Services	333,818,900	332,602,500	318,224,500
Unregulated Services	18,694,400	19,908,700	19,855,600
Total	352,513,300	352,511,200	338,080,100
Total Operating Expenses:			
Regulated Services	304,760,053	303,144,053	279,212,502
Total	345,483,300	340,475,200	309,880,100
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	31,730	31,193	30,094
Total	34,641	34,206	33,058
NPR per EIPA :			
Regulated Services	10,492.03	10,634.91	10,575.36
Total	10,116.20	10,247.26	10,193.60
NOR per EIPA :			
Regulated Services	10,520.67	10,662.89	10,574.41
Total	10,176.28	10,305.62	10,226.83
Operating Expenses per EIPA :			
Regulated Services	9,604.85	9,718.48	9,278.07
Total	9,973.34	9,953.75	9,373.79
Net Operating Profit(Loss):			
Regulated Services	29,058,847	29,458,447	39,011,998
Unregulated Services	-22,028,847	-17,422,447	-10,811,998
Total	7,030,000	12,036,000	28,200,000
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	12,057,000	-17,877,000	10,106,000
Non-Operating Expenses	0	0	0
Total Excess Profit	19,087,000	-5,841,000	38,306,000
% Change in NPR per EIPA - Regulated	-1.34	0.56	5.08
% Change in NOR per EIPA - Regulated	-1.33	0.84	5.00
% Change in Oper. Expense per EIPA- Regulated	-1.17	4.75	1.88
% Change in Net Operating Profit- Regulated	-1.36	-24.49	39.88
% Net Operating Profit of Regulated NOR	8.70	8.86	12.26
% Change in Net Operating Profit- Total	-41.59	-57.32	30.83
% Net Total Operating Profit of Total NOR	1.99	3.41	8.34
% Change in Total Excess Profit	426.78	-115.25	16.37
% Total Excess Profit of Total Revenue	5.24	-1.75	11.00

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Prince George's Hospital Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	251,597,300	260,576,400	241,928,700
Unregulated Services	37,676,835	34,623,914	33,660,372
TOTAL	289,274,135	295,200,314	275,589,072
Net Patient Revenue(NPR):			
Regulated Services	204,287,834	210,964,197	197,518,266
Unregulated Services	16,938,796	15,513,731	13,910,441
TOTAL	221,226,630	226,477,928	211,428,706
Other Operating Revenue:			
Regulated Services	1,779,830	884,971	1,482,579
Unregulated Services	2,048,133	1,907,144	1,581,133
TOTAL	3,827,963	2,792,115	3,063,712
Net Operating Revenue(NOR)			
Regulated Services	206,067,664	211,849,168	199,000,845
Unregulated Services	18,986,929	17,420,875	15,491,574
Total	225,054,593	229,270,043	214,492,418
Total Operating Expenses:			
Regulated Services	209,892,050	212,101,859	198,288,498
Total	245,390,149	244,485,919	229,159,939
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	17,809	18,250	17,385
Total	18,604	19,008	18,116
NPR per EIPA :			
Regulated Services	11,471.11	11,559.98	11,361.27
Total	11,891.59	11,914.57	11,670.95
NOR per EIPA :			
Regulated Services	11,571.06	11,608.47	11,446.55
Total	12,097.36	12,061.45	11,840.07
Operating Expenses per EIPA :			
Regulated Services	11,785.80	11,622.32	11,405.58
Total	13,190.46	12,861.93	12,649.72
Net Operating Profit(Loss):			
Regulated Services	-3,824,386	-252,691	712,347
Unregulated Services	-16,511,170	-14,963,185	-15,379,867
Total	-20,335,556	-15,215,876	-14,667,521
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	16,718,235	26,693,589	17,879,440
Non-Operating Expenses	0	0	0
Total Excess Profit	-3,617,321	11,477,713	3,211,919
% Change in NPR per EIPA - Regulated	-0.77	1.75	0.96
% Change in NOR per EIPA - Regulated	-0.32	1.41	-11.94
% Change in Oper. Expense per EIPA- Regulated	1.41	1.90	2.53
% Change in Net Operating Profit- Regulated	-1,413.46	-135.47	-97.82
% Net Operating Profit of Regulated NOR	-1.86	-0.12	0.36
% Change in Net Operating Profit- Total	-33.65	-3.74	-178.10
% Net Total Operating Profit of Total NOR	-9.04	-6.64	-6.84
% Change in Total Excess Profit	-131.52	257.35	-83.79
% Total Excess Profit of Total Revenue	-1.50	4.48	1.38

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

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Saint Agnes Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	357,504,800	358,890,700	333,555,200
Unregulated Services	125,464,523	112,470,503	90,608,898
TOTAL	482,969,323	471,361,203	424,164,098
Net Patient Revenue(NPR):			
Regulated Services	307,715,930	307,252,556	284,136,736
Unregulated Services	51,769,365	47,001,651	38,653,468
TOTAL	359,485,295	354,254,207	322,790,204
Other Operating Revenue:			
Regulated Services	1,952,195	3,590,078	2,965,213
Unregulated Services	3,810,672	3,261,559	3,558,970
TOTAL	5,762,867	6,851,637	6,524,183
Net Operating Revenue(NOR)			
Regulated Services	309,668,125	310,842,634	287,101,949
Unregulated Services	55,580,037	50,263,210	42,212,438
Total	365,248,162	361,105,844	329,314,387
Total Operating Expenses:			
Regulated Services	275,390,240	275,685,027	260,314,417
Total	349,799,377	343,421,097	317,966,817
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	30,735	30,686	28,454
Total	38,014	37,473	33,668
NPR per EIPA :			
Regulated Services	10,011.87	10,012.70	9,985.76
Total	9,456.66	9,453.59	9,587.44
NOR per EIPA :			
Regulated Services	10,075.39	10,129.69	10,089.97
Total	9,608.26	9,636.43	9,781.22
Operating Expenses per EIPA :			
Regulated Services	8,960.12	8,983.98	9,148.54
Total	9,201.86	9,164.50	9,444.18
Net Operating Profit(Loss):			
Regulated Services	34,277,885	35,157,607	26,787,532
Unregulated Services	-18,829,100	-17,472,860	-15,439,962
Total	15,448,785	17,684,747	11,347,570
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	27,374,372	-37,124,996	1,280,447
Non-Operating Expenses	24,968,464	-37,124,996	1,280,447
	-2,405,908	0	0
Total Excess Profit	42,823,157	-19,440,249	12,628,017
% Change in NPR per EIPA - Regulated	-0.01	0.27	6.02
% Change in NOR per EIPA - Regulated	-0.54	0.39	5.32
% Change in Oper. Expense per EIPA- Regulated	-0.27	-1.80	5.24
% Change in Net Operating Profit- Regulated	-2.50	31.25	2.59
% Net Operating Profit of Regulated NOR	11.07	11.31	9.33
% Change in Net Operating Profit- Total	-12.64	55.85	-37.41
% Net Total Operating Profit of Total NOR	4.23	4.90	3.45
% Change in Total Excess Profit	320.28	-253.95	-74.20
% Total Excess Profit of Total Revenue	10.97	-6.00	3.82

