



State of Nevada

**Department of Health and Human Services
Division of Health Care Financing and Policy**

Report on Activities and Operations

October 1, 2013

Pursuant to NRS 449.450 through 449.530

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REPORT ON ACTIVITIES AND OPERATIONS OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES

AUTHORITY AND OVERVIEW

AUTHORITY

The Division of Health Care Financing and Policy (DHCFP) was created on July 1, 1997 (state fiscal year 1998). The Division is responsible for carrying out the provisions of NRS 449, "Medical and Other Related Facilities."

The Director of the Department of Health and Human Services (DHHS) is required to prepare a report on DHHS activities and operations pertaining to the provisions of NRS 449.450 through 449.530, inclusive, for the preceding fiscal year. The report must be transmitted to the Governor, the Legislative Committee on Health Care and the Interim Finance Committee on or before October 1 of each year (NRS 449.520).

The functions and activities subject to NRS 449.450 through 449.530, inclusive, have been delegated to the Division of Health Care Financing and Policy (DHCFP).

DHCFP's responsibilities include:

1. Collecting financial information and other reports from hospitals;
2. Collecting health care information from hospitals and other providers;
3. Conducting analyses and studies relating to the cost of health care in Nevada and comparisons with other states;
4. Preparing and disseminating reports based on such information and analyses; and
5. Suggesting policy recommendations and reporting the information collected.

OVERVIEW OF NRS 449.450 - 449.530

The definitions of specific titles and terminology used in NRS 449.450 through 449.530 are defined in NRS 449.450.

The Director may adopt regulations, conduct public hearings and investigations, and exercise other powers reasonably necessary to carry out the provisions of NRS 449.450 through 449.530, inclusive, as authorized in NRS 449.460. The Director also has the authority to utilize staff or contract with appropriate independent and qualified organizations to carry out the duties mandated by NRS 449.450 through NRS 449.530, inclusive, as authorized in NRS 449.470.

SFY 2013 Health Care Administration Fee

The Director, by regulation, imposed fees upon admitted health care insurers to cover the costs of carrying out the provisions of NRS 449.450 to 449.530, inclusive. The legislature approves an annual amount to be collected and NRS 449.465 authorizes a \$50 fee for the support of the Legislative Committee on Health Care. Under NAC 449.953, the Division has the authority to impose penalties for late payments.

Amount authorized by Legislature: \$1,746,232

Number of health insurers estimated to pay: 446

Fee per admitted health insurer:	DHCFP	\$3,916
	LCB	<u>\$50</u>
TOTAL FEE PER ADMITTED HEALTH INSURER:		\$3,966

Actual number of health insurers that paid: 445

Total Fees/Actual Payment received for SFY 2013 \$1,764,870

Penalties collected by DHCFP \$115,000

Amount transferred to Legislative Committee \$22,250*

*445 insurers paid the fee (445 x \$50).

Committee on Hospital Quality of Care

Each hospital licensed to operate in Nevada is required to form a committee to ensure the quality of care provided by the hospital. Requirements for such committees are specified by the Joint Commission on Accreditation of Healthcare Organizations or by the Federal Government pursuant to Title XIX of the Social Security Act (NRS 449.476).

Submission of Data by Hospitals – NRS Provisions

Each hospital in the State of Nevada shall use a discharge form prescribed by the Director and shall include in the form all information required by the Department. The information in the form shall be reported monthly to the Department, which will be used to increase public awareness of health care information concerning hospitals in Nevada (NRS 449.485).

Every institution which is subject to the provision of NRS 449.450 to 449.530, inclusive, shall file financial statements or reports with the Department (NRS 449.490).

Manner in which Healthcare Providers are Reporting Information

Monthly Reporting

In conjunction with the University of Nevada, Las Vegas (UNLV) Center for Health Information Analysis (CHIA), DHCFP continues to maintain a statewide database of Universal Billing (UB) form information obtained from hospitals pursuant to this section. The UB database is also utilized by outside providers to analyze Nevada's health care trends. Additional information is included under the Published Reports section below.

The information reported by hospitals includes admission source, payer class, zip code, acuity level, diagnosis and procedures. This level of detail allows for trend analysis using various parameters, including specific illnesses and quality of care issues. The detail of the UB database is also available, upon request, in an electronic medium to researchers.

In the 2007 Legislative Session, DHCFP adopted regulations to implement Assembly Bill 146 that requires greater transparency in reporting. DHCFP contracted with UNLV CHIA to create a Transparency Website. The purpose of the Transparency Website is to increase public awareness of health care information concerning inpatient and outpatient hospitals and ambulatory surgical centers (ASC) in this State. Diagnostic Related Groups (DRG), diagnoses and treatments, as well as nationally recognized quality indicators are information posted in the website. This information is available in both fixed and interactive reports. These reports enable the consumer and researchers to do comparative analyses between hospitals. The website is located at www.nevadacomparecare.net. The hospital inpatient, hospital outpatient and ASC data are complete and posted.

Quarterly Reporting

Hospitals are required to submit quarterly reports regarding their financial and utilization information in a consistent manner. Hospitals may use different generally accepted accounting procedures as promulgated by the American Institute of Certified Public Accountants.

Electronic submission of the Nevada Healthcare Quarterly Reports (NHQR) to CHIA is required. Information is submitted by the providers based on the best information available at the time the reports are entered. Revised NHQRs are filed when material changes are discovered. Utilization and financial reports, which include individual facilities as well as summary information, are available for both the acute care and non-acute care hospitals. Utilization reports are also available for Ambulatory Surgery, Imaging, Skilled Nursing/Intermediate Care, and Hospice Facilities. DHCFP continues to work with CHIA, the Nevada Hospital Association, and other stakeholders to continually update medical provider reporting, assure consistency, and to create a more functional tool for users. These reports can be found at www.nevadacomparecare.net/static-nhqr.php.

Published Reports

The Director shall carry out analyses and studies relating to the cost of health care; prepare and file summaries, compilation or other supplementary reports; and submit a report to the Governor and legislative committees a report of the Department's operations and activities for the preceding year (NRS 449.500 to 449.520).

DHCFP, in conjunction with CHIA, publishes or makes available various reports deemed "desirable to the public interest" on the Transparency Website. The Website allows users to download and print various reports such as statistical, utilization, sentinel events, and comparative reports on DRGs, diagnosis, and procedures.

The statewide database of UB information obtained from hospitals pursuant to this section is the basic source of data used for hospital cost comparisons included in the Nevada Health CHIA's publication, *Personal Health Choices*. The latest edition for the period 2008 - 2012 published in June of 2013 is included as ATTACHMENT A. *Personal Health Choices* and additional information on the UB database may be found at the CHIA website at <http://nevadacomparecare.net/static-choices.php>.

CHIA publishes a package of standard reports based upon the UB hospital billing records. These reports are available for calendar years 2008 - 2012.

Comprehensive summaries of the utilization and financial data reported by Nevada hospitals and other health care providers are available for download on CHIA's website at <http://nevadacomparecare.net/static-standard-reports.php>.

A list of the financial and utilization reports, accessible in CHIA's website, are attached in Exhibit 5.

SUMMARY INFORMATION AND ANALYSES **HOSPITALS WITH 100 or MORE BEDS**

NRS 449.490 requires reporting for hospitals with 100 or more beds. They report on capital improvements; community benefits; home office allocation methodologies; discount and collection policies; and the availability of a complete current charge master.

HOSPITAL INFORMATION

General hospital information concerning the seventeen (17) hospitals with more than 100 beds is presented in Exhibit 1. The information includes location, corporate name, number of beds, type of ownership, availability of community benefits coordinator, availability of charitable foundation, if the hospital conducts teaching and research, trauma center information, and if the hospital is a sole provider of any specific clinical services in their area.

SUMMARY OF CAPITAL IMPROVEMENT REPORTS

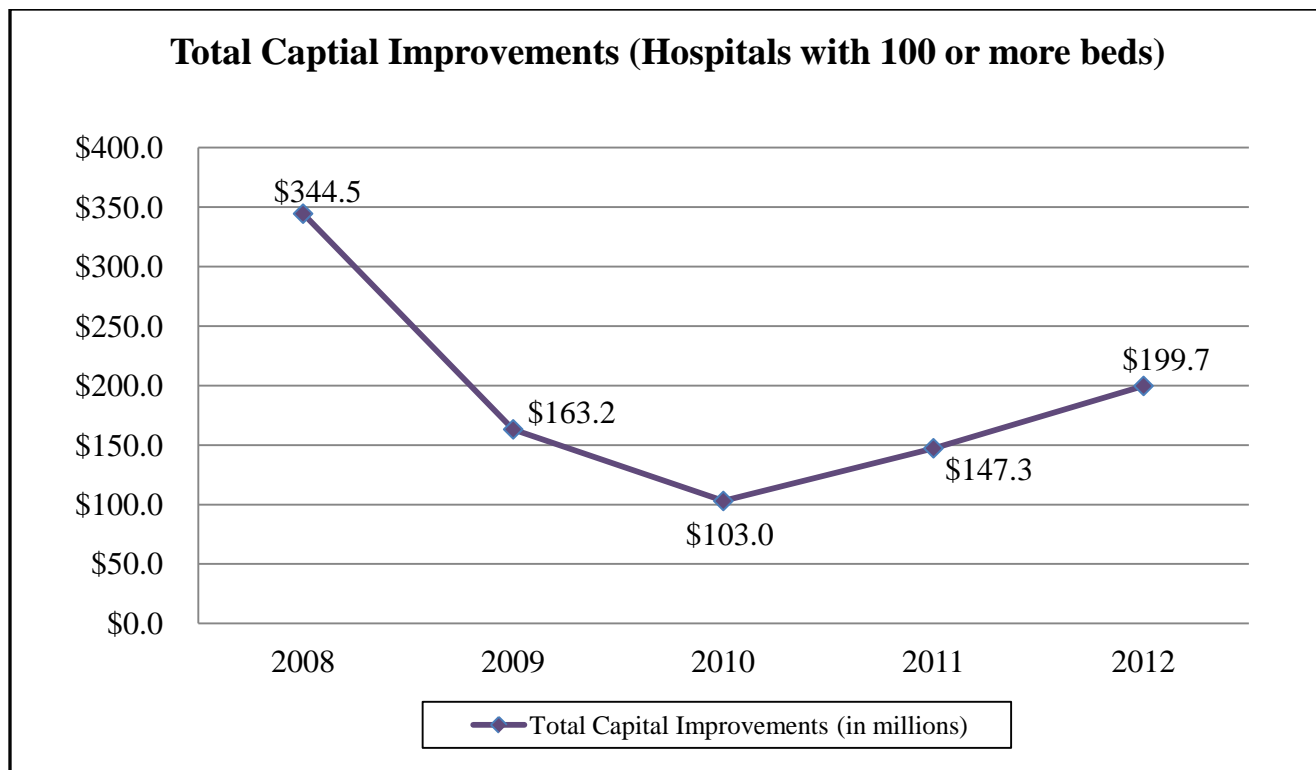
Capital Improvements cover three areas: New Major Services Lines, Major Facility Expansions and Major Equipment. In order to avoid duplication of reporting, no costs are reported for the addition of Major Service Lines. The costs for Major Expansions do not include equipment. A threshold of \$500,000 has been established for reporting Major Equipment additions. Capital Improvements that do not meet the reporting thresholds are reported in aggregate.

Hospitals' reported Capital Improvement costs as follows:

Major Expansions	\$63,579,410
Major Equipment	\$88,293,179
Additions not required to be Reported Separately	<u>\$47,873,093</u>
Total	\$199,745,682

Capital Improvements were declining from 2008 to 2010. However, in 2011 and 2012, there were increases of 43.01% and 35.57% respectively. Comparing the Total Capital Improvements in 2008 of \$344.5 million to the \$199.7 million in 2012 resulted in a 42.03% decrease in Capital Improvements.

Capital Improvements					
Year	2008	2009	2010	2011	2012
Total Capital Improvements (in millions)	\$344.5	\$163.2	\$103.0	\$147.3	\$199.7
Percentage Change	-30.22%	-52.63%	-36.89%	43.01%	35.57%

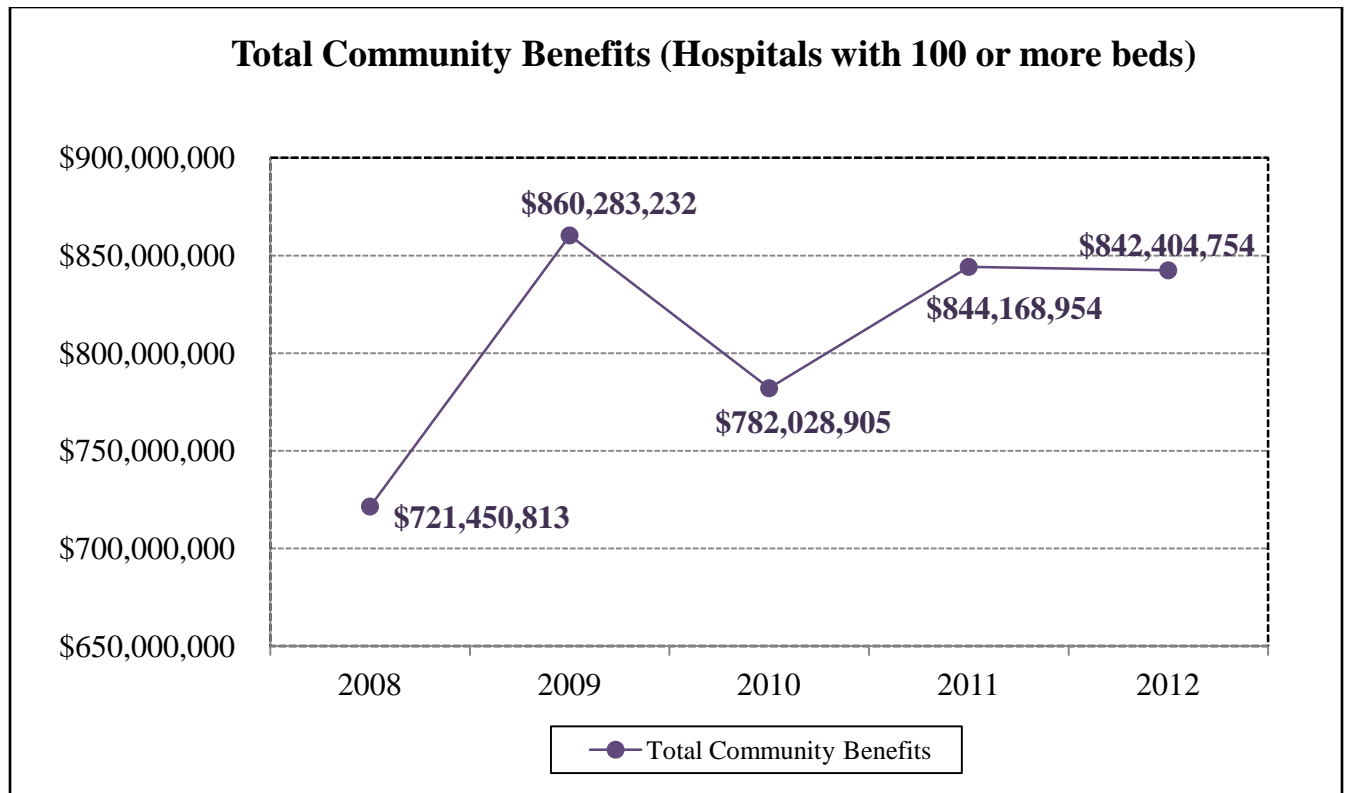


See Exhibit 2 for details.

EXPENSES INCURRED FOR PROVIDING COMMUNITY BENEFITS

The Total Community Benefits reported for 2012 was \$842,404,754. Subsidized Health Care Services costs accounted for \$758,592,993 of the total; providing Health Professions Education totaled to \$42,701,895; Community Health Improvement Services totaled to \$33,429,752; and Other Categories totaled to \$7,680,114. Reported Community Benefits decreased by 0.21% from 2011. The Total Community Benefits reported for 2011 was \$844,168,954. Comparing the Total Community Benefits in 2008 of \$721,450,813 to the \$842,404,784 in 2012 resulted in a 16.77% increase in Community Benefits.

Community Benefits					
Year	2008	2009	2010	2011	2012
Total Community Benefits	\$721,450,813	\$860,283,232	\$782,028,905	\$844,168,954	\$842,404,754
Percentage Change	15.94%	19.24%	-9.10%	7.95%	-0.21%



See Exhibit 3 for details.

CORPORATE HOME OFFICE ALLOCATION METHODOLOGIES

Home office allocation methodologies for the hospitals that were subject to the “Agreed Upon Procedures” engagements were reviewed by the accounting firm of Myers and Stauffer LC. No exceptions were noted. These can be viewed at the end of the individual compliance reports on the Nevada website: <http://dhcfp.state.nv.us/hcfpdata.htm>. A brief description of the home office allocation can also be found in Exhibit 4.

POLICIES AND PROCEDURES REGARDING DISCOUNTS OFFERED TO PATIENTS AND REVIEW OF POLICIES AND PROCEDURES USED TO COLLECT UNPAID PATIENT ACCOUNTS

NRS 439B.440 allows the Director to engage an auditor to conduct an examination to determine whether hospitals are in compliance with provisions of NRS 439B. The statute refers to these engagements as audits. In accordance with the American Institute of Certified Public Accountants promulgations, these are “Agreed Upon Procedures” engagements, not audits. These engagements are performed biennially by Myers and Stauffer LC, Certified Public Accountants & Consultants at all sixteen (16) hospitals. The last period reviewed was July 1, 2009 thru June 30, 2011. Audits for the period of July 1, 2011 thru June 30, 2013 will be completed by the end of state fiscal year 2014. Per NRS 439B.440 subsection 3, University

Medical Center in Clark County, being a county owned hospital, is exempt from this requirement.

The engagement tests hospitals for compliance with NRS 439B.260, 30% discount required for uninsured patients; NRS 439B.410, appropriateness of emergency room patient logs, transfers into or out of the hospital, review of policies and procedure in the emergency room, and review of any complaints in the emergency room; NRS 439B.420, review of contractual arrangements between hospital and physicians or other medical care providers; and NRS 439B.430 review of related party transactions and ensure appropriate allocation.

SUMMARY OF TRENDS NOTED FROM REQUIRED OR PERFORMED AUDITS

NRS 449.520 requires a summary of any trends noted from these “audits” be reported. The audits covering July 1, 2009 thru June 30, 2011 shows no trends to note. There were no significant compliance issues; a few exceptions were noted, however, they were all within the accepted error rate.

A copy of these audits maybe found at the Cost Containment web site:
<http://dhcfp.state.nv.us/hcfpdata.htm>.

CHARGE MASTER AVAILABILITY AT HOSPITALS

Pursuant to NRS 449.490, subsection 4, a complete current Charge Master must be available at each hospital (with 100 or more beds) during normal business hours for review by the Director, any payer that has a contract with the hospital to pay for services provided by the hospital, any payer that has received a bill from the hospital, or any state agency that is authorized to review such information.

No violations of Charge Master availability have been reported to the Division.

SUMMARY INFORMATION AND ANALYSES - ALL HOSPITALS

HOSPITAL GROUPINGS

The acute care hospitals are grouped into the following categories:

- Statewide
- Clark County Hospitals
- Washoe County/Carson City Hospitals
- Rural Hospitals

Data from the Rehabilitation/Specialty Hospitals and the Psychiatric Hospitals, none of which are located in a rural county, are reported separately. The CHIA website contains both financial and utilization information; the following pages of this report summarize these data.

All thirty-four (34) Acute Care Hospitals, thirteen (13) Rehabilitation Hospitals, and seven (7) Psychiatric Hospitals were reported in 2012.

There are also five (5) government operated hospitals (federal and state) in Nevada, which do not have standard private sector operating costs and revenues. Below are the inpatient days and admissions data that have been reported to CHIA.

Facility	Inpatient Days	Admissions
Desert Willow Treatment Center	13,258	273
Ioannis A. Lougaris Veterans Administration Medical Center	19,101	4,136
Nellis Air Force Base Veterans Administration Medical Center	Not Reported	Not Reported
Northern Nevada Adult Mental Health Services	5,862	589
Southern Nevada Adult Mental Health Services	60,100	3,260

FINANCIAL SUMMARIES

The five year financial summary in Exhibit 6 presents condensed financial and utilization information for acute care hospitals in Nevada. Detailed information for the individual acute care hospitals are presented in Exhibit 8.

Comparative Financial Indicators

In order to compare hospitals across categories, financial indicators are used. The indicators used in this report are Per Adjusted Inpatient Day and Per Adjusted Admission. The following data were utilized in calculating the indicators:

- Billed Charges and Other Operating Revenue
- Total Operating Revenue
- Operating Expenses
- Net Operating Income

The adjusted inpatient days and adjusted admissions are calculated by converting outpatient and other patient revenue to inpatient units. The calculations for the indicators are derived by using information from the Financial Summaries for hospital billed charges and other operating revenue, total operating revenue, operating expenses, and net operating income, and dividing those amounts by adjusted inpatient days or adjusted admissions. The amounts calculated due to the conversion are useful for comparisons and trending analyses.

Common Size Statements

Common size statements are “vertical analyses” that use percentages to facilitate trend analysis and data comparison. The components of financial information are represented as percentages of a common base figure. Key financial changes and trends can be highlighted by the use of common size statements.

Common size statements are utilized in Comparative Financial Summary (Exhibit 6). Different financial information was represented as percentages of a common base figure. Total deductions and operating revenue were represented as a percentage of the billed charges; other operating revenue, operating expenses, net operating income, non-operating revenue and non-operating expenses are also represented as percentages of the total operating revenue.

ANALYSIS

Acute Care Hospitals

The five year Comparative Financial Summary tables (Exhibit 6) were prepared for the acute care hospitals. The Comparative Financial Summaries (2008 - 2012) report both the financial and the common size statement information (vertical analyses).

Exhibit 6 reports billed charges, deductions, and operating revenue. Operating revenue is the amount paid by patients (or third party payer) for services received. Other operating revenue and non-operating revenue include non-patient related revenue such as investment income or tax subsidies.

Exhibit 6 also reports inpatient days, admissions, and other patient statistical information along with the calculated “per adjusted inpatient day” and “per adjusted admission” information.

Hospital Profitability

The Comparative Financial Summary, Statewide Acute Care Hospitals Totals, shows the Hospital Net Income/Loss¹ as a percentage of Total Revenues². After reporting statewide net losses from 2008 and through 2011, the facilities reported a net income for 2012. The Net Profit Margin (Net Income ÷ Total Revenues) expressed as percentages from Exhibit 6A are:

<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
(0.81%)	(0.04%)	(1.17%)	(0.07%)	2.80%

The above 2.80% reflects Nevada hospitals collectively earning \$131,943,222 with a Total Revenue of \$4,712,161,208 in 2012. The losses and gains ranged from a Net Income of \$41,041,514 for Northeastern Nevada Regional Hospital to a Net Loss of \$64,733,768 for Saint Mary’s Regional Medical Center.

Nine out of thirteen Clark County Acute Care Hospitals reported a Net Income. The Total Net Income for all Clark County Acute Care Hospitals was \$100,186,285. University Medical Center of Southern Nevada had the highest Net Income of \$38,321,169 and St. Rose Dominican Hospitals Rose de Lima Campus had the biggest Net Loss of \$18,201,372.

Two out of the six Washoe County/Carson City Acute Care Hospitals reported a Net Loss. The Total Net Loss for all Washoe/Carson City Acute Care Hospitals was \$45,827,775. Renown South Meadows Medical Center had the highest Net Income of \$8,610,792 and St. Mary’s Regional Medical Center had the biggest Net Loss of \$64,733,768.

Eleven out of the fifteen Rural Hospitals reported a Net Income. The Total Net Income for all Rural Hospitals was \$77,584,712. Northeastern Nevada Regional Hospital had the highest Net Income of \$41,041,514 and Mesa View Regional Hospital had the biggest Net Loss of \$1,284,354.

Most hospitals in Nevada have corporate affiliations. These parent companies help reduce costs and also help absorb losses over multiple facilities.

¹ Net of Net Operating Income, Non-operating Revenue and Non-operating Expense

² The sum of Total Operating Revenue and Non-Operating Revenues

There are six Universal Health Systems Inc. (UHS) acute care hospitals in Nevada. Five of the hospitals are located in Clark County and one hospital in Washoe County. All of the six hospitals reported profits for 2012; this resulted in a Net Income of \$74,860,860 for the six hospitals. The principal business of UHS is to own and operate, through their subsidiaries, acute care hospitals, behavioral health centers, surgical hospitals, ambulatory surgery centers and radiation oncology centers. As of February 28, 2013, UHS owns and/or operates 23 acute care hospitals and 197 behavioral health centers located in 37 states, Washington D.C., Puerto Rico and the US Virgin Islands. UHS manages and/or owns in partnership with physicians, 5 surgical hospitals and surgery and radiation oncology centers located in 4 states and Puerto Rico. UHS Inc. nationally experienced a 6.4% Net Profit Margin which increased from 2011's 5.9%.³

There are three Hospital Corporation of America (HCA) acute care hospitals in Clark County, Nevada. Two out of the three hospitals reported a net loss in 2012; this resulted in a Net Loss of \$2,889,541 for the three hospitals. HCA Holdings, Inc. is one of the leading health care services companies in the United States. As of December 31, 2012, HCA operates 162 hospitals, comprised of 156 acute care hospitals, 5 psychiatric hospitals and one rehabilitation hospital. In addition, HCA operates 112 freestanding surgery centers. These facilities are located in 20 states and England. HCA Holdings, Inc. reported a Net Profit Margin of 4.9% which was a decrease from their Net Profit Margin of 8.3% in 2011.⁴

Dignity Health, formerly Catholic Healthcare West, a non-profit public benefit corporation, exempt from federal and state income taxes, operates three St. Rose hospitals in Clark County and St. Mary's Regional Medical Center in Washoe County, Nevada. Three of the four facilities had a combined reported loss of \$98,915,345 in 2012; only St. Rose-Siena reported a Net Profit of \$28,135,433. This resulted in a Net Loss of \$70,779,912 for the four hospitals. Dignity Health owns and operates hospitals in California, Arizona and Nevada, and is the sole corporate member of other primarily non-profit corporations in the aforementioned states. These organizations provide a variety of healthcare-related activities, education and other benefits to the communities in which they operate. Dignity Health reported a Net Profit Margin of 1.3% which was a decrease from the Net Profit Margin of 9.3% in 2011.⁵ On July 1, 2012, Prime Healthcare Services completed its purchase of Saint Mary's Regional Medical Center in Washoe County.

Competition, higher costs, and the current economy are all contributing factors to hospital profitability. Hospitals have high fixed costs for buildings and state-of-the-art equipment. In addition, hospitals are limited in their ability to pass these costs on to consumers.

Labor costs often account for higher operating expenses. The following table shows the Nevada median hourly wages for two specific hospital occupations.

	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
Registered Nurses	\$34.41	\$35.23	\$35.95	\$37.29	\$37.33
Medical and Clinical Laboratory Technologists	\$31.91	\$32.28	\$32.78	\$32.95	\$32.55

³ UHS' Annual Report 2012 (10-K)

⁴ 10-K Report - HCA Holdings, Inc. filed period 12/31/2012

⁵ Dignity Health's consolidated financial statements (years ended June 30, 2012 and 2011)

From 2008 to 2012, the median wage increased 8.49% for Registered Nurses and 2.01% for Medical and Clinical Laboratory Technologists.⁶

Operating Revenue / Deductions (Contractual Allowances and Bad Debts)

The Billed Charges, when compared to the Deductions (contractual allowances and bad debts), provide insight into the market competition among health care providers.

Operating Revenue on a statewide basis (the amount patients or third party payers actually pay) has steadily decreased from 23.83% in 2008 to 18.97% in 2012. This decrease is visible across the State impacting hospitals in Clark County, Washoe County/Carson City and Rural hospitals, as outlined in the table below.

	2008	2012
Clark County	21.26%	16.95%
Washoe County/Carson City	29.79%	23.29%
Rural Hospitals	49.61%	42.80%

In general, Rural hospitals are not in competition with other hospitals. As a result, Operating Revenues at Rural hospitals are a larger percentage of their Billed Charges (see Exhibit 6D for details).

Total Deductions on a statewide basis has gradually increased from 76.17% in 2008 to 81.03% in 2012. The Total Deductions as a percent of Billed Charges for Clark County hospitals, Washoe County/Carson City hospitals and Rural hospitals are outlined in the table below.

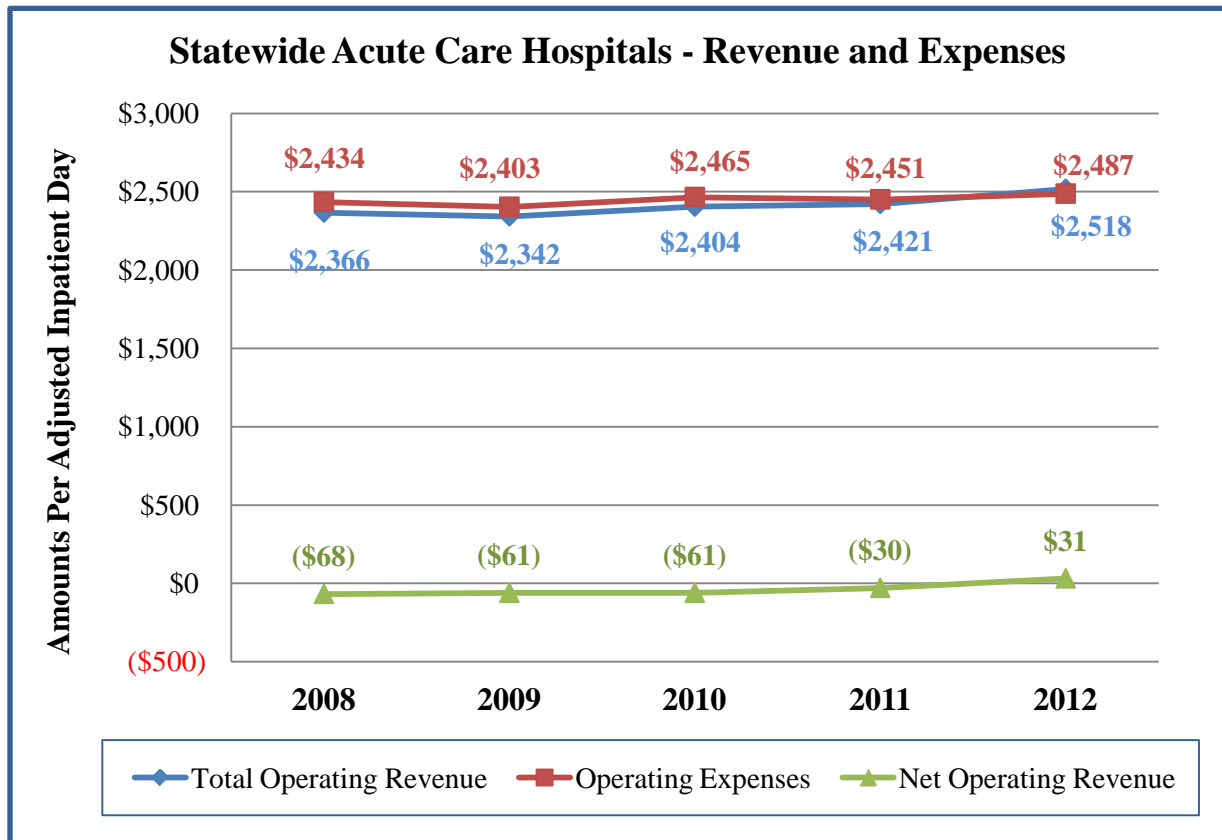
	2008	2012
Clark County	78.74%	83.05%
Washoe County/Carson City	70.21%	76.71%
Rural Hospitals	50.39%	57.20%

Clark County hospitals are affected the most by preferred provider contractual arrangements with large employee groups. With this, their Total Deductions are the highest when compared to Washoe County/Carson City and the Rural hospitals.

⁶ Bureau of Labor Statistics, Occupational Employment Statistics.

Revenue and Expenses

Using Per Adjusted Inpatient Day information, the following graph displays the relationship of Total Operating Revenue, Operating Expenses and Net Operating Revenue from hospital operations on a statewide basis over the five year period. The financial indicators listed in Exhibit 6A are the basis for this graph.



Operating Expense and Operating Revenue Compared with the Consumer Price Index and Producer Price Index (CPI & PPI)⁷

The Operating Expenses per adjusted inpatient day has increased 1.47% from 2011. The Total Operating Revenue per adjusted inpatient day has increased 4.01% from 2011. Both CPI-U and PPI has increased from the previous year by 2.09% and 2.59%, respectively.

5 year increase	Base # / Percentage	2008	2009	2010	2011	2012
2.18%	NV Acute Hospitals Operating Expenses per Adj IP Day % increase from prior year	\$2,434 10.39%	\$2,403 (1.27%)	\$2,465 2.58%	\$2,451 (0.57%)	\$2,487 1.47%
6.42%	NV Acute Hospitals Total Operating Revenue per Adj IP Day % increase from prior year	\$2,366 6.19%	\$2,342 (1.01%)	\$2,404 2.65%	\$2,421 0.71%	\$2,518 4.01%
6.64%	CPI-U (all) % increase from prior year	215.3 3.86%	214.5 (0.37%)	218.1 1.68%	224.9 3.12%	229.6 2.09%
11.18%	PPI General Medical and Surgical Hospital % increase from prior year	163.7 3.09%	168.8 3.12%	173.7 2.90%	177.4 2.13%	182.0 2.59%

While both the PPI and CPI measure price change over time for a fixed set of goods and services, they differ in two critical areas: (1) the composition of the set of goods and services, and (2) the types of prices collected for the included goods and services.

The target set of goods and services included in the PPI is the entire marketed output of U.S. producers, excluding imports. The target set of items included in the CPI is the set of goods and services purchased for consumption purposes by urban U.S. households. This set includes imports.

The price collected for an item included in the PPI is the revenue received by its producer. Sales and excise taxes are not included in the price because they do not represent revenue to the producer. The price collected for an item included in the CPI is the out-of-pocket expenditure by a consumer for the item. Sales and excise taxes are included in the price because they are necessary expenditures by the consumer for the item.

The differences between the PPI and CPI are consistent with the different uses of the two measures. A primary use of the PPI is to deflate revenue streams in order to measure real growth in output. A primary use of the CPI is to adjust income and expenditure streams for changes in the cost of living.

There are slight differences in the PPI data for 2008 – 2010. The Department of Labor made changes to the industry group. The current industry group is named General Medical and Surgical Hospitals, while the prior industry group was named Hospitals.

⁷ The CPI and PPI are published by the Bureau of Labor Statistics, U. S. Department of Labor.

UTILIZATION REPORTS

Ten year acute care hospital utilization information is summarized in Exhibit 7. The charts include Average Daily Census, Occupancy Percentages, Average Length of Stay, Admissions per 1,000 Population, Inpatient Days per 1,000 Population and Average Licensed Beds per 1,000 Population. The ten year trends are as follows:

Parameter	2003	2012	Change	Percent Change
Estimated Nevada Population	2,296,566	2,758,931	462,365	20.13%
Average Daily Census	2,860.8	3,281.6	420.8	14.71%
Occupancy Percentages	72.42%	57.02%	(15.40%)	(15.40%)
Average Length of Stay	4.8	4.8	0.0	0.00%
Admissions	213,367	247,527	34,160	16.01%
Admissions per 1,000 Population	92.9	89.7	(3.2)	(3.44%)
Inpatient Days	1,033,229	1,197,771	164,542	15.93%
Inpatient Days per 1,000 Population	449.9	434.1	(15.8)	(3.51%)
Average Licensed Beds	4,298	5,755	1,457	33.90%
Licensed Beds per 1,000 Population	1.9	2.1	0.2	10.53%

The estimated Nevada population in 2012 increased 20.13% compared to 10 years ago in 2003. Admissions and Inpatient Days have also significantly increased by 16.01% and 15.93%, respectively. Nevada has effectively increased the Average Licensed Beds to compensate for these increases. Average Licensed Beds increased 33.90% from 2003 to 2012 and Occupancy Percentages decreased 15.40%.

The national average occupancy per 1,000 Population for 2011 was 63.22% and Nevada's average occupancy per 1,000 Population for 2011 was 57.02%.⁸

The national average number of Hospital Beds per 1,000 Population in 2011 was 2.6.⁹ The Nevada average number was 2.2. Nevada's average decreased in 2012 to 2.1.

Rural counties in Nevada have lower Licensed Beds per 1,000 Population. For 2012, rural counties have 1.6 Beds/1,000 Population as compared to the statewide 2.1 Beds/1,000 Population. This however is sufficient for the population in rural counties as demonstrated in their low Occupancy Percentage of 23.01% for 2012. Admissions and Inpatient Days per 1,000 Population are also lower for the rural counties. Admissions for rural counties are at 38.8 per 1,000 Population compared to statewide average of 89.7 per 1,000 Population. Inpatient Days for rural counties are 134.5 per 1,000 Population while statewide average is 434.1 per 1,000 Population.

⁸ National average occupancy data from StateHealthFacts.org – Kaiser Family Foundation (source from AHA Annual Survey); Nevada data from Exhibit 7

⁹ StateHealthFacts.org – Kaiser Family Foundation (source from AHA Annual Survey)

Rehabilitation/Specialty Hospitals

The Rehabilitation/Specialty Hospitals reported a Net Income of \$43,120,447 from Total Revenue of \$303,657,503.¹⁰ All but one of the thirteen Rehabilitation/Specialty hospitals reported profits in 2012. The figures (in millions) from the last five years are as follows:

	2008	2009	2010	2011	2012
Total Revenue	271.6	277.2	288.2	306.0	303.7
Net Income	39.5	32.2	44.0	60.7	43.1
Net Margin	14.6%	11.6%	15.3%	19.8%	13.5%

See Exhibit 8D for more details.