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

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Saint Joseph Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	375,076,400	398,844,400	363,810,300
Unregulated Services	40,398,697	47,008,578	38,259,184
TOTAL	415,475,097	445,852,978	402,069,484
Net Patient Revenue(NPR):			
Regulated Services	307,247,166	339,694,906	322,493,187
Unregulated Services	19,135,082	21,683,700	17,339,626
TOTAL	326,382,248	361,378,606	339,832,813
Other Operating Revenue:			
Regulated Services	141,335	1,079,638	778,886
Unregulated Services	5,937,588	5,248,578	4,959,932
TOTAL	6,078,923	6,328,216	5,738,818
Net Operating Revenue(NOR)			
Regulated Services	307,388,501	340,774,543	323,272,073
Unregulated Services	25,072,670	26,932,278	22,299,558
Total	332,461,171	367,706,822	345,571,631
Total Operating Expenses:			
Regulated Services	299,994,287	322,090,976	322,940,196
Total	350,177,336	372,532,167	363,575,748
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	28,322	31,752	30,498
Total	31,372	35,486	30,864
NPR per EIPA :			
Regulated Services	10,848.17	10,698.23	10,574.30
Total	10,403.73	10,183.83	11,010.54
NOR per EIPA :			
Regulated Services	10,853.16	10,732.23	10,599.84
Total	10,597.50	10,362.16	11,196.47
Operating Expenses per EIPA :			
Regulated Services	10,592.09	10,143.82	10,588.95
Total	11,162.22	10,498.14	11,779.80
Net Operating Profit(Loss):			
Regulated Services	7,394,214	18,683,567	331,877
Unregulated Services	-25,110,379	-23,508,912	-18,335,994
Total	-17,716,165	-4,825,345	-18,004,117
Total Non-Operating Profit(Loss):	5,443,008	-9,452,618	6,269,504
Non-Operating Revenue	5,443,008	12,547,382	6,269,504
Non-Operating Expenses	0	22,000,000	0
Total Excess Profit	-12,273,157	-14,277,963	-11,734,613
% Change in NPR per EIPA - Regulated	1.40	1.17	2.24
% Change in NOR per EIPA - Regulated	1.13	1.25	1.95
% Change in Oper. Expense per EIPA- Regulated	4.42	-4.20	6.22
% Change in Net Operating Profit- Regulated	-60.42	5,529.66	-97.37
% Net Operating Profit of Regulated NOR	2.41	5.48	0.10
% Change in Net Operating Profit- Total	-267.15	73.20	-1,336.04
% Net Total Operating Profit of Total NOR	-5.33	-1.31	-5.21
% Change in Total Excess Profit	14.04	-21.67	-215.62
% Total Excess Profit of Total Revenue	-3.63	-3.75	-3.34

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

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Saint Mary's Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	125,978,346	124,100,600	114,652,300
Unregulated Services	7,961,116	7,978,916	7,212,017
TOTAL	133,939,462	132,079,516	121,864,317
Net Patient Revenue(NPR):			
Regulated Services	102,454,852	105,768,160	96,521,141
Unregulated Services	6,614,620	3,029,183	6,740,740
TOTAL	109,069,471	108,797,343	103,261,881
Other Operating Revenue:			
Regulated Services	2,259,219	1,440,400	1,164,206
Unregulated Services	457,444	0	680,720
TOTAL	2,716,663	1,440,400	1,844,926
Net Operating Revenue(NOR)			
Regulated Services	104,714,071	107,208,560	97,685,347
Unregulated Services	7,072,064	3,029,183	7,421,460
Total	111,786,134	110,237,743	105,106,807
Total Operating Expenses:			
Regulated Services	93,942,446	97,770,605	88,622,956
Total	107,501,875	108,436,642	98,402,342
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	17,586	17,592	16,309
Total	18,361	18,509	16,887
NPR per EIPA :			
Regulated Services	5,826.00	6,012.37	5,918.24
Total	5,940.20	5,878.11	6,114.85
NOR per EIPA :			
Regulated Services	5,954.47	6,094.25	5,989.62
Total	6,088.16	5,955.93	6,224.10
Operating Expenses per EIPA :			
Regulated Services	5,341.95	5,557.75	5,433.96
Total	5,854.83	5,858.62	5,827.08
Net Operating Profit(Loss):			
Regulated Services	10,771,624	9,437,955	9,062,391
Unregulated Services	-6,487,365	-7,636,854	-2,357,926
Total	4,284,259	1,801,101	6,704,465
Total Non-Operating Profit(Loss):	-1,876,534	-182,542	896,484
Non-Operating Revenue	133,176	1,846,900	1,192,699
Non-Operating Expenses	2,009,710	2,029,442	296,215
Total Excess Profit	2,407,725	1,618,559	7,600,949
% Change in NPR per EIPA - Regulated	-3.10	1.59	2.42
% Change in NOR per EIPA - Regulated	-2.29	1.75	7.12
% Change in Oper. Expense per EIPA- Regulated	-3.88	2.28	5.16
% Change in Net Operating Profit- Regulated	14.13	4.14	33.20
% Net Operating Profit of Regulated NOR	10.29	8.80	9.28
% Change in Net Operating Profit- Total	137.87	-73.14	-8.40
% Net Total Operating Profit of Total NOR	3.83	1.63	6.38
% Change in Total Excess Profit	48.76	-78.71	-16.45
% Total Excess Profit of Total Revenue	2.15	1.44	7.15

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Shady Grove Adventist Hospital

FISCAL YEAR ENDING	December 2010 -----	December 2009 -----	December 2008 -----
Gross Patient Revenue:			
Regulated Services	335,364,985	331,274,906	304,350,850
Unregulated Services	34,336,169	35,853,773	30,972,635
TOTAL	369,701,154	367,128,679	335,323,485
Net Patient Revenue(NPR):			
Regulated Services	292,739,292	283,847,908	261,642,638
Unregulated Services	17,005,256	16,613,631	15,415,897
TOTAL	309,744,548	300,461,539	277,058,535
Other Operating Revenue:			
Regulated Services	3,405,948	2,643,215	1,870,850
Unregulated Services	4,829,756	4,557,361	3,749,785
TOTAL	8,235,704	7,200,576	5,620,635
Net Operating Revenue(NOR)			
Regulated Services	296,145,240	286,491,123	263,513,488
Unregulated Services	21,835,012	21,170,992	19,165,682
Total	317,980,252	307,662,115	282,679,170
Total Operating Expenses:			
Regulated Services	270,989,498	270,417,774	256,440,113
Total	295,731,330	292,748,994	275,947,407
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	32,832	33,450	31,064
Total	36,035	36,701	33,917
NPR per EIPA :			
Regulated Services	8,916.27	8,485.78	8,422.58
Total	8,595.55	8,186.77	8,168.62
NOR per EIPA :			
Regulated Services	9,020.01	8,564.80	8,482.80
Total	8,824.09	8,382.96	8,334.34
Operating Expenses per EIPA :			
Regulated Services	8,253.81	8,084.28	8,255.10
Total	8,206.68	7,976.62	8,135.86
Net Operating Profit(Loss):			
Regulated Services	25,155,742	16,073,349	7,073,375
Unregulated Services	-2,906,821	-1,160,228	-341,612
Total	22,248,922	14,913,121	6,731,763
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	2,342,788	-1,255,294	-4,297,904
Non-Operating Expenses	0	0	0
Total Excess Profit	24,591,710	13,657,827	2,433,859
% Change in NPR per EIPA - Regulated			
	5.07	0.75	3.61
% Change in NOR per EIPA - Regulated			
	5.31	0.97	3.69
% Change in Oper. Expense per EIPA- Regulated			
	2.10	-2.07	4.76
% Change in Net Operating Profit- Regulated			
	56.51	127.24	-20.47
% Net Operating Profit of Regulated NOR			
	8.49	5.61	2.68
% Change in Net Operating Profit- Total			
	49.19	121.53	179.39
% Net Total Operating Profit of Total NOR			
	7.00	4.85	2.38
% Change in Total Excess Profit			
	80.06	461.16	-50.22
% Total Excess Profit of Total Revenue			
	7.68	4.46	0.87

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Sinai Hospital of Baltimore

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	619,723,100	627,278,200	602,337,500
Unregulated Services	158,468,000	109,781,389	104,877,517
TOTAL	778,191,100	737,059,589	707,215,017
Net Patient Revenue(NPR):			
Regulated Services	534,915,500	536,920,130	512,803,742
Unregulated Services	63,138,400	40,437,732	38,662,795
TOTAL	598,053,900	577,357,862	551,466,537
Other Operating Revenue:			
Regulated Services	8,486,500	10,224,011	16,714,741
Unregulated Services	26,835,600	15,441,747	10,652,682
TOTAL	35,322,100	25,665,758	27,367,423
Net Operating Revenue(NOR)			
Regulated Services	543,402,000	547,144,141	529,518,483
Unregulated Services	89,974,000	55,879,479	49,315,477
Total	633,376,000	603,023,620	578,833,960
Total Operating Expenses:			
Regulated Services	497,428,352	500,512,326	485,322,263
Total	623,937,000	591,050,256	573,504,000
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	39,398	39,792	40,344
Total	49,472	41,063	41,629
NPR per EIPA :			
Regulated Services	13,577.23	13,493.11	12,710.71
Total	12,088.65	14,060.30	13,247.26
NOR per EIPA :			
Regulated Services	13,792.63	13,750.04	13,125.01
Total	12,802.62	14,685.33	13,904.68
Operating Expenses per EIPA :			
Regulated Services	12,625.73	12,578.16	12,029.54
Total	12,611.83	14,393.74	13,776.64
Net Operating Profit(Loss):			
Regulated Services	45,973,648	46,631,815	44,196,220
Unregulated Services	-36,534,648	-34,658,451	-38,866,260
Total	9,439,000	11,973,364	5,329,960
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	8,204,000	-15,055,000	-20,242,000
Non-Operating Expenses	-1,420,000	0	0
Total Excess Profit	19,063,000	-3,081,636	-14,912,040
% Change in NPR per EIPA - Regulated	0.62	6.16	-1.15
% Change in NOR per EIPA - Regulated	0.31	4.76	-0.15
% Change in Oper. Expense per EIPA- Regulated	0.38	4.56	1.59
% Change in Net Operating Profit- Regulated	-1.41	5.51	-9.93
% Net Operating Profit of Regulated NOR	8.46	8.52	8.35
% Change in Net Operating Profit- Total	-21.17	124.64	-68.51
% Net Total Operating Profit of Total NOR	1.49	1.99	0.92
% Change in Total Excess Profit	718.60	79.33	-129.47
% Total Excess Profit of Total Revenue	2.97	-0.52	-2.67

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Southern Maryland Hospital Center

FISCAL YEAR ENDING	December 2010 -----	December 2009 -----	December 2008 -----
Gross Patient Revenue:			
Regulated Services	223,251,200	224,831,800	226,574,600
Unregulated Services	48,968,865	46,561,967	46,394,944
TOTAL	272,220,065	271,393,767	272,969,544
Net Patient Revenue(NPR):			
Regulated Services	186,636,112	188,617,305	183,726,110
Unregulated Services	19,793,385	18,201,765	4,763,757
TOTAL	206,429,497	206,819,070	188,489,867
Other Operating Revenue:			
Regulated Services	459,704	227,547	358,735
Unregulated Services	483,404	490,439	13,797,779
TOTAL	943,108	717,986	14,156,514
Net Operating Revenue(NOR)			
Regulated Services	187,095,816	188,844,852	184,084,845
Unregulated Services	20,276,789	18,692,204	18,561,536
Total	207,372,605	207,537,056	202,646,381
Total Operating Expenses:			
Regulated Services	178,386,000	179,924,946	170,857,254
Total	204,101,900	204,868,146	198,519,258
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	23,770	23,928	25,911
Total	28,739	28,636	28,727
NPR per EIPA :			
Regulated Services	7,851.91	7,882.80	7,090.76
Total	7,182.91	7,222.32	6,561.32
NOR per EIPA :			
Regulated Services	7,871.25	7,892.31	7,104.60
Total	7,215.72	7,247.40	7,054.11
Operating Expenses per EIPA :			
Regulated Services	7,504.82	7,519.52	6,594.10
Total	7,101.92	7,154.20	6,910.44
Net Operating Profit(Loss):			
Regulated Services	8,709,816	8,919,906	13,227,591
Unregulated Services	-5,439,111	-6,250,996	-9,100,468
Total	3,270,705	2,668,910	4,127,123
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	121,913	50,554	648,952
Non-Operating Expenses	0	0	0
Total Excess Profit	3,392,618	2,719,464	4,776,075
% Change in NPR per EIPA - Regulated	-0.39	11.17	-4.90
% Change in NOR per EIPA - Regulated	-0.27	11.09	-4.91
% Change in Oper. Expense per EIPA- Regulated	-0.20	14.03	-5.76
% Change in Net Operating Profit- Regulated	-2.36	-32.57	17.75
% Net Operating Profit of Regulated NOR	4.66	4.72	7.19
% Change in Net Operating Profit- Total	22.55	-35.33	-40.50
% Net Total Operating Profit of Total NOR	1.58	1.29	2.04
% Change in Total Excess Profit	24.75	-43.06	-40.91
% Total Excess Profit of Total Revenue	1.64	1.31	2.35