Psychiatric Hospitals

Five of the seven psychiatric hospitals reported profits.¹¹ As a group, they reported a Net Income of \$8,071,525 from Total Revenue of \$95,523,346.

The comparison of 2011 and 2012 Net Income (loss) for each facility is reported below:

Facility	Net Income/Loss	
	2011	2012
Montevista Hospital	\$5,780,104	\$4,457,734
Red Rock Behavioral Health	\$1,484,476	\$1,600,045
Seven Hills Behavioral Institute	\$178,706	\$1,596,595
Spring Mountain Sahara	\$1,473,500	\$1,961,408
Spring Mountain Treatment Center	(\$82,366)	\$310,454
West Hills Hospital	(\$2,818,201)	(\$745,555)
Willow Springs Center	\$274,573	(\$1,109,156)
TOTAL	\$6,290,792	\$8,071,525

The Total Revenue and Net Income from the last five years are as follows (in millions):

	2008	2009	2010	2011	2012
Total Revenue	60.6	61.5	75.7	93.4	95.5
Net Income	5.7	2.5	6.8	6.3	8.1
Net Margin	9.5%	4.0%	9.0%	6.7%	8.5%

See Exhibit 8E for more details.

¹⁰ Total Revenue equals Total Operating Revenue plus non-operating revenue – See Exhibit 8

¹¹ The state facilities did not report.

Exhibits

**NEVADA HOSPITALS
HOSPITAL INFORMATION
(Hospitals with 100 or more beds)**

CLARK COUNTY HOSPITALS

HCA Holdings Inc. Hospitals

MountainView Hospital

Southern Hills Hospital & Medical Center

Sunrise Hospital & Medical Center

Universal Health Systems Hospitals (UHS)

Centennial Hills Hospital Medical Center

Desert Springs Hospital Medical Center

Spring Valley Hospital Medical Center

Summerlin Hospital Medical Center

Valley Hospital Medical Center

Dignity Health

Saint Rose Dominican Hospital

- Rose de Lima Campus

- San Martin Campus

- Siena Campus

IASIS Healthcare

North Vista Hospital

Clark County Owned Hospital

University Medical Center of Southern Nevada

WASHOE COUNTY/CARSON CITY HOSPITALS

Carson Tahoe Regional Healthcare

Carson Tahoe Regional Medical Center

UHS

Northern Nevada Medical Center

Dignity Health (1)

St. Mary's Regional Medical Center

Renown Health

Renown Regional Medical Center

Data as of	Number of Beds	Type of Ownership	Does the Hospital Have or Offer				Is the Hospital a Sole Provider of Any Specific Clinical Services in the Area?
			Community Benefits Coordinator	Charitable Foundation	Conduct Teaching & Research	Trauma Center	
12/31/12	254	For-Profit	No	No	Yes	No	No
12/31/12	134	For-Profit	No	No	Yes	No	No
12/31/12	690	For-Profit	No	No	Yes	Level II	Yes
12/31/12	171	For-Profit	No	No	No	No	No
12/31/12	276	For-Profit	No	No	No	No	No
12/31/12	231	For-Profit	No	No	No	No	No
12/31/12	454	For-Profit	No	No	No	No	Yes
12/31/12	320	For-Profit	No	No	Yes	No	No
6/30/12	119	Not-for-Profit	Yes	Yes	No	No	No
6/30/12	147	Not-for-Profit	Yes	Yes	No	No	No
6/30/12	219	Not-for-Profit	Yes	Yes	Yes	Level III	No
9/30/12	177	For-Profit	Yes	No	No	No	No
6/30/12	541	Not-for Profit	No	Yes	Yes	Level I	Yes
12/31/12	190	Not-for Profit	No	Yes	No	No	Yes
12/31/12	108	For-Profit	No	No	No	No	No
6/30/12	380	Not-for-Profit	Yes	Yes	Yes	No	No
6/30/12	808	Not-for-Profit	There is a committee	Yes	Yes	Level II	Yes

(1) St. Mary's was sold by Dignity Health to Prime Health 7/1/12.

NEVADA HOSPITALS CAPITAL IMPROVEMENTS (Hospitals with 100 or more beds)	Data as of	Major Expansions	Major Equipment	Capital Additions Not Required to be Reported Separately	Total Capital Improvement
<u>CLARK COUNTY HOSPITALS</u>					
HCA Holdings Inc. Hospitals					
MountainView Hospital	12/31/12	\$37,109,895	\$4,273,147	\$5,437,318	\$46,820,360
Southern Hills Hospital & Medical Center	12/31/12	\$4,521,514	\$2,180,930	\$3,274,726	\$9,977,170
Sunrise Hospital & Medical Center	12/31/12	\$0	\$13,407,310	\$7,041,508	\$20,448,818
<u>Universal Health Systems Hospitals (UHS)</u>					
Centennial Hills Hospital Medical Center	12/31/12	\$0	\$3,031,035	\$470,450	\$3,501,485
Desert Springs Hospital Medical Center	12/31/12	\$2,724,893	\$4,942,541	\$4,001,081	\$11,668,515
Spring Valley Hospital Medical Center	12/31/12	\$280,297	\$7,958,802	\$2,781,808	\$11,020,907
Summerlin Hospital Medical Center	12/31/12	\$206,143	\$8,267,197	\$3,007,828	\$11,481,168
Valley Hospital Medical Center	12/31/12	\$0	\$9,962,468	\$466,314	\$10,428,782
<u>Dignity Health</u>					
Saint Rose Dominican Hospital					
- Rose de Lima Campus	6/30/12	\$1,224,541	\$838,757	\$3,102,325	\$5,165,623
- San Martin Campus	6/30/12	\$0	\$0	\$2,120,326	\$2,120,326
- Siena Campus	6/30/12	\$7,988,063	\$1,993,730	\$478,555	\$10,460,348
<u>IASIS Healthcare</u>					
North Vista Hospital	9/30/12	\$0	\$265,618	\$219,393	\$485,011
<u>Clark County Owned Hospital</u>					
University Medical Center of Southern Nevada	6/30/12	\$73,427	\$20,404,950	\$2,074,952	\$22,553,329
TOTAL CLARK COUNTY HOSPITALS		\$54,128,773	\$77,526,485	\$34,476,584	\$166,131,842
<u>WASHOE COUNTY/CARSON CITY HOSPITALS</u>					
<u>Carson Tahoe Regional Healthcare</u>					
Carson Tahoe Regional Medical Center	12/31/12	\$0	\$2,093,390	\$6,599,757	\$8,693,147
<u>UHS</u>					
Northern Nevada Medical Center	12/31/12	\$0	\$3,140,786	\$748,310	\$3,889,096
<u>Dignity Health</u>					
St. Mary's Regional Medical Center	6/30/12	\$2,779,735	\$0	\$0	\$2,779,735
<u>Renown Health</u>					
Renown Regional Medical Center	6/30/12	\$6,670,902	\$5,532,518	\$6,048,442	\$18,251,862
TOTAL WASHOE COUNTY / CARSON CITY HOSPITALS		\$9,450,637	\$10,766,694	\$13,396,509	\$33,613,840
GRAND TOTALS		\$63,579,410	\$88,293,179	\$47,873,093	\$199,745,682

NEVADA HOSPITALS COMMUNITY BENEFITS (Hospitals with 100 or more beds)	Data as of	Subsidized Health Services	Health Professions Education	Community Health Improvements Services	Other Categories	Total Community Benefits
<u>CLARK COUNTY HOSPITALS</u>						
HCA Holdings Inc. Hospitals						
MountainView Hospital	12/31/12	\$45,103,988	\$294,639	\$390,463	\$157,634	\$45,946,724
Southern Hills Hospital & Medical Center	12/31/12	\$21,306,017	\$245,263	\$322,556	\$564,096	\$22,437,932
Sunrise Hospital & Medical Center	12/31/12	\$104,213,376	\$2,124,446	\$1,159,559	\$545,054	\$108,042,435
Universal Health Systems Hospitals (UHS)						
Centennial Hills Hospital Medical Center	12/31/12	\$27,310,240	\$30,952	\$125,176	\$9,118	\$27,475,486
Desert Springs Hospital Medical Center	12/31/12	\$28,700,589	\$25,467	\$280,787	\$21,883	\$29,028,726
Spring Valley Hospital Medical Center	12/31/12	\$37,265,174	\$60,411	\$342,136	\$25,075	\$37,692,796
Summerlin Hospital Medical Center	12/31/12	\$37,804,366	\$90,653	\$329,251	\$11,853	\$38,236,123
Valley Hospital Medical Center	12/31/12	\$47,753,691	\$5,629,985	\$876,895	\$42,399	\$54,302,970
Dignity Health						
Saint Rose Dominican Hospital						
- Rose de Lima Campus	6/30/12	\$30,949,730	\$178,309	\$318,285	\$539,054	\$31,985,378
- San Martin Campus	6/30/12	\$29,780,254	\$279,785	\$332,440	\$710,819	\$31,103,298
- Siena Campus	6/30/12	\$45,673,659	\$1,772,225	\$3,730,886	\$1,215,340	\$52,392,110
IASIS Healthcare						
North Vista Hospital	9/30/12	\$20,967,993	\$0	\$525,075	\$1,000	\$21,494,068
Clark County Owned Hospital						
University Medical Center of Southern Nevada	6/30/12	\$45,804,184	\$28,683,365	\$9,558,114	\$319,487	\$84,365,150
TOTAL CLARK COUNTY HOSPITALS		\$522,633,261	\$39,415,500	\$18,291,623	\$4,162,812	\$584,503,196
<u>WASHOE COUNTY/CARSON CITY HOSPITALS</u>						
Carson Tahoe Regional Healthcare						
Carson Tahoe Regional Medical Center	12/31/12	\$31,485,139	\$214,694	\$2,594,783	\$311,300	\$34,605,916
UHS						
Northern Nevada Medical Center	12/31/12	\$14,660,497	\$43,852	\$93,996	\$15,580	\$14,813,925
Dignity Health						
St. Mary's Regional Medical Center	6/30/12	\$78,203,076	\$408,956	\$7,625,434	\$1,768,446	\$88,005,912
Renown Health						
Renown Regional Medical Center	6/30/12	\$111,611,020	\$2,618,893	\$4,823,916	\$1,421,976	\$120,475,805
TOTAL WASHOE COUNTY / CARSON CITY HOSPITALS		\$235,959,732	\$3,286,395	\$15,138,129	\$3,517,302	\$257,901,558
GRAND TOTALS		\$758,592,993	\$42,701,895	\$33,429,752	\$7,680,114	\$842,404,754

(1) UMC's Subsidized Health Services was updated to reflect actual supplemental payments received by the hospital

**NEVADA HOSPITALS
HOME OFFICE ALLOCATION
(Hospitals with 100 or more beds)**

CLARK COUNTY HOSPITALS

HCA Holdings Inc. Hospitals

MountainView Hospital
Southern Hills Hospital & Medical Center
Sunrise Hospital & Medical Center

Universal Health Systems Hospitals (UHS)

Centennial Hills Hospital Medical Center
Desert Springs Hospital Medical Center
Spring Valley Hospital Medical Center
Summerlin Hospital Medical Center
Valley Hospital Medical Center

Dignity Health

Saint Rose Dominican Hospital
- Rose de Lima Campus
- San Martin Campus
- Siena Campus

IASIS Healthcare

North Vista Hospital

Clark County Owned Hospital

University Medical Center of Southern Nevada (1)

WASHOE COUNTY/CARSON CITY HOSPITALS

Carson Tahoe Regional Healthcare

Carson Tahoe Regional Medical Center

UHS

Northern Nevada Medical Center

Dignity Health

St. Mary's Regional Medical Center

Renown Health

Renown Regional Medical Center

BASIC FORMULA FOR ALLOCATION

* The fee charged is 6.5% of net revenues. HCA utilizes a central oversight company, also referred to as a management company. Services provided under this management agreement include: consulting services in areas such as long-range planning, budget control systems, financial reporting systems and practices, contractual agreements, accounts receivable management, government reimbursement, cost report preparation and filing, capital planning, internal audit, managed care contracting, legal services, and human resource services. The corporate office prepares and files federal, state and local tax returns and reports as well as tax audits and appeals management.

* The corporate overhead expenses are allocated on a monthly basis to the facility based upon their monthly operating costs as a percentage of the total monthly operating costs for the entire corporation.

* The home office, Dignity Health, makes three types of charges to the hospitals: Corporate Office Assessment, IT Assessment, and a variety of other services that are provided centrally. Corporate Office Assessment covers the cost of the system office which provides a variety of services that are necessary to run the system. It also provides various services that are facility-oriented. The IT Assessment covers the cost of the enterprise data center and the cost of supporting all computer systems applications and help desk. Costs for these two assessments are allocated among DH facilities based on the relative size of their operating expense bases. Various other services that are provided centrally are centralized billing office, management reporting, accounts payable, payroll, reimbursement, decision support, managed care and the CDM. These costs are allocated based upon usage.

* Corporate office computes management fees at 2.25% of net revenues.

* The County's Indirect Cost Allocation Plan uses a double-apportionment method to allocate centralized county government service costs to the various county departments.

N/A

* See **UHS** section above.

* See **Dignity Health** section above

* Actual home office expenses are allocated to subsidiaries based on the relationship of budgeted subsidiary revenue to the combined budgeted revenue for all subsidiaries.

* Based on information included in the Nevada Hospital Reporting from NHA.

(1) UMC has an Indirect Cost Allocation Plan but per the NRS was not subject to a Compliance Audit

Financial & Utilization Data available in CHIA

Acute Hospitals

Financial Reports:

Section A: Revenue And Expenses

- A01: Revenue And Expenses Totals
- A02: Inpatient Operating Revenue
- A03: Outpatient Operating Revenue
- A04: LTC Operating Revenue
- A05: Clinic Operating Revenue
- A06: Sub-Acute Operating Revenue
- A07: Operating Expenses
- A08: Non-Operating Revenue And Expenses

Section B: Assets And Liabilities

- B01: Assets And Liabilities Totals
- B02: Current Assets
- B03: Property, Facilities, Equipment Assets
- B04: Intangible And Other Assets
- B05: Liabilities

Acute Hospitals

Utilization Reports:

Section A: Admissions, Days, Beds

- A01: Admissions By Payer
- A02: Days By Payer
- A03: Admissions By Service
- A04: Inpatient Days By Service
- A05: Licensed Beds By Service

Section B: Surgeries And Procedures

- B01: Inpatient Surgeries
- B02: Inpatient Procedures
- B03: Inpatient Surgeries And Procedures - Patients And Hours
- B04: Outpatient Surgeries
- B05: Outpatient Procedures
- B06: Outpatient Surgeries And Procedures - Patients And Hours

Section C: Imaging

- C01: CT Tests And MRI Tests

Section D: Other Services

- D01: Other Services
 - ER Visits
 - Cardiac Catheterizations
 - Dialysis Patients
 - Dialysis Treatments
 - Lithotripsies

Section E: FTEs

- E01: FTEs

Section F: Services Inventory

- F01: Services Inventory
- F02: Other Services Inventory

Financial & Utilization Data available in CHIA

Non-Acute Hospitals

Financial Reports:

Section A: Revenue And Expenses

- A01: Revenue And Expenses Totals
- A02: Inpatient Operating Revenue
- A03: Outpatient Operating Revenue
- A04: LTC Operating Revenue
- A05: Clinic Operating Revenue
- A06: Sub-Acute Operating Revenue
- A07: Operating Expenses
- A08: Non-Operating Revenue And Expenses

Section B: Assets And Liabilities

- B01: Assets And Liabilities Totals
- B02: Current Assets
- B03: Property, Facilities, Equipment Assets
- B04: Intangible And Other Assets
- B05: Liabilities

Non-Acute Hospitals

Utilization Reports:

Section A: Admissions, Days, Beds

- A01: Admissions By Payer
- A02: Days By Payer
- A03: Admissions By Service
- A04: Inpatient Days By Service
- A05: Licensed Beds By Service

Section B: Surgeries And Procedures

- B01: Inpatient Surgeries
- B02: Inpatient Procedures
- B03: Inpatient Surgeries And Procedures - Patients And Hours
- B04: Outpatient Surgeries
- B05: Outpatient Procedures
- B06: Outpatient Surgeries And Procedures - Patients And Hours

Section C: Imaging

- C01: CT Tests And MRI Tests

Section D: Other Services

- D01: Other Services
 - ER Visits
 - Cardiac Catheterizations
 - Dialysis Patients
 - Dialysis Treatments
 - Lithotripsies

Section E: FTEs

- E01: FTEs

Section F: Services Inventory

- F01: Services Inventory
- F02: Other Services Inventory

Financial & Utilization Data available in CHIA

Other Facilities

Utilization Reports:

Ambulatory Surgery Facilities

Section A: Surgeries And Procedures

A01: AmbSurg Outpatient Surgeries

A02: AmbSurg Outpatient Procedures

A03: AmbSurg Outpatient Surgeries And Procedures - Patients & Hours

Imaging Facilities

Section B: CT And MRI

B01: Imaging CT Scans And MRI Scans

Skilled Nursing Facilities / Intermediate Care Facilities

Section C: Days, Discharges, Beds

C01: SNF Inpatient Days

C02: SNF Discharges

C03: SNF Beds

Hospice Facilities

Section D: Hospice Overview

D01: Hospice Overview

Section E: Patient Census

E01: Patients By Gender And Race

E02: Patients By County

E03: Patients By Referral Source

E04: Patients By Primary Diagnosis

Section F: Days Of Care By Payer

F01: Total Days Of Care By Payer (Does not include Nursing Home Room & Board Days)

F02: Routine Home Care Days By Payer (Private Residence)

F03: Routine Home Care Days By Payer (Nursing Home)