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Suburban Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	234,114,100	228,243,300	220,977,300
Unregulated Services	21,518,772	24,730,400	22,030,800
TOTAL	255,632,872	252,973,700	243,008,100
Net Patient Revenue(NPR):			
Regulated Services	201,587,614	199,185,500	192,441,500
Unregulated Services	16,006,327	17,259,100	18,235,300
TOTAL	217,593,940	216,444,600	210,676,800
Other Operating Revenue:			
Regulated Services	6,466,197	5,055,700	6,906,800
Unregulated Services	7,087,503	7,350,800	6,309,800
TOTAL	13,553,700	12,406,500	13,216,600
Net Operating Revenue(NOR)			
Regulated Services	208,053,811	204,241,200	199,348,300
Unregulated Services	23,093,830	24,609,900	24,545,100
Total	231,147,640	228,851,100	223,893,400
Total Operating Expenses:			
Regulated Services	198,393,041	195,403,393	186,617,041
Total	222,027,498	221,079,100	209,805,300
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	19,302	19,929	19,822
Total	21,076	22,088	21,799
NPR per EIPA :			
Regulated Services	10,443.99	9,994.98	9,708.32
Total	10,324.29	9,799.33	9,664.72
NOR per EIPA :			
Regulated Services	10,778.99	10,248.67	10,056.76
Total	10,967.38	10,361.03	10,271.02
Operating Expenses per EIPA :			
Regulated Services	10,278.48	9,805.19	9,414.49
Total	10,534.65	10,009.16	9,624.74
Net Operating Profit(Loss):			
Regulated Services	9,660,770	8,837,807	12,731,259
Unregulated Services	-540,627	-1,065,807	1,356,841
Total	9,120,142	7,772,000	14,088,100
Total Non-Operating Profit(Loss):	-211,160	-3,531,300	263,900
Non-Operating Revenue	-211,200	-3,531,300	263,900
Non-Operating Expenses	-40	0	0
Total Excess Profit	8,908,982	4,240,700	14,352,000
% Change in NPR per EIPA - Regulated	4.49	2.95	4.06
% Change in NOR per EIPA - Regulated	5.17	1.91	4.65
% Change in Oper. Expense per EIPA- Regulated	4.83	4.15	1.07
% Change in Net Operating Profit- Regulated	9.31	-30.58	129.35
% Net Operating Profit of Regulated NOR	4.64	4.33	6.39
% Change in Net Operating Profit- Total	17.35	-44.83	108.51
% Net Total Operating Profit of Total NOR	3.95	3.40	6.29
% Change in Total Excess Profit	110.08	-70.45	86.57
% Total Excess Profit of Total Revenue	3.86	1.88	6.40

HEALTH SERVICES COST REVIEW COMMISSION
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FISCAL YEAR 2008 TO 2010

Union Hospital of Cecil County

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	126,899,200	126,780,200	116,438,100
Unregulated Services	28,374,200	16,181,600	12,836,800
TOTAL	155,273,400	142,961,800	129,274,900
Net Patient Revenue(NPR):			
Regulated Services	104,653,300	105,285,300	98,597,600
Unregulated Services	11,797,800	7,702,100	5,942,900
TOTAL	116,451,100	112,987,400	104,540,500
Other Operating Revenue:			
Regulated Services	1,432,600	1,209,500	1,868,300
Unregulated Services	1,890,700	1,862,300	1,989,100
TOTAL	3,323,300	3,071,800	3,857,400
Net Operating Revenue(NOR)			
Regulated Services	106,085,900	106,494,800	100,465,900
Unregulated Services	13,688,500	9,564,400	7,932,000
Total	119,774,400	116,059,200	108,397,900
Total Operating Expenses:			
Regulated Services	102,497,000	99,599,700	93,647,500
Total	121,769,100	113,610,800	103,933,800
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	15,251	15,761	15,891
Total	18,659	17,769	17,639
NPR per EIPA :			
Regulated Services	6,862.04	6,680.09	6,204.70
Total	6,241.05	6,358.53	5,926.74
NOR per EIPA :			
Regulated Services	6,955.97	6,756.83	6,322.27
Total	6,419.16	6,531.40	6,145.43
Operating Expenses per EIPA :			
Regulated Services	6,720.65	6,319.36	5,893.19
Total	6,526.07	6,393.61	5,892.35
Net Operating Profit(Loss):			
Regulated Services	3,588,900	6,895,100	6,818,400
Unregulated Services	-5,583,600	-4,446,700	-2,354,300
Total	-1,994,700	2,448,400	4,464,100
Total Non-Operating Profit(Loss):	5,193,800	-7,965,700	7,314,600
Non-Operating Revenue	5,509,700	-7,639,700	7,472,600
Non-Operating Expenses	315,900	326,000	158,000
Total Excess Profit	3,199,100	-5,517,300	11,778,700
% Change in NPR per EIPA - Regulated	2.72	7.66	-3.80
% Change in NOR per EIPA - Regulated	2.95	6.87	-2.66
% Change in Oper. Expense per EIPA- Regulated	6.35	7.23	-8.53
% Change in Net Operating Profit- Regulated	-47.95	1.12	865.51
% Net Operating Profit of Regulated NOR	3.38	6.47	6.79
% Change in Net Operating Profit- Total	-181.47	-45.15	828.83
% Net Total Operating Profit of Total NOR	-1.67	2.11	4.12
% Change in Total Excess Profit	157.98	-146.84	176.11
% Total Excess Profit of Total Revenue	2.55	-5.09	10.17

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Union Memorial Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	399,909,200	413,847,100	413,393,800
Unregulated Services	116,827,466	96,248,880	59,347,931
TOTAL	516,736,666	510,095,980	472,741,731
Net Patient Revenue(NPR):			
Regulated Services	336,918,166	353,456,109	352,995,022
Unregulated Services	42,816,999	36,271,722	27,525,192
TOTAL	379,735,165	389,727,831	380,520,214
Other Operating Revenue:			
Regulated Services	3,827,360	3,918,613	3,739,400
Unregulated Services	8,689,334	8,763,934	8,548,658
TOTAL	12,516,694	12,682,547	12,288,058
Net Operating Revenue(NOR)			
Regulated Services	340,745,526	357,374,722	356,734,422
Unregulated Services	51,506,333	45,035,656	36,073,850
Total	392,251,859	402,410,378	392,808,272
Total Operating Expenses:			
Regulated Services	311,343,631	326,289,867	317,897,600
Total	384,174,898	392,085,514	369,616,498
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	26,044	27,166	27,433
Total	29,813	30,615	29,556
NPR per EIPA :			
Regulated Services	12,936.47	13,011.09	12,867.51
Total	12,737.19	12,730.10	12,874.51
NOR per EIPA :			
Regulated Services	13,083.43	13,155.34	13,003.82
Total	13,157.03	13,144.36	13,290.26
Operating Expenses per EIPA :			
Regulated Services	11,954.50	12,011.07	11,588.12
Total	12,886.11	12,807.11	12,505.60
Net Operating Profit(Loss):			
Regulated Services	29,401,895	31,084,855	38,836,906
Unregulated Services	-21,324,934	-20,759,991	-15,645,132
Total	8,076,961	10,324,864	23,191,774
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	6,635,897	-3,504,021	-1,424,699
Non-Operating Expenses	0	0	0
Total Excess Profit	14,712,858	6,820,843	21,767,075
% Change in NPR per EIPA - Regulated	-0.57	1.12	8.25
% Change in NOR per EIPA - Regulated	-0.55	1.17	8.12
% Change in Oper. Expense per EIPA- Regulated	-0.47	3.65	2.61
% Change in Net Operating Profit- Regulated	-5.41	-19.96	102.06
% Net Operating Profit of Regulated NOR	8.63	8.70	10.89
% Change in Net Operating Profit- Total	-21.77	-55.48	138.44
% Net Total Operating Profit of Total NOR	2.06	2.57	5.90
% Change in Total Excess Profit	115.70	-68.66	-9.37
% Total Excess Profit of Total Revenue	3.69	1.71	5.56

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

University MIEMSS

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	164,471,100	154,824,600	179,581,300
Unregulated Services	1,852,000	1,363,135	1,250,330
TOTAL	166,323,100	156,187,735	180,831,630
Net Patient Revenue(NPR):			
Regulated Services	139,630,090	125,289,009	125,795,245
Unregulated Services	1,852,000	1,363,135	1,250,330
TOTAL	141,482,090	126,652,144	127,045,575
Other Operating Revenue:			
Regulated Services	3,174,900	2,910,834	6,764,000
Unregulated Services	0	0	0
TOTAL	3,174,900	2,910,834	6,764,000
Net Operating Revenue(NOR)			
Regulated Services	142,804,990	128,199,844	132,559,245
Unregulated Services	1,852,000	1,363,135	1,250,330
Total	144,656,990	129,562,979	133,809,575
Total Operating Expenses:			
Regulated Services	138,860,132	140,611,809	128,907,439
Total	144,925,632	145,996,709	134,287,939
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	8,185	7,614	7,801
Total	8,277	7,681	7,856
NPR per EIPA :			
Regulated Services	17,059.64	16,455.03	16,125.02
Total	17,093.43	16,488.89	16,172.69
NOR per EIPA :			
Regulated Services	17,447.54	16,837.33	16,992.06
Total	17,477.02	16,867.85	17,033.74
Operating Expenses per EIPA :			
Regulated Services	16,965.57	18,467.48	16,523.96
Total	17,509.47	19,007.36	17,094.63
Net Operating Profit(Loss):			
Regulated Services	3,944,858	-12,411,966	3,651,806
Unregulated Services	-4,213,500	-4,021,765	-4,130,170
Total	-268,642	-16,433,731	-478,364
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	1,966,000	-2,167,000	1,966,000
Non-Operating Expenses	0	0	0
Total Excess Profit	1,697,358	-18,600,731	1,487,636
% Change in NPR per EIPA - Regulated	3.67	2.05	-3.03
% Change in NOR per EIPA - Regulated	3.62	-0.91	-2.81
% Change in Oper. Expense per EIPA- Regulated	-8.13	11.76	0.10
% Change in Net Operating Profit- Regulated	131.78	-439.89	-52.20
% Net Operating Profit of Regulated NOR	2.76	-9.68	2.75
% Change in Net Operating Profit- Total	98.37	-3,335.40	-114.49
% Net Total Operating Profit of Total NOR	-0.19	-12.68	-0.36
% Change in Total Excess Profit	109.13	-1,350.35	-71.76
% Total Excess Profit of Total Revenue	1.16	-14.60	1.10

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

University UMCC

FISCAL YEAR ENDING	June 2010 -----	June 2009 -----	June 2008 -----
Gross Patient Revenue:			
Regulated Services	55,208,300	52,896,400	60,224,500
Unregulated Services	9,771,000	5,610,495	5,353,788
TOTAL	64,979,300	58,506,895	65,578,288
Net Patient Revenue(NPR):			
Regulated Services	41,627,000	41,266,652	48,156,890
Unregulated Services	9,771,000	5,610,495	5,353,788
TOTAL	51,398,000	46,877,147	53,510,678
Other Operating Revenue:			
Regulated Services	179,000	103,515	35,000
Unregulated Services	0	0	0
TOTAL	179,000	103,515	35,000
Net Operating Revenue(NOR)			
Regulated Services	41,806,000	41,370,168	48,191,890
Unregulated Services	9,771,000	5,610,495	5,353,788
Total	51,577,000	46,980,663	53,545,678
Total Operating Expenses:			
Regulated Services	60,541,351	66,041,802	51,929,971
Total	64,165,651	71,438,652	57,328,504
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	2,369	2,583	2,862
Total	2,788	2,857	3,116
NPR per EIPA :			
Regulated Services	17,571.68	15,978.33	16,826.00
Total	18,433.75	16,410.15	17,170.22
NOR per EIPA :			
Regulated Services	17,647.24	16,018.41	16,838.23
Total	18,497.95	16,446.38	17,181.45
Operating Expenses per EIPA :			
Regulated Services	25,555.84	25,571.20	18,144.31
Total	23,012.83	25,008.32	18,395.27
Net Operating Profit(Loss):			
Regulated Services	-18,735,351	-24,671,635	-3,738,082
Unregulated Services	6,146,700	213,645	-44,744
Total	-12,588,651	-24,457,990	-3,782,826
Total Non-Operating Profit(Loss):	806,000	-887,000	810,000
Non-Operating Revenue	806,000	-887,000	810,000
Non-Operating Expenses	0	0	0
Total Excess Profit	-11,782,651	-25,344,990	-2,972,826
% Change in NPR per EIPA - Regulated	9.97	-5.04	-11.21
% Change in NOR per EIPA - Regulated	10.17	-4.87	-11.18
% Change in Oper. Expense per EIPA- Regulated	-0.06	40.93	-6.00
% Change in Net Operating Profit- Regulated	24.06	-560.01	-312.40
% Net Operating Profit of Regulated NOR	-44.81	-59.64	-7.76
% Change in Net Operating Profit- Total	48.53	-546.55	-391.98
% Net Total Operating Profit of Total NOR	-24.41	-52.06	-7.06
% Change in Total Excess Profit	53.51	-752.56	-8,111.72
% Total Excess Profit of Total Revenue	-22.49	-54.99	-5.47

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

University of Maryland Medical Center

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	1,013,735,200	940,100,100	877,294,500
Unregulated Services	12,184,643	13,652,812	11,247,170
TOTAL	1,025,919,843	953,752,912	888,541,670
Net Patient Revenue(NPR):			
Regulated Services	873,940,200	819,239,930	765,351,210
Unregulated Services	12,184,643	12,636,812	11,247,170
TOTAL	886,124,843	831,876,742	776,598,380
Other Operating Revenue:			
Regulated Services	15,132,348	19,191,128	22,760,295
Unregulated Services	31,308,809	26,293,982	22,910,504
TOTAL	46,441,157	45,485,110	45,670,799
Net Operating Revenue(NOR)			
Regulated Services	889,072,548	838,431,058	788,111,505
Unregulated Services	43,493,452	38,930,794	34,157,674
Total	932,566,000	877,361,852	822,269,179
Total Operating Expenses:			
Regulated Services	798,890,900	760,178,731	774,992,564
Total	860,378,007	813,799,400	819,155,601
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	37,747	35,291	33,724
Total	38,201	35,803	34,156
NPR per EIPA :			
Regulated Services	23,152.48	23,213.99	22,694.50
Total	23,196.47	23,234.64	22,736.52
NOR per EIPA :			
Regulated Services	23,553.37	23,757.79	23,369.40
Total	24,412.18	24,505.05	24,073.63
Operating Expenses per EIPA :			
Regulated Services	21,164.27	21,540.43	22,980.39
Total	22,522.48	22,729.73	23,982.47
Net Operating Profit(Loss):			
Regulated Services	90,181,648	78,252,327	13,118,941
Unregulated Services	-17,993,655	-14,689,875	-10,005,363
Total	72,187,993	63,562,452	3,113,578
Total Non-Operating Profit(Loss):	-23,281,000	-55,439,000	-59,345,000
Non-Operating Revenue	-23,281,000	-55,439,000	-59,345,000
Non-Operating Expenses	0	0	0
Total Excess Profit	48,906,993	8,123,452	-56,231,422
% Change in NPR per EIPA - Regulated	-0.26	2.29	5.90
% Change in NOR per EIPA - Regulated	-0.86	1.66	6.55
% Change in Oper. Expense per EIPA- Regulated	-1.75	-6.27	11.04
% Change in Net Operating Profit- Regulated	15.24	496.48	-68.92
% Net Operating Profit of Regulated NOR	10.14	9.33	1.66
% Change in Net Operating Profit- Total	13.57	1,941.46	-89.60
% Net Total Operating Profit of Total NOR	7.74	7.24	0.38
% Change in Total Excess Profit	502.05	114.45	-244.23
% Total Excess Profit of Total Revenue	5.38	0.99	-7.37