F04: Acute Inpatient Days By Payer

F05: Inpatient Respite Days By Payer

F06: Continuous Care Days By Payer

F07: Nursing Home Room And Board Days By Payer

Section G: Discharges

G01: Discharges

STATEWIDE ACUTE CARE HOSPITAL TOTALS										
FOR THE YEARS ENDED										
COMPARATIVE FINANCIAL SUMMARY	12/31/2008		12/31/2009		12/31/2010		12/31/2011		12/31/2012	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
BILLED CHARGES	\$16,604,319,875	100.00%	\$18,174,002,661	100.00%	\$19,809,322,348	100.00%	\$21,767,832,917	100.00%	\$23,201,421,245	100.00%
Inpatient	\$11,954,163,770		\$12,768,032,220		\$13,714,120,941		\$14,700,763,848		\$15,425,571,119	
Outpatient	\$4,650,156,105		\$5,405,970,441		\$6,095,201,407		\$7,067,069,069		\$7,775,850,126	
TOTAL DEDUCTIONS	\$12,648,206,934	76.17%	\$14,221,166,738	78.25%	\$15,765,778,625	79.59%	\$17,567,575,900	80.70%	\$18,800,589,758	81.03%
Inpatient	\$9,448,119,882		\$10,439,868,640		\$11,279,662,045		\$12,211,472,251		\$12,680,636,435	
Outpatient	\$3,200,087,052		\$3,781,298,098		\$4,486,116,580		\$5,356,103,649		\$6,119,953,323	
OPERATING REVENUE	\$3,956,112,941	23.83%	\$3,952,835,923	21.75%	\$4,043,543,723	20.41%	\$4,200,257,017	19.30%	\$4,400,831,487	18.97%
Inpatient	\$2,506,043,888		\$2,328,163,580		\$2,434,458,896		\$2,489,291,597		\$2,744,934,684	
Outpatient	\$1,450,069,053		\$1,624,672,343		\$1,609,084,827		\$1,710,965,420		\$1,655,896,803	
OTHER OPERATING REVENUE	\$97,479,359	2.40%	\$156,882,774	3.82%	\$154,135,794	3.65%	\$161,046,257	3.70%	\$168,115,358	0.72%
TOTAL OPERATING REVENUE	\$4,053,592,300	100.00%	\$4,109,718,697	100.00%	\$4,190,369,446	100.00%	\$4,353,528,224	100.00%	\$4,568,946,845	100.00%
OPERATING EXPENSES	\$4,170,227,194	102.88%	\$4,217,256,133	102.62%	\$4,298,289,263	102.42%	\$4,406,349,275	101.21%	\$4,512,708,747	98.77%
NET OPERATING INCOME	(\$60,363,844)	(1.49%)	(\$107,645,712)	-2.62%	(\$100,345,014)	(2.42%)	(\$44,800,368)	(1.03%)	\$56,238,098	1.23%
Non-operating Revenue	\$82,838,716	2.04%	\$139,480,554	3.39%	\$108,183,249	2.58%	\$122,212,255	2.81%	\$143,214,363	3.13%
Non-operating Expense	\$55,876,783	1.38%	\$33,731,399	0.82%	\$56,813,057	1.35%	\$80,708,598	1.85%	\$67,509,239	1.48%
NET INCOME (LOSS)	(\$33,401,911)	(0.81%)	(\$189,657)	(0.04%)	(\$48,974,822)	(1.17%)	(\$3,296,711)	(0.07%)	\$131,943,222	2.80%

INPATIENT DAYS	1,226,512	1,222,242	1,197,670	1,205,368	1,197,771
ADMISSIONS	260,300	261,615	259,302	252,255	247,527
AVG. LENGTH OF STAY	4.7	4.7	4.6	4.8	4.8
AVG. DAILY CENSUS	3,360.3	3,348.6	3,281.3	3,302.4	3,281.6
OCCUPANCY PERCENTAGE	61.29%	61.32%	57.42%	57.93%	57.02%
Adjusted I/P Days	1,713,625	1,754,756	1,743,432	1,798,027	1,814,607
Adjusted Admissions	363,679	375,597	377,462	376,284	375,000
PER ADJUSTED ADMISSION					
Billed Charges + Other Operating Rev	\$45,925	\$48,805	\$52,889	\$58,277	\$62,319
Total Operating Revenue	\$11,146	\$10,942	\$11,101	\$11,570	\$12,184
Operating Expenses	\$11,467	\$11,228	\$11,387	\$11,710	\$12,034
Net Operating Income	(\$321)	(\$287)	(\$286)	(\$140)	\$150
PER ADJUSTED INPATIENT DAY					
Billed Charges + Other Operating Rev	\$9,746	\$10,446	\$11,451	\$12,196	\$12,879
Total Operating Revenue	\$2,366	\$2,342	\$2,404	\$2,421	\$2,518
Operating Expenses	\$2,434	\$2,403	\$2,465	\$2,451	\$2,487
Net Operating Income	(\$68)	(\$61)	(\$61)	(\$30)	\$31

* Percentages reflect the Vertical Analyses (Common Size Statements) discussed in the Narrative

CLARK COUNTY ACUTE CARE HOSPITAL TOTALS

FOR THE YEARS ENDED

COMPARATIVE FINANCIAL SUMMARY	12/31/2008		12/31/2009		12/31/2010		12/31/2011		12/31/2012	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
BILLED CHARGES	\$12,794,314,912	100.00%	\$13,913,465,233	100.00%	\$15,236,549,894	100.00%	\$16,770,353,657	100.00%	\$18,033,059,321	100.00%
Inpatient	\$9,725,345,986		\$10,383,856,135		\$11,169,595,140		\$12,038,507,080		\$12,678,051,105	
Outpatient	\$3,068,968,926		\$3,529,609,098		\$4,066,954,754		\$4,731,846,577		\$5,355,008,216	
TOTAL DEDUCTIONS	\$10,074,496,103	78.74%	\$11,217,759,546	80.63%	\$12,479,426,270	81.90%	\$13,914,894,840	82.97%	\$14,975,821,081	83.05%
Inpatient	\$7,875,674,142		\$8,722,328,920		\$9,400,474,014		\$10,162,263,886		\$10,644,908,127	
Outpatient	\$2,198,821,961		\$2,495,430,626		\$3,078,952,256		\$3,752,630,954		\$4,330,912,954	
OPERATING REVENUE	\$2,719,818,809	21.26%	\$2,695,705,687	19.37%	\$2,757,123,624	18.10%	\$2,855,458,817	17.03%	\$3,057,238,240	16.95%
Inpatient	\$1,849,671,844		\$1,661,527,215		\$1,769,121,126		\$1,876,243,194		\$2,033,142,978	
Outpatient	\$870,146,965		\$1,034,178,472		\$988,002,498		\$979,215,623		\$1,024,095,262	
OTHER OPERATING REVENUE	\$41,175,378	1.49%	\$77,344,026	2.79%	\$78,233,924	2.76%	\$79,476,987	2.71%	\$80,576,818	2.57%
TOTAL OPERATING REVENUE	\$2,760,994,187	100.00%	\$2,773,049,713	100.00%	\$2,835,357,548	100.00%	\$2,934,935,804	100.00%	\$3,137,815,058	100.00%
OPERATING EXPENSES	\$2,866,728,277	103.83%	\$2,870,373,955	103.51%	\$2,932,436,545	103.42%	\$2,999,382,024	102.20%	\$3,047,921,567	97.14%
NET OPERATING INCOME	(\$70,371,123)	(2.55%)	(\$97,324,242)	-3.51%	-\$97,078,997	(3.42%)	(\$64,446,220)	(2.20%)	\$89,893,491	2.86%
Non-operating Revenue	\$52,502,573	1.90%	\$79,281,419	2.86%	\$54,673,685	1.93%	\$85,302,760	2.91%	\$25,966,512	0.83%
Non-operating Expense	\$15,763,299	0.57%	\$23,356,519	0.84%	\$28,178,351	0.99%	\$30,348,890	1.03%	\$15,673,718	0.50%
NET INCOME (LOSS)	(\$33,631,849)	(1.20%)	(\$41,399,342)	(1.45%)	-\$70,583,663	(2.44%)	(\$9,492,350)	(0.31%)	\$100,186,285	3.17%
INPATIENT DAYS	941,240		921,617		890,174		897,711		889,123	
ADMISSIONS	196,245		194,414		190,024		183,637		178,252	
AVG. LENGTH OF STAY	4.8		4.7		4.7		4.9		5.0	
AVG. DAILY CENSUS	2,571.7		2,525.0		2,438.8		2,459.5		2,436.0	
OCCUPANCY PERCENTAGE	70.45%		70.06%		63.38%		64.62%		65.03%	
Adjusted I/P Days	1,242,246		1,241,751		1,220,530		1,256,491		1,270,325	
Adjusted Admissions	259,004		261,946		260,544		257,030		254,676	
PER ADJUSTED ADMISSION										
Billed Charges + Other Operating Rev	\$49,557		\$53,411		\$58,780		\$65,556		\$71,124	
Total Operating Revenue	\$10,660		\$10,586		\$10,882		\$11,419		\$12,321	
Operating Expenses	\$11,068		\$10,958		\$11,255		\$11,669		\$11,968	
Net Operating Revenue	(\$408)		(\$372)		(\$373)		(\$251)		\$353	
PER ADJUSTED INPATIENT DAY										
Billed Charges + Other Operating Rev	\$10,332		\$11,267		\$12,548		\$13,410		\$14,259	
Total Operating Revenue	\$2,223		\$2,233		\$2,323		\$2,336		\$2,470	
Operating Expenses	\$2,308		\$2,312		\$2,403		\$2,387		\$2,399	
Net Operating Income	(\$85)		(\$78)		(\$80)		(\$51)		\$71	

* Percentages reflect the Vertical Analyses (Common Size Statements) discussed in the Narrative

WASHOE COUNTY/CARSON CITY ACUTE CARE HOSPITAL TOTALS

FOR THE YEARS ENDED

COMPARATIVE FINANCIAL SUMMARY	12/31/2008		12/31/2009		12/31/2010		12/31/2011		12/31/2012	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
	BILLED CHARGES	\$3,299,440,693	100.00%	\$3,662,665,980	100.00%	\$3,931,689,648	100.00%	\$4,303,703,545	100.00%	\$4,450,238,994
Inpatient	\$2,059,079,286		\$2,184,570,822		\$2,333,347,639		\$2,441,567,217		\$2,537,719,148	
Outpatient	\$1,240,361,407		\$1,478,095,158		\$1,598,342,009		\$1,862,136,328		\$1,912,519,846	
TOTAL DEDUCTIONS	\$2,316,428,604	70.21%	\$2,675,727,753	73.05%	\$2,935,917,680	74.67%	\$3,255,458,986	75.64%	\$3,413,970,975	76.71%
Inpatient	\$1,491,469,493		\$1,611,406,764		\$1,769,141,348		\$1,929,881,600		\$1,923,233,721	
Outpatient	\$824,959,111		\$1,064,320,989		\$1,166,776,332		\$1,325,577,386		\$1,490,737,254	
OPERATING REVENUE	\$983,012,089	29.79%	\$986,938,227	26.95%	\$995,771,968	25.33%	\$1,048,244,559	24.36%	\$1,036,268,019	23.29%
Inpatient	\$567,609,793		\$573,164,058		\$564,206,291		\$511,685,617		\$614,485,427	
Outpatient	\$415,402,296		\$413,774,169		\$431,565,677		\$536,558,942		\$421,782,592	
OTHER OPERATING REVENUE	\$12,079,042	1.21%	\$32,773,779		\$35,337,268		\$39,430,950		\$35,110,142	
TOTAL OPERATING REVENUE	\$995,091,131	100.00%	\$1,019,712,006	100.00%	\$1,031,109,236	100.00%	\$1,087,675,509	100.00%	\$1,071,378,161	100.00%
OPERATING EXPENSES	\$1,028,794,426	103.39%	\$1,052,537,155	103.22%	\$1,061,839,300	102.98%	\$1,102,768,024	101.39%	\$1,155,432,141	107.85%
NET OPERATING INCOME	(\$14,608,719)	(1.47%)	(\$32,933,425)	-3.23%	(\$30,730,064)	(2.98%)	(\$15,092,515)	(1.39%)	(\$84,053,980)	-7.85%
Non-operating Revenue	\$14,665,133	1.47%	\$42,148,970	4.13%	\$31,881,021	3.09%	\$9,655,199	0.89%	\$89,670,037	8.37%
Non-operating Expense	\$39,957,719	4.02%	\$9,324,378	0.91%	\$28,132,489	2.73%	\$50,018,341	4.60%	\$51,443,832	4.80%
NET INCOME (LOSS)	(\$39,901,305)	(3.95%)	(\$108,833)	(0.01%)	(\$26,981,532)	(2.54%)	(\$55,455,657)	(5.05%)	(\$45,827,775)	(3.95%)

INPATIENT DAYS	261,446	268,583	272,247	271,659	271,864
ADMISSIONS	56,402	56,458	57,343	57,096	58,655
AVG. LENGTH OF STAY	4.6	4.8	4.7	4.8	4.6
AVG. DAILY CENSUS	714.4	735.8	745.9	744.3	744.8
OCCUPANCY PERCENTAGE	46.06%	47.44%	48.09%	47.38%	47.41%
Adjusted I/P Days	420,471	454,337	462,859	483,235	480,512
Adjusted Admissions	90,709	95,505	97,491	101,564	103,671
PER ADJUSTED ADMISSION					
Billed Charges + Other Operating Rev	\$36,507	\$38,694	\$40,691	\$42,762	\$43,265
Total Operating Revenue	\$10,970	\$10,677	\$10,576	\$10,709	\$10,334
Operating Expenses	\$11,342	\$11,021	\$10,892	\$10,858	\$11,145
Net Operating Revenue	(\$372)	(\$344)	(\$315)	(\$149)	
PER ADJUSTED INPATIENT DAY					
Billed Charges + Other Operating Rev	\$7,876	\$8,134	\$8,571	\$8,988	\$9,335
Total Operating Revenue	\$2,367	\$2,244	\$2,228	\$2,251	\$2,230
Operating Expenses	\$2,447	\$2,317	\$2,294	\$2,282	\$2,405
Net Operating Revenue	(\$80)	(\$72)	(\$66)	(\$31)	(\$175)

* Percentages reflect the Vertical Analyses (Common Size Statements) discussed in the Narrative

RURAL ACUTE CARE HOSPITAL TOTALS

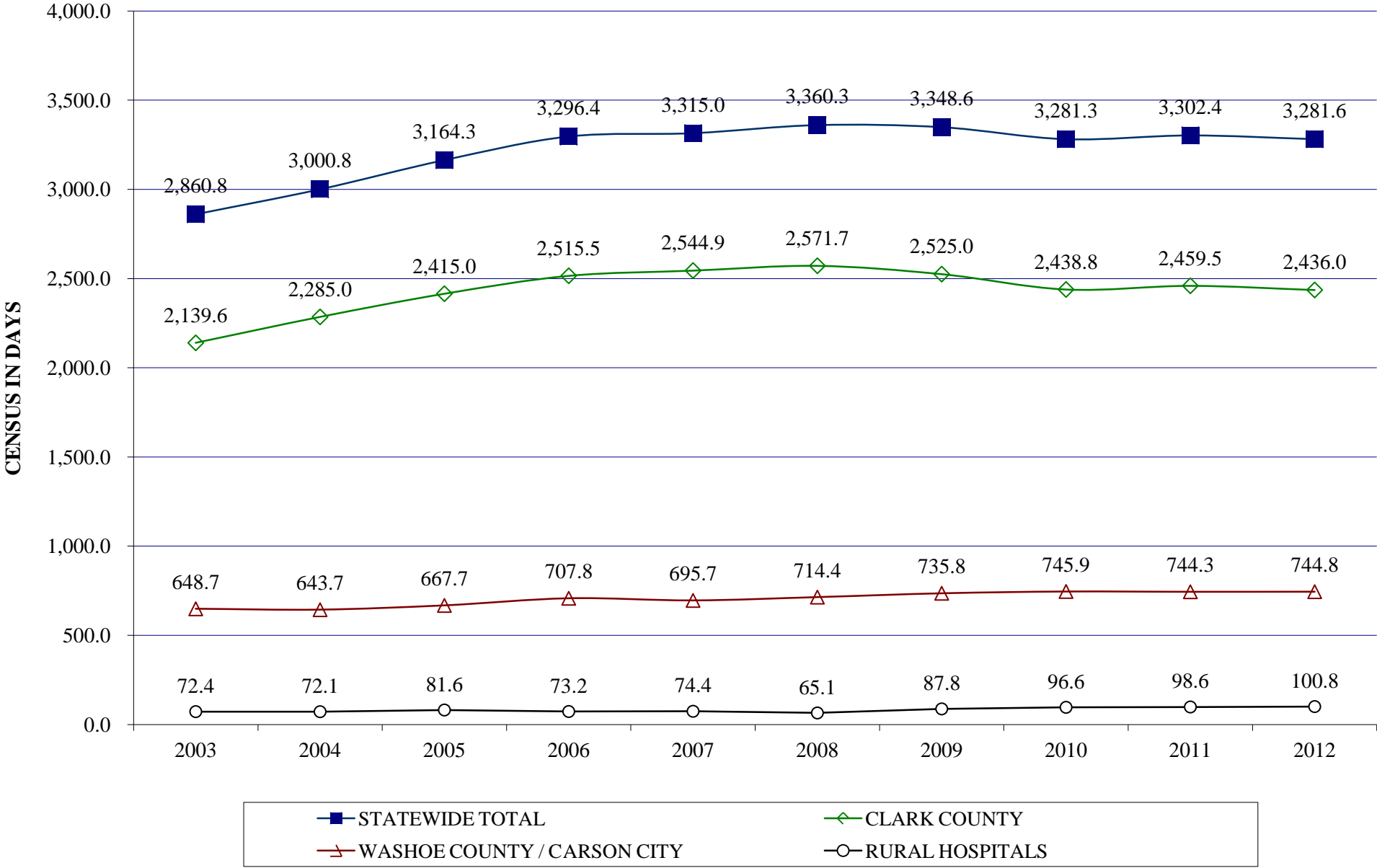
FOR THE YEARS ENDED

COMPARATIVE FINANCIAL SUMMARY	12/31/2008		12/31/2009		12/31/2010		12/31/2011		12/31/2012	
	Amount	% *	Amount	% *	Amount	% *	Amount	% *	Amount	% *
	BILLED CHARGES	\$510,564,270	100.00%	\$597,871,448	100.00%	\$641,082,806	100.00%	\$693,775,715	100.00%	\$718,122,930
Inpatient	\$169,738,498		\$199,605,263		\$211,178,162		\$220,689,551		\$209,800,866	
Outpatient	\$340,825,772		\$398,266,185		\$429,904,644		\$473,086,164		\$508,322,064	
TOTAL DEDUCTIONS	\$257,282,227	50.39%	\$327,679,439	54.81%	\$350,434,675	54.65%	\$397,222,074	57.26%	\$410,797,702	57.20%
Inpatient	\$80,976,247		\$106,132,956		\$110,046,683		\$119,326,765		\$112,494,587	
Outpatient	\$176,305,980		\$221,546,483		\$240,387,992		\$277,895,309		\$298,303,115	
OPERATING REVENUE	\$253,282,043	49.61%	\$270,192,009	45.19%	\$290,648,131	45.35%	\$296,553,641	42.74%	\$307,325,228	42.80%
Inpatient	\$88,762,251		\$93,472,307		\$101,131,479		\$101,362,786		\$97,306,279	
Outpatient	\$164,519,792		\$176,719,702		\$189,516,652		\$195,190,855		\$210,018,949	
OTHER OPERATING REVENUE	\$44,224,939	14.87%	\$46,764,969	14.75%	\$40,564,602	11.94%	\$42,138,320	12.73%	\$52,428,398	14.57%
TOTAL OPERATING REVENUE	\$297,506,982	100.00%	\$316,956,978	100.00%	\$323,902,662	100.00%	\$330,916,911	100.00%	\$359,753,626	100.00%
OPERATING EXPENSES	\$274,704,491	92.34%	\$294,345,023	92.87%	\$304,013,418	92.05%	\$304,199,227	91.93%	\$309,355,039	85.99%
NET OPERATING INCOME	\$24,615,998	8.27%	\$22,611,955	7.13%	\$27,464,047	7.95%	\$34,738,367	10.50%	\$50,398,587	14.01%
Non-operating Revenue	\$15,671,010	5.27%	\$18,050,165	5.69%	\$21,628,543	6.55%	\$27,254,296	8.24%	\$27,577,814	7.67%
Non-operating Expense	\$155,765	0.05%	\$1,050,502	0.33%	\$502,217	0.15%	\$341,367	0.10%	\$391,689	0.11%
NET INCOME (LOSS)	\$40,131,243	12.81%	\$39,611,618	11.82%	\$48,590,373	13.47%	\$61,651,296	17.21%	\$77,584,712	20.03%