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Upper Chesapeake Medical Center

FISCAL YEAR ENDING	December 2010 -----	December 2009 -----	December 2008 -----
Gross Patient Revenue:			
Regulated Services	226,352,700	219,562,700	196,899,000
Unregulated Services	182,400	118,800	97,400
TOTAL	226,535,100	219,681,500	196,996,400
Net Patient Revenue(NPR):			
Regulated Services	188,744,950	187,017,300	170,264,950
Unregulated Services	133,100	107,000	85,400
TOTAL	188,878,050	187,124,300	170,350,350
Other Operating Revenue:			
Regulated Services	922,400	888,100	329,251
Unregulated Services	2,356,600	2,368,200	2,536,435
TOTAL	3,279,000	3,256,300	2,865,686
Net Operating Revenue(NOR)			
Regulated Services	189,667,350	187,905,400	170,594,201
Unregulated Services	2,489,700	2,475,200	2,621,835
Total	192,157,050	190,380,600	173,216,036
Total Operating Expenses:			
Regulated Services	174,081,113	171,205,099	164,803,083
Total	181,321,000	177,257,000	169,677,231
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	23,493	24,221	23,768
Total	24,537	24,234	23,780
NPR per EIPA :			
Regulated Services	8,034.16	7,721.19	7,163.54
Total	7,697.80	7,721.43	7,163.59
NOR per EIPA :			
Regulated Services	8,073.43	7,757.86	7,177.39
Total	7,831.44	7,855.80	7,284.10
Operating Expenses per EIPA :			
Regulated Services	7,409.98	7,068.37	6,933.74
Total	7,389.81	7,314.27	7,135.28
Net Operating Profit(Loss):			
Regulated Services	15,586,237	16,700,301	5,791,118
Unregulated Services	-4,750,187	-3,576,701	-2,252,313
Total	10,836,050	13,123,600	3,538,805
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	80,000	23,477,000	1,036,000
Non-Operating Expenses	55,000	0	50,772,000
Total Non-Operating Profit(Loss):	25,000	23,477,000	-49,736,000
Total Excess Profit	10,861,050	36,600,600	-46,197,195
% Change in NPR per EIPA - Regulated			
	4.05	7.78	-1.29
% Change in NOR per EIPA - Regulated			
	4.07	8.09	-1.24
% Change in Oper. Expense per EIPA- Regulated			
	4.83	1.94	-2.09
% Change in Net Operating Profit- Regulated			
	-6.67	188.38	53.71
% Net Operating Profit of Regulated NOR			
	8.22	8.89	3.39
% Change in Net Operating Profit- Total			
	-17.43	270.85	-21.39
% Net Total Operating Profit of Total NOR			
	5.64	6.89	2.04
% Change in Total Excess Profit			
	-70.33	179.23	-2,447.56
% Total Excess Profit of Total Revenue			
	5.65	17.11	-26.51

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Washington Adventist Hospital

FISCAL YEAR ENDING	December 2010	December 2009	December 2008
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Gross Patient Revenue:			
Regulated Services	265,356,838	284,247,984	279,418,776
Unregulated Services	707,851	530,141	553,548
TOTAL	266,064,689	284,778,125	279,972,324
Net Patient Revenue(NPR):			
Regulated Services	225,153,003	233,793,878	227,431,160
Unregulated Services	704,397	526,645	549,800
TOTAL	225,857,400	234,320,523	227,980,960
Other Operating Revenue:			
Regulated Services	2,644,614	2,567,600	2,165,649
Unregulated Services	2,195,607	2,683,287	3,328,704
TOTAL	4,840,221	5,250,887	5,494,353
Net Operating Revenue(NOR)			
Regulated Services	227,797,617	236,361,478	229,596,810
Unregulated Services	2,900,004	3,209,932	3,878,504
Total	230,697,621	239,571,410	233,475,314
Total Operating Expenses:			
Regulated Services	222,235,425	236,950,644	229,896,023
Total	226,640,112	241,160,143	234,379,490
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	20,602	23,034	22,570
Total	20,628	23,040	22,573
NPR per EIPA :			
Regulated Services	10,928.84	10,149.91	10,076.55
Total	10,949.24	10,169.95	10,099.55
NOR per EIPA :			
Regulated Services	11,057.21	10,261.38	10,172.50
Total	11,183.88	10,397.85	10,342.95
Operating Expenses per EIPA :			
Regulated Services	10,787.22	10,286.96	10,185.76
Total	10,987.18	10,466.80	10,383.01
Net Operating Profit(Loss):			
Regulated Services	5,562,192	-589,166	-299,213
Unregulated Services	-1,504,684	-999,567	-604,963
Total	4,057,509	-1,588,733	-904,176
Total Non-Operating Profit(Loss):	485,679	-71,203	-1,526,529
Non-Operating Revenue	485,679	-71,203	-1,526,529
Non-Operating Expenses	0	0	0
Total Excess Profit	4,543,188	-1,659,936	-2,430,705
% Change in NPR per EIPA - Regulated	7.67	0.73	4.65
% Change in NOR per EIPA - Regulated	7.76	0.87	4.77
% Change in Oper. Expense per EIPA- Regulated	4.86	0.99	2.48
% Change in Net Operating Profit- Regulated	1,044.08	-96.90	94.26
% Net Operating Profit of Regulated NOR	2.44	-0.25	-0.13
% Change in Net Operating Profit- Total	355.39	-75.71	86.73
% Net Total Operating Profit of Total NOR	1.76	-0.66	-0.39
% Change in Total Excess Profit	373.70	31.71	45.70
% Total Excess Profit of Total Revenue	1.97	-0.69	-1.05