INPATIENT DAYS	23,826	32,042	35,249	35,998	36,784
ADMISSIONS	7,653	10,743	11,935	11,522	10,620
AVG. LENGTH OF STAY	3.1	3.0	2.9	3.1	3.5
AVG. DAILY CENSUS	65.1	87.8	96.6	98.6	100.8
OCCUPANCY PERCENTAGE	24.48%	28.73%	30.57%	30.49%	23.01%
Adjusted I/P Days	77,875	103,481	113,778	120,039	135,099
Adjusted Admissions	25,014	34,695	38,524	38,421	39,005
PER ADJUSTED ADMISSION					
Billed Charges + Other Operating Rev	\$22,179	\$18,580	\$17,694	\$19,154	\$19,755
Total Operating Revenue	\$11,894	\$9,135	\$8,408	\$8,613	\$9,223
Operating Expenses	\$10,982	\$8,484	\$7,891	\$7,917	\$7,931
Net Operating Revenue	\$912	\$652	\$516	\$695	
PER ADJUSTED INPATIENT DAY					
Billed Charges + Other Operating Rev	\$7,124	\$6,229	\$5,991	\$6,131	\$5,704
Total Operating Revenue	\$3,820	\$3,063	\$2,847	\$2,757	\$2,663
Operating Expenses	\$3,527	\$2,844	\$2,672	\$2,534	\$2,290
Net Operating Revenue	\$293	\$219	\$175	\$223	\$373

* Percentages reflect the Vertical Analyses (Common Size Statements) discussed in the Narrative

NEVADA ACUTE CARE HOSPITALS AVERAGE DAILY CENSUS

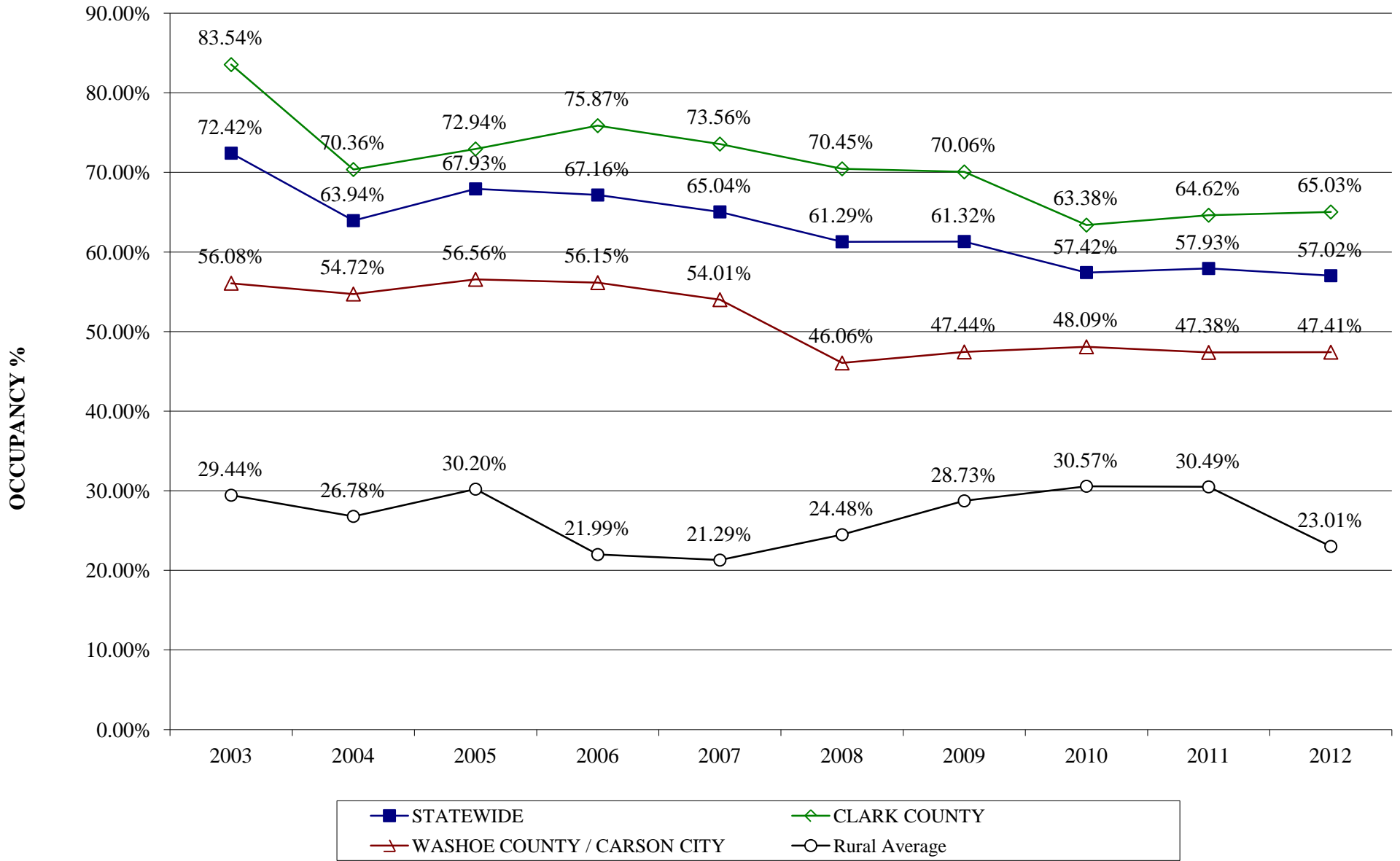


NEVADA ACUTE CARE HOSPITALS
AVERAGE DAILY CENSUS
CALENDAR YEARS 2003 THROUGH 2012

FACILITY NAME	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
STATEWIDE TOTAL	2,860.8	3,000.8	3,164.3	3,296.4	3,315.0	3,360.3	3,348.6	3,281.3	3,302.4	3,281.6
CLARK COUNTY										
Centennial Hills Hospital						53.1	91.8	97.7	97.0	87.7
Desert Springs Hospital	163.8	166.1	175.9	182.2	186.0	181.8	170.0	141.6	130.7	154.3
Mountain View Hospital	187.5	188.4	196.2	203.6	181.5	186.8	191.7	193.5	198.9	218.5
North Vista Hospital	112.8	102.2	108.2	117.0	129.2	121.7	114.8	103.9	122.1	125.8
Southern Hills Hospital & Medical Center		47.1	68.6	70.3	69.5	69.5	76.7	64.2	68.1	82.0
Spring Valley Hospital Medical Center	48.1	80.4	104.1	134.7	152.8	165.0	169.5	169.3	171.3	169.0
St. Rose Dominican - Rose de Lima Campus	103.6	96.2	97.9	97.7	97.3	101.8	94.4	89.3	88.7	88.7
St. Rose Dominican - San Martin Campus				4.1	56.2	89.4	94.2	93.1	94.9	93.0
St. Rose Dominican - Siena Campus	167.6	180.6	188.3	190.4	190.7	197.1	195.1	199.4	198.3	185.2
Summerlin Hospital Medical Center	167.3	183.0	231.3	249.1	259.5	247.2	245.7	251.0	263.6	237.0
Sunrise Hospital & Medical Center	506.7	509.5	521.7	530.5	484.3	467.3	444.8	423.4	431.5	418.8
University Medical Center	431.7	451.7	469.1	459.3	451.7	419.3	383.8	372.3	369.8	82.0
Valley Hospital Medical Center	250.5	279.8	253.8	267.1	277.0	271.9	252.6	240.3	222.3	216.9
Total Clark County	2,139.6	2,285.0	2,415.0	2,515.5	2,544.9	2,571.7	2,525.0	2,438.8	2,459.5	2,436.0
WASHOE COUNTY / CARSON CITY										
Carson Tahoe Regional Medical Center	85.0	78.2	88.0	113.4	105.4	106.5	110.6	117.3	123.2	119.0
Northern Nevada Medical Center	53.6	47.4	41.7	45.3	51.1	46.1	46.4	52.6	51.9	50.5
Renown Medical Center	330.5	336.5	352.6	349.4	345.3	374.6	387.0	388.6	396.4	399.2
Renown Medical Center - South Meadows		8.8	18.4	28.9	32.2	34.7	27.6	27.7	24.4	26.4
Saint Mary's Regional Medical Center	179.6	172.8	167.0	165.1	156.2	146.0	158.2	153.5	142.6	145.6
Sierra Surgery Hospital				5.5	5.3	6.5	6.0	6.1	5.8	4.1
Total Washoe County / Carson City	648.7	643.7	667.7	707.8	695.7	714.4	735.8	745.9	744.3	744.8
RURAL HOSPITALS										
Banner Churchill Community Hospital	15.3	16.6	18.0	15.9	17.6	17.7	19.0	18.3	19.1	20.3
Battle Mountain General Hospital	0.7	0.4	0.5	0.4	0.5	0.8	0.3	0.3	0.3	0.4
Boulder City Hospital	11.1	9.6	9.8	9.7	9.1	8.0	6.4	5.1	5.1	12.1
Carson Valley Medical Center		3.5	6.3	7.1	7.3	7.9	7.7	7.7	7.5	6.4
Desert View Regional Medical Center						2.3	9.7	15.6	14.3	13.2
Grover C. Dils Medical Center	1.5	1.2	1.1	1.4	1.3	1.1	1.1	1.3	1.2	1.6
Humboldt General Hospital	3.8	4.0	5.7	4.0	6.8	0.0	6.0	5.7	8.9	7.0
Incline Village Community Hospital	0.3	0.2	0.3	0.2	0.2	0.2	0.1	0.0	0.1	0.0
Mesa View Regional Hospital		4.8	6.2	6.7	6.0	7.8	9.1	9.6	8.2	6.6
Mount Grant General Hospital	2.0	2.9	2.9	2.6	2.8	3.9	4.6	5.6	5.9	5.0
Northeastern Nevada Regional Hospital	23.2	18.0	19.6	21.9	18.5	4.7	13.1	17.4	18.3	19.8
Nye Regional Medical Center	2.9	2.2	1.9	1.6	1.2	0.2	1.0	1.2	1.3	1.1
Pershing General Hospital	2.7	1.1	1.3	2.7	3.4	3.1	2.0	1.2	0.9	0.6
South Lyon Medical Center	3.2	2.8	3.0	2.9	2.0	1.9	1.8	2.1	1.3	1.5
William B. Ririe Hospital	5.7	4.7	5.0	5.9	7.0	5.4	5.8	5.8	6.1	5.2
Total Rural Hospitals	72.4	72.1	81.6	73.2	74.4	65.1	87.8	96.6	98.6	100.8

Source: Data from CHIA website; Nevada Hospital Utilization Report, All Beds

NEVADA ACUTE CARE HOSPITALS OCCUPANCY PERCENTAGES

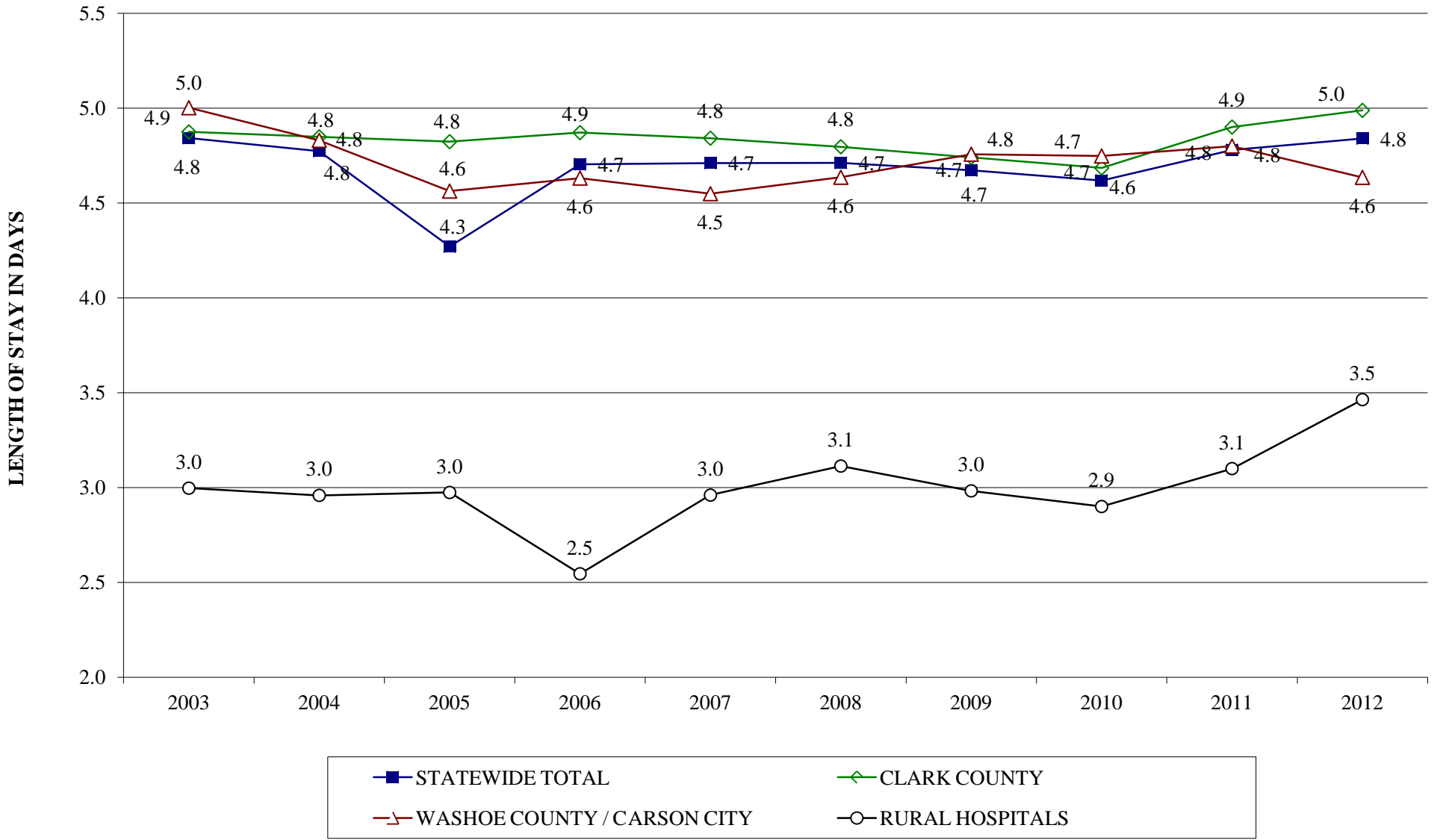


**NEVADA ACUTE CARE HOSPITALS
OCCUPANCY PERCENTAGES
CALENDAR YEARS 2003 THROUGH 2012**

FACILITY NAME	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
STATEWIDE	72.42%	63.94%	67.93%	67.16%	65.04%	61.29%	61.32%	57.42%	57.93%	57.02%
CLARK COUNTY										
Centennial Hills						33.72%	53.67%	57.11%	56.74%	51.27%
Desert Springs Hospital	47.33%	52.60%	61.50%	63.71%	65.03%	63.55%	59.44%	49.51%	44.60%	52.67%
MountainView Hospital	94.22%	94.69%	86.75%	86.63%	77.23%	79.50%	108.26%	82.34%	84.65%	86.36%
North Vista Hospital	56.94%	51.62%	54.65%	62.15%	69.84%	65.77%	64.51%	59.36%	68.98%	71.06%
Southern Hills Hospital & Medical Center	28.31%	36.27%	49.36%	50.55%	50.02%	50.00%	55.15%	46.17%	49.02%	61.21%
Spring Valley Hospital Medical Center		46.07%	59.15%	64.15%	72.74%	78.55%	78.71%	73.30%	74.17%	71.29%
St. Rose Dominican - Rose de Lima Campus	75.06%	69.69%	70.92%	70.77%	68.77%	70.20%	65.10%	61.57%	70.42%	74.53%
St. Rose Dominican - San Martin Campus				24.70%	41.11%	60.84%	64.10%	63.30%	64.58%	63.29%
St. Rose Dominican - Siena Campus	78.31%	84.41%	87.97%	88.95%	89.10%	89.98%	89.11%	91.07%	90.57%	84.56%
Summerlin Hospital Medical Center	84.08%	80.32%	84.41%	117.65%	111.21%	87.96%	87.42%	55.16%	58.05%	52.21%
Sunrise Hospital & Medical Center	73.50%	72.68%	74.41%	75.89%	69.09%	66.66%	63.48%	60.48%	61.64%	60.69%
University Medical Center	72.28%	83.12%	85.10%	82.91%	81.54%	77.50%	70.94%	68.82%	68.36%	66.36%
Valley Hospital Medical Center	61.70%	68.91%	62.36%	66.11%	68.57%	67.29%	62.52%	59.47%	55.03%	67.80%
Clark County Average	83.54%	70.36%	72.94%	75.87%	73.56%	70.45%	70.06%	63.38%	64.62%	65.03%
WASHOE COUNTY / CARSON CITY										
Carson Tahoe Regional Medical Center	62.60%	59.70%	67.16%	65.93%	61.30%	61.94%	64.30%	68.22%	66.97%	64.69%
Northern Nevada Medical Center	50.76%	47.36%	41.73%	45.30%	51.08%	46.07%	46.43%	52.64%	48.05%	46.77%
Renown Regional Medical Center	62.48%	63.60%	66.10%	65.12%	64.17%	46.36%	47.90%	48.10%	49.05%	49.41%
Renown South Meadows Medical Center		24.32%	51.10%	54.57%	42.42%	45.67%	36.31%	36.43%	32.05%	34.68%
Saint Mary's Regional Medical Center	46.25%	45.46%	43.95%	43.45%	43.24%	38.42%	41.64%	40.40%	37.53%	38.32%
Sierra Surgery and Imaging LLC				36.33%	35.38%	42.97%	39.96%	40.66%	38.85%	27.29%
Washoe County / Carson City Average	56.08%	54.72%	56.56%	56.15%	54.01%	46.06%	47.44%	48.09%	47.38%	47.41%
RURAL COUNTIES										
Banner Churchill Community Hospital	38.32%	41.40%	44.92%	24.02%	43.99%	59.19%	47.38%	61.09%	47.76%	50.68%
Battle Mountain General Hospital	10.09%	6.20%	6.10%	1.95%	1.96%	11.28%	4.50%	4.11%	4.19%	5.21%
Boulder City Hospital	55.27%	48.07%	49.18%	48.62%	45.40%	40.11%	31.90%	25.66%	7.68%	19.21%
Carson Valley Medical Center		23.50%	41.66%	94.13%	31.83%	34.55%	33.69%	33.31%	32.73%	27.86%
Desert View Regional Medical Center						37.95%	159.92%	64.89%	57.25%	52.68%
Grover C. Dils Medical Center	38.32%	29.30%	28.15%	8.98%	6.70%	27.32%	28.56%	32.81%	30.82%	40.96%
Humboldt General Hospital	17.05%	18.26%	26.06%	24.03%	30.71%	0.00%	27.45%	26.11%	40.61%	31.62%
Incline Village Community Hospital	8.20%	5.94%	6.64%	5.89%	4.40%	4.10%	1.51%	0.34%	1.64%	1.03%
Mesa View Regional Hospital		19.30%	24.80%	26.82%	23.99%	31.36%	36.55%	38.30%	32.98%	26.27%
Mount Grant General Hospital	18.58%	26.30%	26.30%	23.94%	25.35%	35.82%	41.54%	50.64%	16.75%	14.37%
Northeastern Nevada Regional Hospital	30.96%	24.04%	26.11%	27.64%	24.66%	6.24%	17.40%	23.16%	24.37%	26.40%
Nye Regional Medical Center	29.13%	21.83%	19.15%	14.29%	11.81%	0.00%	13.30%	12.38%	13.48%	11.04%
Pershing General Hospital	54.57%	15.61%	18.36%	12.44%	33.52%	13.93%	9.24%	5.35%	4.21%	4.66%
South Lyon Medical Center	22.90%	20.02%	21.21%	8.87%	3.09%	13.66%	13.19%	13.44%	9.06%	2.40%
William B. Ririe Hospital	37.68%	31.09%	33.10%	23.68%	28.07%	21.61%	23.40%	23.02%	24.32%	20.82%
Rural Average	29.44%	26.78%	30.20%	21.99%	21.29%	24.48%	28.73%	30.57%	30.49%	23.01%

Source: Data from CHIA website; Nevada Hospital Utilization Report, All Beds (Table 1)

NEVADA ACUTE CARE HOSPITALS AVERAGE LENGTH OF STAY

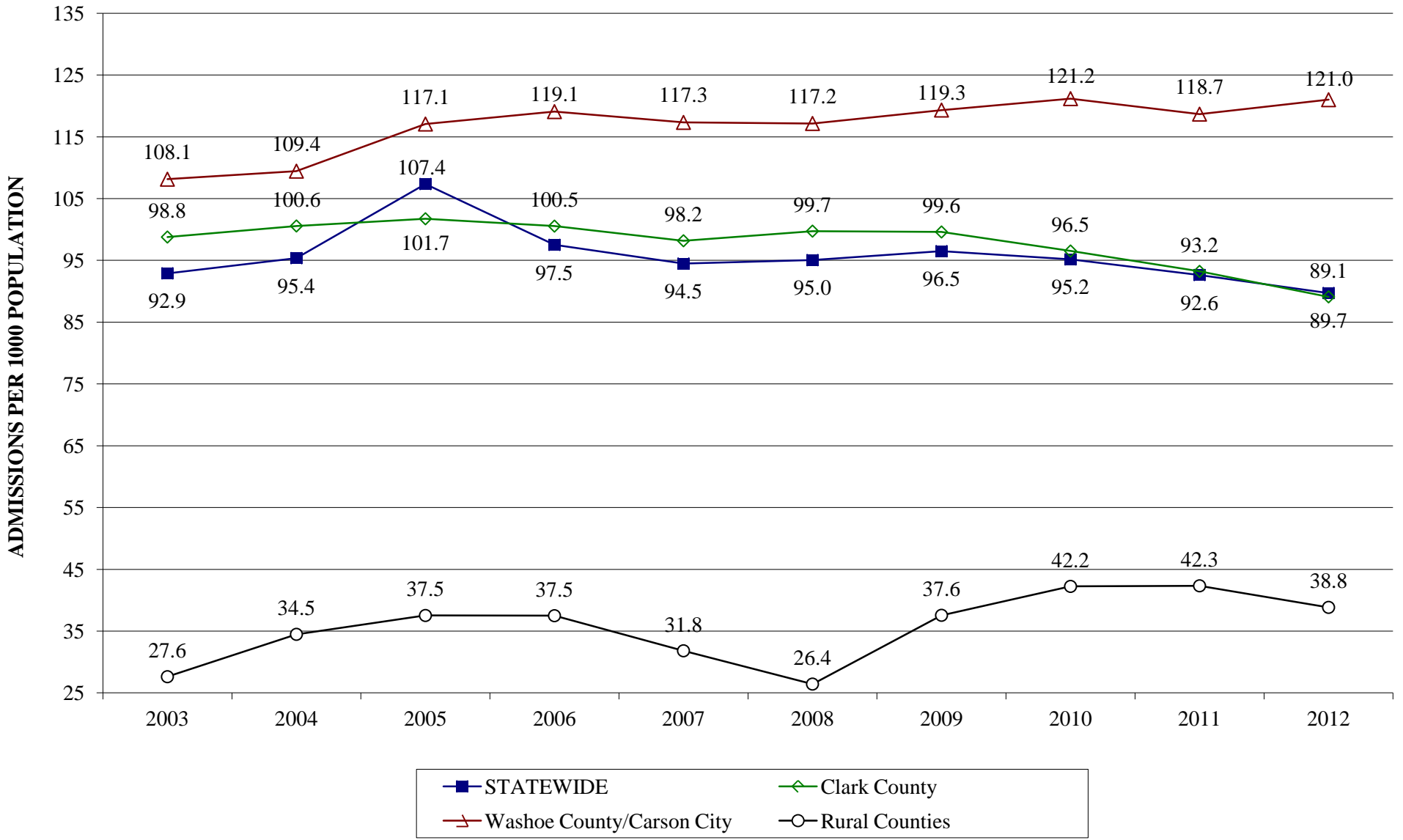


NEVADA ACUTE CARE HOSPITALS
AVERAGE LENGTH OF STAY
CALENDAR YEARS 2003 THROUGH 2012

FACILITY NAME	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
STATEWIDE TOTAL	4.8	4.8	4.3	4.7	4.7	4.7	4.7	4.6	4.8	4.8
CLARK COUNTY										
Centennial Hills						3.0	3.7	3.8	3.9	3.7
Desert Springs Hospital	4.6	4.7	4.9	5.0	5.2	5.2	5.0	4.8	4.9	5.5
MountainView Hospital	4.5	4.3	4.3	4.2	4.3	4.5	4.6	4.4	4.5	4.7
North Vista Hospital	5.1	4.9	5.2	5.0	5.6	5.4	5.6	6.9	8.2	8.6
Southern Hills Hospital & Medical Center		4.8	4.6	4.4	4.4	4.1	4.3	4.0	3.9	4.2
Spring Valley Hospital Medical Center	3.6	4.0	3.7	4.2	4.4	4.3	4.1	4.2	4.4	4.5
St. Rose Dominican - Rose de Lima Campus	4.9	4.5	4.3	4.3	4.0	4.3	4.1	4.3	4.9	5.1
St. Rose Dominican - San Martin Campus				3.5	3.6	4.1	4.1	3.9	4.0	4.3
St. Rose Dominican - Siena Campus	4.2	4.1	4.1	4.0	3.9	4.2	4.1	4.0	4.2	4.1
Sumnerlin Hospital Medical Center	5.1	4.5	4.8	4.8	4.7	4.6	4.7	4.6	4.9	5.0
Sunrise Hospital & Medical Center	5.2	5.2	5.2	5.5	5.6	5.5	5.5	5.5	5.5	5.3
University Medical Center	5.5	5.5	5.5	5.6	5.4	5.5	5.3	5.3	5.4	5.3
Valley Hospital Medical Center	4.5	5.0	4.8	4.9	4.8	4.9	4.7	4.6	5.0	5.3
Total Clark County	4.9	4.8	4.8	4.9	4.8	4.8	4.7	4.7	4.9	5.0
WASHOE COUNTY / CARSON CITY										
Carson Tahoe Regional Medical Center	3.5	3.4	3.4	4.0	3.8	4.0	4.0	4.3	4.4	4.3
Northern Nevada Medical Center	5.6	5.6	5.1	5.1	4.8	4.6	5.0	4.6	4.7	4.9
Renown Regional Medical Center	5.1	5.0	4.9	5.0	5.0	5.2	5.3	5.3	5.3	5.2
Renown South Meadows Medical Center		3.9	3.9	4.2	4.0	3.9	3.3	3.2	3.2	3.2
Saint Mary's Regional Medical Center	5.3	5.3	4.6	4.2	4.4	4.2	4.6	4.6	4.4	4.1
Sierra Surgery and Imaging LLC				2.3	2.5	2.6	2.6	2.8	2.8	2.7
Total Washoe County / Carson City	5.0	4.8	4.6	4.6	4.5	4.6	4.8	4.7	4.8	4.6
RURAL HOSPITALS										
Banner Churchill Community Hospital	3.1	3.2	3.2	1.7	2.8	3.1	3.3	3.0	3.3	3.3
Battle Mountain General Hospital	3.1	3.1	2.7	2.7	2.5	4.0	2.3	3.4	3.3	2.5
Boulder City Hospital	3.8	3.7	3.7	3.8	3.9	3.7	3.5	5.1	4.3	15.7
Carson Valley Medical Center		2.4	3.0	3.6	3.8	3.7	3.6	3.3	3.4	3.2
Desert View						2.1	2.6	2.7	3.0	3.7
Grover C. Dils Medical Center	2.6	2.8	2.8	3.2	3.4	3.1	3.3	3.9	3.8	3.4
Humboldt General Hospital	2.7	3.1	2.8	2.5	2.9	0.0	2.8	2.8	3.0	2.7
Incline Village Community Hospital	2.8	2.4	2.6	2.5	2.8	3.2	1.7	1.0	2.7	1.7
Mesa View Regional Hospital		2.5	2.4	2.4	2.7	2.7	2.5	2.7	2.7	2.7
Mount Grant General Hospital	3.1	3.2	3.1	3.6	3.7	4.0	3.4	3.4	4.0	3.9
Northeastern Nevada Regional Hospital	3.3	2.9	3.0	3.1	2.9	3.0	2.7	2.7	2.7	2.9
Nye Regional Medical Center	1.9	1.8	2.0	2.2	2.0	2.0	2.7	2.0	2.2	3.2
Pershing General Hospital	5.3	3.0	3.0	3.8	4.0	5.3	4.4	4.9	3.8	4.2
South Lyon Medical Center	3.3	2.8	2.7	2.7	2.8	2.8	3.0	3.0	3.0	3.6
William B. Ririe Hospital	3.1	2.7	2.7	2.8	3.0	2.3	2.8	3.1	3.5	2.9
Total Rural Hospitals	3.0	3.0	3.0	2.5	3.0	3.1	3.0	2.9	3.1	3.5

Source: Data from CHIA website; Nevada Hospital Utilization Report, All Beds

**NEVADA ACUTE CARE HOSPITALS
ADMISSIONS PER 1,000 POPULATION**



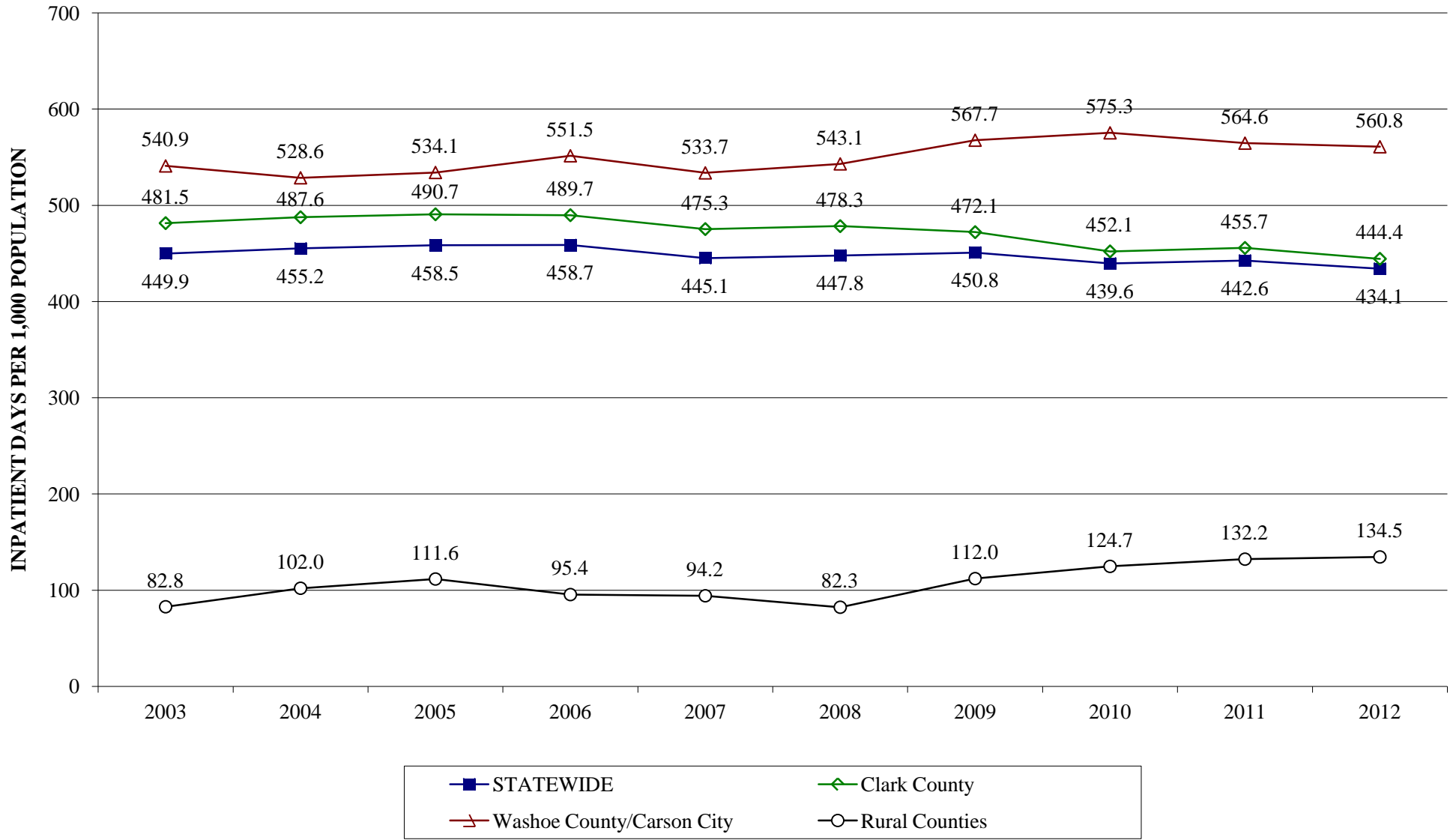
NEVADA ACUTE CARE HOSPITALS
ADMISSIONS PER 1,000 POPULATION
CALENDAR YEARS 2003 THROUGH 2012

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
NEVADA										
Admissions	213,367	229,885	270,420	255,773	256,852	260,300	261,615	259,302	252,255	247,527
Population Estimate	2,296,566	2,410,768	2,518,869	2,623,050	2,718,337	2,738,733	2,711,206	2,724,634	2,723,322	2,758,931
Admissions/1,000 Nevada	92.9	95.4	107.4	97.5	94.5	95.0	96.5	95.2	92.6	89.7
CLARK COUNTY										
Admissions	160,091	172,506	182,752	188,503	191,860	196,245	194,414	190,024	183,637	178,252
Population Estimate	1,620,748	1,715,337	1,796,380	1,874,837	1,954,319	1,967,716	1,952,040	1,968,831	1,969,975	2,000,759
Admissions/1,000 Clark County	98.8	100.6	101.7	100.5	98.2	99.7	99.6	96.5	93.2	89.1
WASHOE COUNTY / CARSON CITY										
Admissions	46,482	48,765	53,411	55,781	55,822	56,402	56,458	57,343	57,096	58,655
Population Estimate	429,844	445,596	456,253	468,448	475,784	481,433	473,138	473,229	481,149	484,746
Admissions/1,000 Washoe County / Carson City	108.1	109.4	117.1	119.1	117.3	117.2	119.3	121.2	118.7	121.0
RURAL COUNTIES										
Admissions	6,794	8,614	9,991	10,489	9,170	7,653	10,743	11,935	11,522	10,620
Population Estimate	245,974	249,835	266,236	279,765	288,234	289,584	286,028	282,574	272,198	273,426
Admissions/1,000 All Rural Counties	27.6	34.5	37.5	37.5	31.8	26.4	37.6	42.2	42.3	38.8

Source:

CHIA website; Nevada Hospital Utilization Report, All Beds
Population from U.S. Census Bureau, Population Division