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Washington County Hospital

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	250,295,900	243,018,300	229,868,300
Unregulated Services	47,062,500	41,566,400	48,088,000
TOTAL	297,358,400	284,584,700	277,956,300
Net Patient Revenue(NPR):			
Regulated Services	209,148,200	203,634,400	194,093,600
Unregulated Services	28,307,500	27,231,200	29,655,300
TOTAL	237,455,700	230,865,600	223,748,900
Other Operating Revenue:			
Regulated Services	4,129,800	1,961,400	855,900
Unregulated Services	1,983,200	2,252,200	1,880,900
TOTAL	6,113,000	4,213,600	2,736,800
Net Operating Revenue(NOR)			
Regulated Services	213,278,000	205,595,800	194,949,500
Unregulated Services	30,290,700	29,483,400	31,536,200
Total	243,568,700	235,079,200	226,485,700
Total Operating Expenses:			
Regulated Services	211,006,835	200,960,847	185,543,944
Total	243,735,000	231,305,500	218,839,600
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	24,861	24,851	24,077
Total	29,535	29,102	29,114
NPR per EIPA :			
Regulated Services	8,412.85	8,194.10	8,061.35
Total	8,039.79	7,932.99	7,685.29
NOR per EIPA :			
Regulated Services	8,578.96	8,273.02	8,096.90
Total	8,246.77	8,077.77	7,779.29
Operating Expenses per EIPA :			
Regulated Services	8,487.61	8,086.52	7,706.25
Total	8,252.40	7,948.10	7,516.66
Net Operating Profit(Loss):			
Regulated Services	2,271,165	4,634,953	9,405,556
Unregulated Services	-2,437,465	-861,253	-1,759,456
Total	-166,300	3,773,700	7,646,100
Total Non-Operating Profit(Loss):			
Non-Operating Revenue	3,183,300	-4,587,500	971,600
Non-Operating Expenses	3,353,900	-4,440,000	1,112,000
Non-Operating Expenses	170,600	147,500	140,400
Total Excess Profit	3,017,000	-813,800	8,617,700
% Change in NPR per EIPA - Regulated	2.67	1.65	5.76
% Change in NOR per EIPA - Regulated	3.70	2.18	5.13
% Change in Oper. Expense per EIPA- Regulated	4.96	4.93	3.49
% Change in Net Operating Profit- Regulated	-51.00	-50.72	59.85
% Net Operating Profit of Regulated NOR	1.06	2.25	4.82
% Change in Net Operating Profit- Total	-104.41	-50.65	70.68
% Net Total Operating Profit of Total NOR	-0.07	1.61	3.38
% Change in Total Excess Profit	470.73	-109.44	33.58
% Total Excess Profit of Total Revenue	1.22	-0.35	3.79

HEALTH SERVICES COST REVIEW COMMISSION
DISCLOSURE OF HOSPITAL FINANCIAL AND STATISTICAL DATA
FISCAL YEAR 2008 TO 2010

Western Maryland Regional M. C.

FISCAL YEAR ENDING	June 2010	June 2009	June 2008
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Gross Patient Revenue:			
Regulated Services	278,853,100	.	.
Unregulated Services	44,033,100	.	.
TOTAL	322,886,200	.	.
Net Patient Revenue(NPR):			
Regulated Services	234,206,000	.	.
Unregulated Services	31,556,000	.	.
TOTAL	265,762,000	.	.
Other Operating Revenue:			
Regulated Services	1,494,700	.	.
Unregulated Services	3,033,700	.	.
TOTAL	4,528,400	.	.
Net Operating Revenue(NOR)			
Regulated Services	235,700,700	.	.
Unregulated Services	34,589,700	.	.
Total	270,290,400	.	.
Total Operating Expenses:			
Regulated Services	232,833,577	.	.
Total	275,300,600	.	.
Equivalent Inpatient ADMs(EIPA):			
Regulated Services	26,550	.	.
Total	29,499	.	.
NPR per EIPA :			
Regulated Services	8,821.26	.	.
Total	9,009.28	.	.
NOR per EIPA :			
Regulated Services	8,877.56	.	.
Total	9,162.79	.	.
Operating Expenses per EIPA :			
Regulated Services	8,769.57	.	.
Total	9,332.64	.	.
Net Operating Profit(Loss):			
Regulated Services	2,867,123	.	.
Unregulated Services	-7,877,323	.	.
Total	-5,010,200	.	.
Total Non-Operating Profit(Loss):	6,751,000	.	.
Non-Operating Revenue	6,751,000	.	.
Non-Operating Expenses	0	.	.
Total Excess Profit	1,740,800	.	.
% Change in NPR per EIPA - Regulated	.	.	.
% Change in NOR per EIPA - Regulated	.	.	.
% Change in Oper. Expense per EIPA- Regulated	.	.	.
% Change in Net Operating Profit- Regulated	.	.	.
% Net Operating Profit of Regulated NOR	1.22	.	.
% Change in Net Operating Profit- Total	.	.	.
% Net Total Operating Profit of Total NOR	-1.85	.	.
% Change in Total Excess Profit	.	.	.
% Total Excess Profit of Total Revenue	0.63	.	.

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ALL SPECIALTY HOSPITALS

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	391,240,287	372,903,294	362,312,774
Net Patient Revenue (NPR)	308,082,241	301,960,072	296,493,374
Other Operating Revenue	1,692,325	2,627,858	4,821,747
Net Operating Revenue (NOR)	309,774,566	304,587,930	301,315,121
Operating Expenses	305,849,301	301,934,610	290,868,527
Inpatient Admissions (IPAs)	17,201	16,659	16,212
Equivalent Inpatient Admissions (EIPAs)	18,625	18,044	17,616
NPR per EIPA	16,541.52	16,734.67	16,830.91
Operating Expenses per EIPA	16,421.63	16,733.25	16,511.61
Net Operating Profit (Loss)	3,925,265	2,653,320	10,446,594
Total Non-Operating Profit (Loss)	31,476,311	(11,965,618)	(3,608,330)
Total Excess Profits (Loss)	35,401,576	(9,312,298)	6,838,264
% Change in NPR per EIPA	(1.15)	(0.57)	7.61
% Change in Cost per EIPA	(1.86)	1.34	5.41

Adventist Behavioral Health-Rockville

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	26,626,700	26,353,500	24,214,800
Net Patient Revenue (NPR)	18,801,800	20,491,700	17,174,100
Other Operating Revenue	216,300	139,100	861,900
Net Operating Revenue (NOR)	19,018,100	20,630,800	18,036,000
Operating Expenses	21,168,800	20,369,500	18,678,800
Inpatient Admissions (IPAs)	2,825	2,873	2,456
Equivalent Inpatient Admissions (EIPAs)	3,021	3,005	2,525
NPR per EIPA	6,223.70	6,819.23	6,801.62
Operating Expenses per EIPA	7,007.22	6,778.57	7,397.54
Net Operating Profit (Loss)	(2,150,700)	261,300	(642,800)
Total Non-Operating Profit (Loss)	(2,292,000)	(2,698,500)	(3,061,300)
Total Excess Profits (Loss)	(4,442,700)	(2,437,200)	(3,704,100)
% Change in NPR per EIPA	(8.73)	0.26	23.47
% Change in Cost per EIPA	3.37	(8.37)	23.66

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Adventist Rehab Hospital of MD.

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	43,607,400	39,847,200	32,000,100
Net Patient Revenue (NPR)	24,850,800	19,718,500	20,295,800
Other Operating Revenue	130,100	159,900	210,300
Net Operating Revenue (NOR)	24,980,900	19,878,400	20,506,100
Operating Expenses	26,033,300	25,366,100	24,220,600
Inpatient Admissions (IPAs)	1,631	1,642	1,669
Equivalent Inpatient Admissions (EIPAs)	1,631	1,642	1,669
NPR per EIPA	15,236.54	12,008.83	12,160.46
Operating Expenses per EIPA	15,961.56	15,448.29	14,512.04
Net Operating Profit (Loss)	(1,052,400)	(5,487,700)	(3,714,500)
Total Non-Operating Profit (Loss)	32,679,800	6,041,700	4,485,800
Total Excess Profits (Loss)	31,627,400	554,000	771,300
% Change in NPR per EIPA	26.88	(1.25)	(1.74)
% Change in Cost per EIPA	3.32	6.45	4.46