NEVADA ACUTE CARE HOSPITALS INPATIENT DAYS PER 1,000 POPULATION



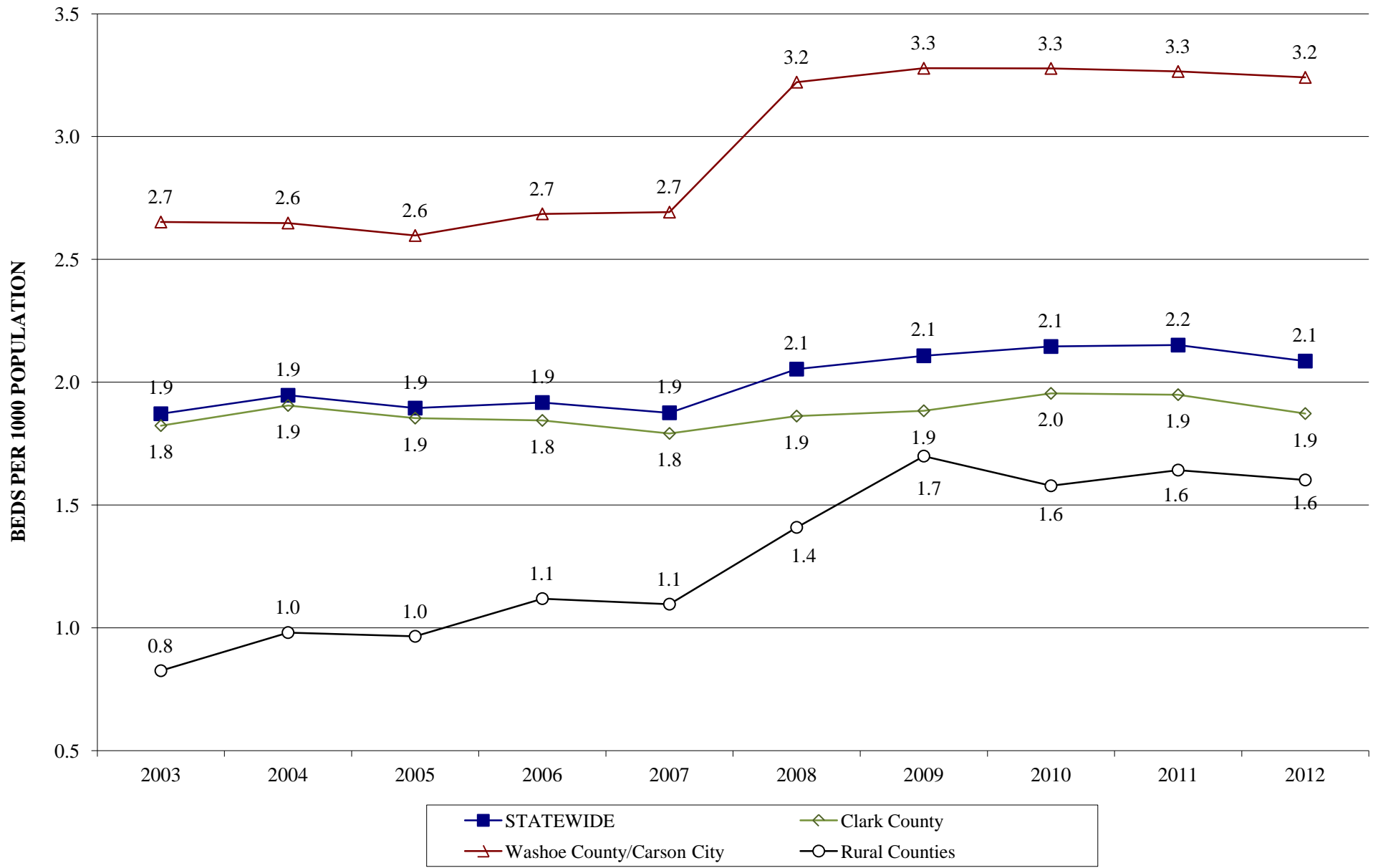
NEVADA ACUTE CARE HOSPITALS
INPATIENT DAYS PER 1,000 POPULATION
CALENDAR YEARS 2003 THROUGH 2012

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
NEVADA - STATEWIDE										
Inpatient Days	1,033,229	1,097,392	1,154,813	1,203,202	1,209,955	1,226,512	1,222,242	1,197,670	1,205,368	1,197,771
Population Estimate	2,296,566	2,410,768	2,518,869	2,623,050	2,718,337	2,738,733	2,711,206	2,724,634	2,723,322	2,758,931
Inpatient Days/1,000 Nevada	449.9	455.2	458.5	458.7	445.1	447.8	450.8	439.6	442.6	434.1
CLARK COUNTY										
Inpatient Days	780,363	836,365	881,403	918,162	928,875	941,240	921,617	890,174	897,711	889,123
Population Estimate	1,620,748	1,715,337	1,796,380	1,874,837	1,954,319	1,967,716	1,952,040	1,968,831	1,969,975	2,000,759
Inpatient Days/1,000 Clark County	481.5	487.6	490.7	489.7	475.3	478.3	472.1	452.1	455.7	444.4
WASHOE COUNTY / CARSON CITY										
Inpatient Days	232,506	235,540	243,695	258,340	253,934	261,446	268,583	272,247	271,659	271,864
Population Estimate	429,844	445,596	456,253	468,448	475,784	481,433	473,138	473,229	481,149	484,746
Inpatient Days/1,000 Washoe County / Carson City	540.9	528.6	534.1	551.5	533.7	543.1	567.7	575.3	564.6	560.8
RURAL COUNTIES										
Inpatient Days	20,360	25,487	29,715	26,700	27,146	23,826	32,042	35,249	35,998	36,784
Population Estimate	245,974	249,835	266,236	279,765	288,234	289,584	286,028	282,574	272,198	273,426
Inpatient Days/1,000 Rural Counties	82.8	102.0	111.6	95.4	94.2	82.3	112.0	124.7	132.2	134.5

Source:

CHIA website; Nevada Hospital Utilization Report, All Beds
Population from U.S. Census Bureau, Population Division

NEVADA ACUTE CARE HOSPITALS AVERAGE LICENSED BEDS PER 1,000 POPULATION



**NEVADA ACUTE CARE HOSPITALS
AVERAGE LICENSED BEDS PER 1,000 POPULATION**

CALENDAR YEARS 2003 THROUGH 2012

	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
UNITED STATES										
Beds	813,307	808,127	802,311	802,658	800,892	808,069	805,593	804,943	797,403	*
Population Estimate	290,810,000	292,892,000	295,561,000	298,363,000	301,290,000	304,060,000	308,745,538	309,326,225	311,587,816	313,914,040
Beds/1,000 U.S.	2.8	2.8	2.7	2.7	2.7	2.7	2.6	2.6	2.6	
NEVADA										
Licensed Beds	4,298	4,693	4,772	5,029	5,098	5,623	5,714	5,845	5,858	5,755
Population Estimate	2,296,566	2,410,768	2,518,869	2,623,050	2,718,337	2,738,733	2,711,206	2,724,634	2,723,322	2,758,931
Beds/1,000 Nevada	1.9	1.9	1.9	1.9	1.9	2.1	2.1	2.1	2.2	2.1
CLARK COUNTY										
Licensed Beds	2,955	3,268	3,330	3,458	3,501	3,664	3,677	3,848	3,840	3,746
Population Estimate	1,620,748	1,715,337	1,796,380	1,874,837	1,954,319	1,967,716	1,952,040	1,968,831	1,969,975	2,000,759
Beds/1,000 Clark County	1.8	1.9	1.9	1.8	1.8	1.9	1.9	2.0	1.9	1.9
WASHOE COUNTY/ CARSON CITY										
Licensed Beds	1,140	1,180	1,185	1,258	1,281	1,551	1,551	1,551	1,571	1,571
Population Estimate	429,844	445,596	456,253	468,448	475,784	481,433	473,138	473,229	481,149	484,746
Beds/1,000 Washoe County / Carson City	2.7	2.6	2.6	2.7	2.7	3.2	3.3	3.3	3.3	3.2
RURAL COUNTIES										
Licensed Beds	203	245	257	313	316	408	486	446	447	438
Population Estimate	245,974	249,835	266,236	279,765	288,234	289,584	286,028	282,574	272,198	273,426
Beds/1,000 Rural Counties	0.8	1.0	1.0	1.1	1.1	1.4	1.7	1.6	1.6	1.6

*Beds Not Available until after November 1, 2012

Source:

CHIA website; Nevada Hospital Utilization Report, All Beds

Hospital beds information from the American Hospital Association 2010 Annual Survey

Population from U.S. Census Bureau, Population Division

HOSPITAL SUMMARIES

CLARK COUNTY HOSPITALS	Centennial Hills Hospital Medical Center	Desert Springs Hospital	Mountain View Hospital	North Vista Hospital	Southern Hills Hospital & Medical Center	Spring Valley Hospital Medical Center	St. Rose Dominican Hospitals Rose de Lima Campus
Inpatient Billed Charges	\$563,912,513	\$860,429,652	\$1,257,823,708	\$350,608,394	\$410,519,319	\$1,074,540,998	\$396,737,861
Outpatient Billed Charges	\$301,610,151	\$359,773,138	\$409,413,983	\$143,036,455	\$185,060,627	\$323,836,715	\$282,454,914
Billed Charges	\$865,522,664	\$1,220,202,790	\$1,667,237,691	\$493,644,849	\$595,579,946	\$1,398,377,713	\$679,192,775
Inpatient Deductions	\$495,547,975	\$748,731,199	\$1,062,160,010	\$311,330,823	\$336,292,439	\$944,465,680	\$349,570,779
Outpatient Deductions	\$250,590,285	\$293,227,503	\$354,665,419	\$97,196,879	\$148,489,473	\$264,749,803	\$213,610,213
Deductions	\$746,138,260	\$1,041,958,702	\$1,416,825,429	\$408,527,702	\$484,781,912	\$1,209,215,483	\$563,180,992
Inpatient Operating Revenue	\$68,364,538	\$111,698,453	\$195,663,698	\$39,277,571	\$74,226,880	\$130,075,318	\$47,167,082
Outpatient Operating Revenue	\$51,019,866	\$66,545,635	\$54,748,564	\$45,839,576	\$36,571,154	\$59,086,912	\$68,844,701
Operating Revenue	\$119,384,404	\$178,244,088	\$250,412,262	\$85,117,147	\$110,798,034	\$189,162,230	\$116,011,783
Other Operating Revenue	\$87,016	\$5,452,270	\$4,232,196	\$574,296	\$489,173	\$619,636	\$1,142,263
Total Operating Revenue	\$119,471,420	\$183,696,358	\$254,644,458	\$85,691,443	\$111,287,207	\$189,781,866	\$117,154,046
Operating Expenses	\$110,226,577	\$157,180,676	\$244,273,274	\$85,671,239	\$118,806,263	\$170,841,608	\$137,054,267
Net Operating Income	\$9,244,843	\$26,515,682	\$10,371,184	\$20,204	(\$7,519,056)	\$18,940,258	(\$19,900,221)
Non-Operating Revenue	\$219,734	\$0	\$0	\$3,775	\$393,367	\$0	\$1,698,849
Non-Operating Expense	\$679,142	\$20,586	\$0	\$0	\$135,728	\$4,177	\$0
Net Income (Loss)	\$8,785,435	\$26,495,096	\$10,371,184	\$23,979	(\$7,261,417)	\$18,936,081	(\$18,201,372)
Net Margin	7.34%	14.42%	4.07%	0.03%	(6.50%)	9.98%	(15.31%)
Inpatient Days	32,002	56,328	79,746	45,909	29,938	61,673	32,370
Admissions	8,679	10,243	16,955	5,365	7,115	13,622	6,304
Avg Length Of Stay	3.7	5.5	4.7	8.6	4.2	4.5	5.1
Avg Daily Census	87.7	154.3	218.5	125.8	82.0	169.0	88.7
Occupancy (%)	51.27%	52.67%	86.36%	71.06%	61.21%	71.29%	74.53%
Adjusted Inpatient Days	49,123.3	80,237.5	105,971.2	64,713.5	43,469.6	80,295.1	55,508.8
Adjusted Admissions	13,322.3	14,590.8	22,530.8	7,562.5	10,330.9	17,735.1	10,810.2
Per Adjusted Admission							
Billed Charges + Other Oper. Rev.	\$64,974	\$84,002	\$74,186	\$65,351	\$57,698	\$78,883	\$62,934
Operating Revenue	\$8,968	\$12,590	\$11,302	\$11,331	\$10,772	\$10,701	\$10,837
Operating Expenses	\$8,274	\$10,773	\$10,842	\$11,328	\$11,500	\$9,633	\$12,678
Net Income (Loss)	\$694	\$1,817	\$460	\$3	(\$728)	\$1,068	(\$1,841)
Per Adjusted Day							
Billed Charges + Other Oper. Rev.	\$17,621	\$15,275	\$15,773	\$7,637	\$13,712	\$17,423	\$12,256
Operating Revenue	\$2,432	\$2,289	\$2,403	\$1,324	\$2,560	\$2,364	\$2,111
Operating Expenses	\$2,244	\$1,959	\$2,305	\$1,324	\$2,733	\$2,128	\$2,469
Net Income (Loss)	\$188	\$330	\$98	\$0	(\$173)	\$236	(\$359)

HOSPITAL SUMMARIES

CLARK COUNTY HOSPITALS	St. Rose Dominican Hospitals San Martin Campus	St. Rose Dominican Hospitals Siena Campus	Summerlin Hospital Medical Center LLC	Sunrise Hospital & Medical Center	University Medical Center of Southern Nevada	Valley Hospital Medical Center	TOTAL CLARK COUNTY HOSPITALS
Inpatient Billed Charges	\$511,241,693	\$1,032,237,894	\$1,264,234,852	\$2,336,575,474	\$1,335,216,690	\$1,283,972,057	\$12,678,051,105
Outpatient Billed Charges	\$290,023,076	\$589,151,739	\$561,043,434	\$965,666,384	\$623,679,089	\$320,258,511	\$5,355,008,216
Billed Charges	\$801,264,769	\$1,621,389,633	\$1,825,278,286	\$3,302,241,858	\$1,958,895,779	\$1,604,230,568	\$18,033,059,321
Inpatient Deductions	\$425,709,108	\$849,798,877	\$1,086,878,540	\$1,967,582,921	\$954,879,183	\$1,111,960,593	\$10,644,908,127
Outpatient Deductions	\$226,100,727	\$457,732,991	\$457,657,621	\$847,226,144	\$449,567,271	\$270,098,625	\$4,330,912,954
Deductions	\$651,809,835	\$1,307,531,868	\$1,544,536,161	\$2,814,809,065	\$1,404,446,454	\$1,382,059,218	\$14,975,821,081
Inpatient Operating Revenue	\$85,532,585	\$182,439,017	\$177,356,312	\$368,992,553	\$380,337,507	\$172,011,464	\$2,033,142,978
Outpatient Operating Revenue	\$63,922,349	\$131,418,748	\$103,385,813	\$118,440,240	\$174,111,818	\$50,159,886	\$1,024,095,262
Operating Revenue	\$149,454,934	\$313,857,765	\$280,742,125	\$487,432,793	\$554,449,325	\$222,171,350	\$3,057,238,240
Other Operating Revenue	\$1,160,370	\$3,588,966	\$617,642	\$3,514,480	\$58,575,484	\$523,026	\$80,576,818
Total Operating Revenue	\$150,615,304	\$317,446,731	\$281,359,767	\$490,947,273	\$613,024,809	\$222,694,376	\$3,137,815,058
Operating Expenses	\$166,952,611	\$299,380,202	\$263,448,187	\$496,946,581	\$583,856,351	\$213,283,731	\$3,047,921,567
Net Operating Revenue	(\$16,337,307)	\$18,066,529	\$17,911,580	(\$5,999,308)	\$29,168,458	\$9,410,645	\$89,893,491
Non-Operating Revenue	\$357,102	\$10,068,904	(\$4,176)	\$0	\$12,923,227	\$305,730	\$25,966,512
Non-Operating Expense	\$0	\$0	\$11,062,145	\$0	\$3,770,516	\$1,424	\$15,673,718
Net Income (Loss)	(\$15,980,205)	\$28,135,433	\$6,845,259	(\$5,999,308)	\$38,321,169	\$9,714,951	\$100,186,285
Net Margin	(10.58%)	8.59%	2.43%	(1.22%)	6.12%	4.36%	3.17%
Inpatient Days	33,959	67,596	86,523	152,852	131,041	79,186	889,123
Admissions	7,828	16,520	17,419	28,586	24,697	14,919	178,252
Avg Length Of Stay	4.3	4.1	5.0	5.3	5.3	5.3	5.0
Avg Daily Census	93.0	185.2	237.0	418.8	359.0	216.9	2436.0
Occupancy (%)	63.29%	84.56%	52.21%	60.69%	66.36%	67.80%	65.03%
Adjusted Inpatient Days	53,300.7	106,411.6	124,962.5	216,253.0	197,998.9	98,969.5	1,270,325.4
Adjusted Admissions	12,286.5	26,006.3	25,157.7	40,443.1	37,316.4	18,646.3	254,675.7
Per Adjusted Admission							
Billed Charges + Other Oper. Rev.	\$65,309	\$62,484	\$72,578	\$81,738	\$54,064	\$86,063	\$71,124
Operating Revenue	\$12,259	\$12,207	\$11,184	\$12,139	\$16,428	\$11,943	\$12,321
Operating Expenses	\$13,588	\$11,512	\$10,472	\$12,288	\$15,646	\$11,438	\$11,968
Net Income (Loss)	(\$1,330)	\$695	\$712	(\$148)	\$782	\$505	\$353
Per Adjusted Day							
Billed Charges + Other Oper. Rev.	\$15,055	\$15,271	\$14,612	\$15,287	\$10,189	\$16,215	\$14,259
Operating Revenue	\$2,826	\$2,983	\$2,252	\$2,270	\$3,096	\$2,250	\$2,470
Operating Expenses	\$3,132	\$2,813	\$2,108	\$2,298	\$2,949	\$2,155	\$2,399
Net Income (Loss)	(\$307)	\$170	\$143	(\$28)	\$147	\$95	\$71