Brook Lane Health Services

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	11,633,300	10,468,100	9,586,000
Net Patient Revenue (NPR)	9,286,000	8,536,900	7,872,100
Other Operating Revenue	142,100	125,300	122,400
Net Operating Revenue (NOR)	9,428,100	8,662,200	7,994,500
Operating Expenses	10,708,100	10,415,300	10,363,600
Inpatient Admissions (IPAs)	1,664	1,458	1,307
Equivalent Inpatient Admissions (EIPAs)	1,772	1,577	1,423
NPR per EIPA	5,240	5,413.38	5,532.04
Operating Expenses per EIPA	6,042	6,604.50	7,282.92
Net Operating Profit (Loss)	(1,280,000)	(1,753,100)	(2,369,100)
Total Non-Operating Profit (Loss)	1,913,000	2,008,800	1,998,200
Total Excess Profits (Loss)	633,000	255,700	(370,900)
	4		
% Change in NPR per EIPA	(3.20)	(2.15)	2.01
% Change in Cost per EIPA	(8.51)	(9.32)	2.50
	0		
	0		

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Adventist Behavioral Health - Eastern Shore

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	2,608,700	3,026,700	3,148,300
Net Patient Revenue (NPR)	2,316,166	2,535,056	2,652,328
Other Operating Revenue	0	0	0
Net Operating Revenue (NOR)	2,316,166	2,535,056	2,652,328
Operating Expenses	808,787	1,066,731	1,277,815
Inpatient Admissions (IPAs)	300	309	296
Equivalent Inpatient Admissions (EIPAs)	300	309	296
NPR per EIPA	7,720.55	8,204.06	8,960.57
Operating Expenses per EIPA	2,695.96	3,452.20	4,316.94
Net Operating Profit (Loss)	1,507,379	1,468,325	1,374,513
Total Non-Operating Profit (Loss)	0	0	0
Total Excess Profits (Loss)	1,507,379	1,468,325	1,374,513
% Change in NPR per EIPA	(5.89)	(8.44)	(5.17)
% Change in Cost per EIPA	(21.91)	(20.03)	(64.94)

Levindale Hospital

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	64,879,000	67,857,200	64,469,200
Net Patient Revenue (NPR)	55,675,331	59,584,000	61,303,200
Other Operating Revenue	861,100	959,900	1,557,500
Net Operating Revenue (NOR)	56,536,431	60,543,900	62,860,700
Operating Expenses	52,289,889	51,485,600	49,975,400
Inpatient Admissions (IPAs)	688	749	721
Equivalent Inpatient Admissions (EIPAs)	721	774	742
NPR per EIPA	77,261.13	76,981.91	82,618.87
Operating Expenses per EIPA	72,563.12	66,518.86	67,352.29
Net Operating Profit (Loss)	4,246,542	9,058,300	12,885,300
Total Non-Operating Profit (Loss)	(3,669,778)	(9,677,900)	(6,797,600)
Total Excess Profits (Loss)	576,764	(619,600)	6,087,700
% Change in NPR per EIPA	0.36	(6.82)	7.39
% Change in Cost per EIPA	9.09	(1.24)	(0.50)

* NOTE: FY 2005 Regulated Service Only

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Mt. Washington Pediatric Hospital

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	50,283,400	47,388,100	42,926,300
Net Patient Revenue (NPR)	45,298,185	42,414,800	38,456,300
Other Operating Revenue	76,487	178,000	146,000
Net Operating Revenue (NOR)	45,374,671	42,592,800	38,602,300
Operating Expenses	40,274,313	37,697,600	35,011,100
Inpatient Admissions (IPAs)	737	705	766
Equivalent Inpatient Admissions (EIPAs)	863	863	955
NPR per EIPA	52,489.21	49,148.09	40,268.38
Operating Expenses per EIPA	46,667.80	43,682.04	36,660.84
Net Operating Profit (Loss)	5,100,358	4,895,200	3,591,200
Total Non-Operating Profit (Loss)	(537,249)	(3,290,600)	(2,042,600)
Total Excess Profits (Loss)	4,563,109	1,604,600	1,548,600
% Change in NPR per EIPA	6.80	22.05	(11.60)
% Change in Cost per EIPA	6.84	19.15	(14.00)

Sheppard Pratt Hospital

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	126,018,300	110,846,600	112,116,000
Net Patient Revenue (NPR)	97,548,922	92,702,000	88,163,000
Other Operating Revenue	89,612	1,025,700	1,458,900
Net Operating Revenue (NOR)	97,638,534	93,727,700	89,621,900
Operating Expenses	96,959,410	93,897,000	88,496,900
Inpatient Admissions (IPAs)	8,397	7,953	7,938
Equivalent Inpatient Admissions (EIPAs)	9,267	8,812	8,843
NPR per EIPA	10,526.01	10,519.97	9,969.81
Operating Expenses per EIPA	10,462.40	10,655.58	10,007.57
Net Operating Profit (Loss)	679,124	(169,300)	1,125,000
Total Non-Operating Profit (Loss)	4,403,502	(1,704,900)	(534,800)
Total Excess Profits (Loss)	5,082,626	(1,874,200)	590,200
% Change in NPR per EIPA	0.06	5.52	6.72
% Change in Cost per EIPA	(1.81)	6.48	4.27

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St. Luke Institute

FISCAL YEAR ENDING	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue	6,066,087	5,707,394	6,416,974
Net Patient Revenue (NPR)	5,486,648	5,345,816	6,103,446
Other Operating Revenue	57,729	110,458	141,647
Net Operating Revenue (NOR)	5,544,377	5,456,274	6,245,093
Operating Expenses	7,075,807	7,177,979	6,900,012
Inpatient Admissions (IPAs)	68	70	80
Equivalent Inpatient Admissions (EIPAs)	72	74	102
NPR per EIPA	76,203.44	72,240.76	59,837.71
Operating Expenses per EIPA	98,275.10	96,999.72	67,647.18
Net Operating Profit (Loss)	(1,531,430)	(1,721,705)	(654,919)
Total Non-Operating Profit (Loss)	(1,197,018)	(1,197,018)	2,445,670
Total Excess Profits (Loss)	(2,728,448)	(2,918,723)	1,790,751
% Change in NPR per EIPA	5.49	20.73	(5.29)
% Change in Cost per EIPA	1.31	43.39	(7.23)

University Specialty Hospital

FISCAL YEAR ENDING	5089	YEAR 2010	YEAR 2009	YEAR 2008
Gross Patient Revenue		59,517,400	61,408,500	67,435,100
Net Patient Revenue (NPR)		48,818,390	50,631,300	54,473,100
Other Operating Revenue		118,898	(70,500)	323,100
Net Operating Revenue (NOR)		48,937,287	50,560,800	54,796,200
Operating Expenses		50,530,895	54,458,800	55,944,300
Inpatient Admissions (IPAs)		891	900	979
Equivalent Inpatient Admissions (EIPAs)		978	988	1,061
NPR per EIPA		49,937.17	51,246.26	51,341.28
Operating Expenses per EIPA		51,688.92	55,120.24	52,727.90
Net Operating Profit (Loss)		(1,593,607)	(3,898,000)	(1,148,100)
Total Non-Operating Profit (Loss)		176,054	(1,447,200)	(101,700)
Total Excess Profits (Loss)		(1,417,554)	(5,345,200)	(1,249,800)
% Change in NPR per EIPA		(2.55)	(0.19)	11.52
% Change in Cost per EIPA		(6.23)	4.54	16.09