HOSPITAL SUMMARIES

WASHOE COUNTY /CARSON CITY HOSPITALS	Carson Tahoe Regional Medical Center	Northern Nevada Medical Center	Renown Regional Medical Center	Renown South Meadows Medical Center	Saint Marys Regional Medical Center	Sierra Surgery and Imaging LLC	TOTAL WASHOE COUNTY/ CARSON CITY HOSPITALS
Inpatient Billed Charges	\$391,653,640	\$211,995,048	\$1,289,762,703	\$95,984,114	\$522,196,021	\$26,127,622	\$2,537,719,148
Outpatient Billed Charges	\$296,249,095	\$137,273,727	\$773,829,670	\$191,012,250	\$474,420,854	\$39,734,250	\$1,912,519,846
Billed Charges	\$687,902,735	\$349,268,775	\$2,063,592,373	\$286,996,364	\$996,616,875	\$65,861,872	\$4,450,238,994
Inpatient Deductions	\$279,015,929	\$174,280,490	\$958,500,972	\$70,249,350	\$423,040,702	\$18,146,278	\$1,923,233,721
Outpatient Deductions	\$214,795,762	\$110,553,995	\$647,094,400	\$152,016,880	\$340,455,691	\$25,820,526	\$1,490,737,254
Deductions	\$493,811,691	\$284,834,485	\$1,605,595,372	\$222,266,230	\$763,496,393	\$43,966,804	\$3,413,970,975
Inpatient Operating Revenue	\$112,637,711	\$37,714,558	\$331,261,731	\$25,734,764	\$99,155,319	\$7,981,344	\$614,485,427
Outpatient Operating Revenue	\$81,453,333	\$26,719,732	\$126,735,270	\$38,995,370	\$133,965,163	\$13,913,724	\$421,782,592
Operating Revenue	\$194,091,044	\$64,434,290	\$457,997,001	\$64,730,134	\$233,120,482	\$21,895,068	\$1,036,268,019
Other Operating Revenue	\$3,988,820	\$8,012,979	\$10,387,323	\$3,140,991	\$9,345,497	\$234,532	\$35,110,142
Total Operating Revenue	\$198,079,864	\$72,447,269	\$468,384,324	\$67,871,125	\$242,465,979	\$22,129,600	\$1,071,378,161
Operating Expenses	\$187,241,663	\$68,363,306	\$475,430,922	\$60,689,063	\$341,279,264	\$22,427,923	\$1,155,432,141
Net Operating Income	\$10,838,201	\$4,083,963	(\$7,046,598)	\$7,182,062	(\$98,813,285)	(\$298,323)	(\$84,053,980)
Non-Operating Revenue	\$8,683,710	\$75	\$11,614,553	\$1,428,832	\$67,931,385	\$11,482	\$89,670,037
Non-Operating Expense	\$15,098,864	\$0	\$2,492,998	\$102	\$33,851,868	\$0	\$51,443,832
Net Income (Loss)	\$4,423,047	\$4,084,038	\$2,074,957	\$8,610,792	(\$64,733,768)	(\$286,841)	(\$45,827,775)
Net Margin	2.14%	5.64%	0.43%	12.43%	(20.86%)	(1.30%)	(3.95%)
Inpatient Days	43,448	18,436	145,718	9,619	53,149	1,494	271,864
Admissions	10,161	3,767	28,241	3,024	12,908	554	58,655
Avg Length Of Stay	4.3	4.9	5.2	3.2	4.1	2.7	4.6
Avg Daily Census	119.0	50.5	399.2	26.4	145.6	4.1	744.8
Occupancy (%)	64.69%	46.77%	49.41%	34.68%	38.32%	27.29%	47.41%
Adjusted Inpatient Days	76,754.8	31,070.8	234,319.2	29,076.0	102,386.6	3,779.4	480,512.2
Adjusted Admissions	17,950.3	6,348.6	45,412.4	9,140.8	24,866.1	1,401.5	103,671.1
Per Adjusted Admission							
Billed Charges + Other Oper. Rev.	\$38,545	\$56,277	\$45,670	\$31,741	\$40,455	\$47,162	\$43,265
Operating Revenue	\$11,035	\$11,411	\$10,314	\$7,425	\$9,751	\$15,790	\$10,334
Operating Expenses	\$10,431	\$10,768	\$10,469	\$6,639	\$13,725	\$16,003	\$11,145
Net Income (Loss)	\$604	\$643	(\$155)	\$786	(\$3,974)	(\$213)	(\$811)
Per Adjusted Day							
Billed Charges + Other Oper. Rev.	\$9,014	\$11,499	\$8,851	\$9,979	\$9,825	\$17,488	\$9,335
Operating Revenue	\$2,581	\$2,332	\$1,999	\$2,334	\$2,368	\$5,855	\$2,230
Operating Expenses	\$2,439	\$2,200	\$2,029	\$2,087	\$3,333	\$5,934	\$2,405
Net Income (Loss)	\$141	\$131	(\$30)	\$247	(\$965)	(\$79)	(\$175)

HOSPITAL SUMMARIES

RURAL HOSPITALS	Banner Churchill Community Hospital	Battle Mountain General Hospital	Boulder City Hospital Inc	Carson Valley Medical Center	Desert View Regional Medical Center	Grover C Dils Medical Center	Humboldt General Hospital	Incline Village Community Hospital
Inpatient Billed Charges	\$42,692,874	\$472,145	\$3,690,507	\$22,701,007	\$18,475,889	\$1,525,655	\$19,503,759	\$103,330
Outpatient Billed Charges	\$68,924,966	\$7,687,114	\$16,888,321	\$89,415,427	\$52,224,460	\$2,503,360	\$45,685,586	\$13,349,583
Billed Charges	\$111,617,840	\$8,159,259	\$20,578,828	\$112,116,434	\$70,700,349	\$4,029,015	\$65,189,345	\$13,452,913
Inpatient Deductions	\$25,290,717	(\$476,980)	\$1,901,492	\$12,504,286	\$13,589,550	\$455,678	\$12,883,155	(\$134,388)
Outpatient Deductions	\$45,966,609	\$6,043,600	\$9,205,270	\$61,243,998	\$36,066,554	\$1,294,730	\$17,724,875	\$4,847,268
Deductions	\$71,257,326	\$5,566,620	\$11,106,762	\$73,748,284	\$49,656,104	\$1,750,408	\$30,608,030	\$4,712,880
Inpatient Operating Revenue	\$17,402,157	\$949,125	\$1,789,015	\$10,196,721	\$4,886,339	\$1,069,977	\$6,620,604	\$237,718
Outpatient Operating Revenue	\$22,958,357	\$1,643,514	\$7,683,051	\$28,171,429	\$16,157,906	\$1,208,630	\$27,960,711	\$8,502,315
Operating Revenue	\$40,360,514	\$2,592,639	\$9,472,066	\$38,368,150	\$21,044,245	\$2,278,607	\$34,581,315	\$8,740,033
Other Operating Revenue	\$5,581,149	\$5,744,481	\$2,380,320	\$3,469,401	\$626,753	\$2,377,962	\$6,171,585	\$886,520
Total Operating Revenue	\$45,941,663	\$8,337,120	\$11,852,386	\$41,837,551	\$21,670,998	\$4,656,569	\$40,752,900	\$9,626,553
Operating Expenses	\$41,447,351	\$11,041,113	\$12,390,735	\$38,107,693	\$21,026,193	\$5,066,412	\$35,354,197	\$8,493,858
Net Operating Income	\$4,494,312	(\$2,703,993)	(\$538,349)	\$3,729,858	\$644,805	(\$409,843)	\$5,398,703	\$1,132,695
Non-Operating Revenue	\$0	\$11,742,400	\$217,178	\$607,030	\$173	\$810,138	\$7,758,152	\$391,078
Non-Operating Expense	\$0	\$15,015	\$0	\$0	\$0	\$5,308	\$7	\$0
Net Income (Loss)	\$4,494,312	\$9,023,392	(\$321,171)	\$4,336,888	\$644,978	\$394,987	\$13,156,848	\$1,523,773
Net Margin	9.78%	44.94%	(2.66%)	10.22%	2.98%	7.23%	27.12%	15.21%
Inpatient Days	7,399	133	4,417	2,339	4,807	598	2,539	15
Admissions	2,264	53	281	741	1,313	174	926	9
Avg Length Of Stay	3.3	2.5	15.7	3.2	3.7	3.4	2.7	1.7
Avg Daily Census	20.3	0.4	12.1	6.4	13.2	1.6	7.0	0.0
Occupancy (%)	50.68%	5.21%	19.21%	27.86%	52.68%	40.96%	31.62%	1.03%
Adjusted Inpatient Days	20,311.5	3,916.6	27,478.8	11,909.4	18,557.7	2,511.3	9,289.8	2,081.6
Adjusted Admissions	6,215.1	1,560.7	1,748.1	3,772.9	5,068.9	730.7	3,388.1	1,249.0
Per Adjusted Admission								
Billed Charges + Other Oper. Rev.	\$18,857	\$8,908	\$13,133	\$30,636	\$14,072	\$8,768	\$21,062	\$11,481
Operating Revenue	\$7,392	\$5,342	\$6,780	\$11,089	\$4,275	\$6,373	\$12,028	\$7,708
Operating Expenses	\$6,669	\$7,074	\$7,088	\$10,100	\$4,148	\$6,934	\$10,435	\$6,801
Net Income (Loss)	\$723	(\$1,733)	(\$308)	\$989	\$127	(\$561)	\$1,593	\$907
Per Adjusted Day								
Billed Charges + Other Oper. Rev.	\$5,770	\$3,550	\$836	\$9,705	\$3,844	\$2,551	\$7,682	\$6,889
Operating Revenue	\$2,262	\$2,129	\$431	\$3,513	\$1,168	\$1,854	\$4,387	\$4,625
Operating Expenses	\$2,041	\$2,819	\$451	\$3,200	\$1,133	\$2,017	\$3,806	\$4,080
Net Income (Loss)	\$221	(\$690)	(\$20)	\$313	\$35	(\$163)	\$581	\$544

HOSPITAL SUMMARIES

RURAL HOSPITALS		Mesa View Regional Hospital	Mount Grant General Hospital	Northeastern Nevada Regional Hospital (Elko)	Nye Regional Medical Center	Pershing General Hospital	South Lyon Medical Center	William Bee Ririe Hospital	TOTAL RURAL HOSPITALS
Inpatient Billed Charges	Continued	\$16,600,674	\$6,549,542	\$65,521,808	\$1,586,004	\$321,855	\$1,465,182	\$8,590,635	\$209,800,866
Outpatient Billed Charges		\$49,621,281	\$8,956,524	\$100,761,402	\$7,606,525	\$6,861,564	\$9,317,711	\$28,518,240	\$508,322,064
Billed Charges		\$66,221,955	\$15,506,066	\$166,283,210	\$9,192,529	\$7,183,419	\$10,782,893	\$37,108,875	\$718,122,930
Inpatient Deductions	Continued	\$8,707,777	\$4,371,838	\$28,953,274	\$89,500	\$36,571	\$474,361	\$3,847,756	\$112,494,587
Outpatient Deductions		\$33,583,724	\$5,041,628	\$54,145,885	\$2,286,620	\$3,400,119	\$5,370,970	\$12,081,265	\$298,303,115
Deductions		\$42,291,501	\$9,413,466	\$83,099,159	\$2,376,120	\$3,436,690	\$5,845,331	\$15,929,021	\$410,797,702
Inpatient Operating Revenue	Continued	\$7,892,897	\$2,177,704	\$36,568,534	\$1,496,504	\$285,284	\$990,821	\$4,742,879	\$97,306,279
Outpatient Operating Revenue		\$16,037,557	\$3,914,896	\$46,615,517	\$5,319,905	\$3,461,445	\$3,946,741	\$16,436,975	\$210,018,949
Operating Revenue		\$23,930,454	\$6,092,600	\$83,184,051	\$6,816,409	\$3,746,729	\$4,937,562	\$21,179,854	\$307,325,228
Other Operating Revenue	Continued	\$3,084,502	\$4,096,459	\$744,707	\$2,081,309	\$4,508,181	\$5,758,031	\$4,917,038	\$52,428,398
Total Operating Revenue		\$27,014,956	\$10,189,059	\$83,928,758	\$8,897,718	\$8,254,910	\$10,695,593	\$26,096,892	\$359,753,626
Operating Expenses		\$28,288,121	\$10,963,634	\$43,738,668	\$7,013,178	\$8,203,069	\$11,782,503	\$26,438,314	\$309,355,039
Net Operating Revenue	Continued	(\$1,273,165)	(\$774,575)	\$40,190,090	\$1,884,540	\$51,841	(\$1,086,910)	(\$341,422)	\$50,398,587
Non-Operating Revenue		\$360,170	\$469,943	\$851,424	\$10,603	\$1,034,482	\$885,612	\$2,439,431	\$27,577,814
Non-Operating Expense		\$371,359	\$0	\$0	\$0	\$0	\$0	\$0	\$391,689
Net Income (Loss)	Continued	(\$1,284,354)	(\$304,632)	\$41,041,514	\$1,895,143	\$1,086,323	(\$201,298)	\$2,098,009	\$77,584,712
Net Margin		(4.69%)	(2.86%)	48.41%	21.27%	11.69%	(1.74%)	7.35%	20.03%
Inpatient Days		2,397	1,836	7,228	403	221	552	1,900	36,784
Admissions	878	475	2,526	126	53	155	646	10,620	
Avg Length Of Stay	Continued	2.7	3.9	2.9	3.2	4.2	3.6	2.9	3.5
Avg Daily Census		6.6	5.0	19.8	1.1	0.6	1.5	5.2	100.8
Occupancy (%)		26.27%	14.37%	26.40%	11.04%	4.66%	2.40%	20.82%	23.01%
Adjusted Inpatient Days	Continued	10,007.3	5,495.1	18,425.6	2,864.7	8,028.0	6,231.7	9,294.9	135,099.3
Adjusted Admissions		3,665.6	1,421.7	6,439.3	895.6	1,925.3	1,749.8	3,160.3	39,004.9
Per Adjusted Admission									
Billed Charges + Other Oper. Rev.	Continued	\$18,907	\$13,789	\$25,939	\$12,587	\$6,073	\$9,453	\$13,298	\$19,755
Operating Revenue		\$7,370	\$7,167	\$13,034	\$9,934	\$4,288	\$6,112	\$8,258	\$9,223
Operating Expenses		\$7,717	\$7,712	\$6,792	\$7,830	\$4,261	\$6,733	\$8,366	\$7,931
Net Income (Loss)	Continued	(\$347)	(\$545)	\$6,241	\$2,104	\$27	(\$621)	(\$108)	\$1,292
Per Adjusted Day									
Billed Charges + Other Oper. Rev.		\$6,926	\$3,567	\$9,065	\$3,935	\$1,456	\$2,654	\$4,521	\$5,704
Operating Revenue	\$2,700	\$1,854	\$4,555	\$3,106	\$1,028	\$1,716	\$2,808	\$2,663	
Operating Expenses	\$2,827	\$1,995	\$2,374	\$2,448	\$1,022	\$1,891	\$2,844	\$2,290	
Net Income (Loss)	Continued	(\$127)	(\$141)	\$2,181	\$658	\$6	(\$174)	(\$37)	\$373

HOSPITAL SUMMARIES

REHAB / SPECIALTY HOSPITALS	Continuicare Hospital of Carson Tahoe, Inc	Desert Canyon Rehabilitation Hospital	Harmon Medical and Rehabilitation Hospital	Complex Care Hospital at Tenaya	Healthsouth Rehabilitation of Henderson	Healthsouth Rehabilitation of Las Vegas	Horizon Specialty Hospital-Las Vegas
Inpatient Billed Charges	\$41,496,737	\$34,016,909	\$54,131,032	\$73,435,637	\$54,692,023	\$54,723,125	\$27,669,247
Outpatient Billed Charges	\$0	\$1,075,556	\$0	\$0	\$3,150,210	\$0	\$0
Billed Charges	\$41,496,737	\$35,092,465	\$54,131,032	\$73,435,637	\$57,842,233	\$54,723,125	\$27,669,247
Inpatient Deductions	\$32,402,960	\$10,706,025	\$27,106,836	\$44,465,604	\$23,452,723	\$26,051,130	\$11,400,348
Outpatient Deductions	\$0	\$641,551	\$0	\$0	\$948,690	\$0	\$0
Deductions	\$32,402,960	\$11,347,576	\$27,106,836	\$44,465,604	\$24,401,413	\$26,051,130	\$11,400,348
Inpatient Operating Revenue	\$9,093,777	\$23,310,884	\$27,024,196	\$28,970,033	\$31,239,300	\$28,671,995	\$16,268,899
Outpatient Operating Revenue	\$0	\$434,005	\$0	\$0	\$2,201,520	\$0	\$0
Operating Revenue	\$9,093,777	\$23,744,889	\$27,024,196	\$28,970,033	\$33,440,820	\$28,671,995	\$16,268,899
Other Operating Revenue	\$0	\$0	\$0	\$0	\$36,963	\$31,471	\$159
Total Operating Revenue	\$9,093,777	\$23,744,889	\$27,024,196	\$28,970,033	\$33,477,783	\$28,703,466	\$16,269,058
Operating Expenses	\$11,058,534	\$19,008,268	\$25,762,096	\$23,676,302	\$26,105,234	\$19,766,857	\$15,749,022
Net Operating Revenue	(\$1,964,757)	\$4,736,621	\$1,262,100	\$5,293,731	\$7,372,549	\$8,936,609	\$520,036
Non-Operating Revenue	\$0	\$261	\$0	\$0	\$0	\$0	\$261
Non-Operating Expense	\$0	\$11,002	\$0	\$0	\$0	\$0	\$0
Net Income (Loss)	(\$1,964,757)	\$4,725,880	\$1,262,100	\$5,293,731	\$7,372,549	\$8,936,609	\$520,297
Net Margin	(21.61%)	19.90%	4.67%	18.27%	22.02%	31.13%	3.20%
Inpatient Days	7,237	14,830	40,451	19,264	22,971	19,665	12,625
Admissions	296	1,154	3,373	725	1,640	1,615	429
Avg Length Of Stay	24.4	12.9	12.0	26.6	14.0	12.2	29.4
Avg Daily Census	19.8	40.6	110.8	52.8	62.9	53.9	34.6
Occupancy (%)	68.37%	81.26%	95.54%	75.40%	69.93%	68.20%	56.70%
Adjusted Inpatient Days	7,237.0	15,298.9	40,451.0	19,264.0	24,309.6	19,676.3	12,625.1
Adjusted Admissions	296.0	1,190.5	3,373.0	725.0	1,735.6	1,615.9	429.0
Per Adjusted Admission							
Billed Charges + Other Oper. Rev.	\$140,192	\$29,477	\$16,048	\$101,291	\$33,349	\$33,884	\$64,497
Operating Revenue	\$30,722	\$19,946	\$8,012	\$39,959	\$19,289	\$17,763	\$37,923
Operating Expenses	\$37,360	\$15,967	\$7,638	\$32,657	\$15,041	\$12,233	\$36,711
Net Income (Loss)	(\$6,638)	\$3,979	\$374	\$7,302	\$4,248	\$5,530	\$1,212
Per Adjusted Day							
Billed Charges + Other Oper. Rev.	\$5,734	\$2,294	\$1,338	\$3,812	\$2,381	\$2,783	\$2,192
Operating Revenue	\$1,257	\$1,552	\$668	\$1,504	\$1,377	\$1,459	\$1,289
Operating Expenses	\$1,528	\$1,242	\$637	\$1,229	\$1,074	\$1,005	\$1,247
Net Income (Loss)	(\$271)	\$310	\$31	\$275	\$303	\$454	\$41

HOSPITAL SUMMARIES

Exhibit 8D

REHAB / SPECIALTY HOSPITALS		Kindred Hospital Las Vegas Rose de Lima Campus	Kindred Hospital Las Vegas- Flamingo Campus	Kindred Hospital Las Vegas-Sahara Campus	Progressive Hospital- Stonecreek Hospital East	Renown Rehabilitation Hospital	Tahoe Pacific Hospital	TOTAL REHAB / SPECIALITY HOSPITALS
Inpatient Billed Charges	Continued	\$49,734,095	\$112,662,155	\$77,882,825	\$21,339,080	\$53,250,954	\$91,911,911	\$746,945,730
Outpatient Billed Charges		\$0	\$54,046	\$2,778,248	\$0	\$21,172,836	\$0	\$28,230,896
Billed Charges		\$49,734,095	\$112,716,201	\$80,661,073	\$21,339,080	\$74,423,790	\$91,911,911	\$775,176,626
Inpatient Deductions	Continued	\$37,230,959	\$81,755,493	\$56,044,246	\$13,878,713	\$35,244,313	\$62,720,938	\$462,460,288
Outpatient Deductions		\$0	\$35,733	\$1,996,425	\$0	\$13,842,840	\$0	\$17,465,239
Deductions		\$37,230,959	\$81,791,226	\$58,040,671	\$13,878,713	\$49,087,153	\$62,720,938	\$479,925,527
Inpatient Operating Revenue	Continued	\$12,503,136	\$30,906,662	\$21,838,579	\$7,460,367	\$18,006,641	\$29,190,973	\$284,485,442
Outpatient Operating Revenue		\$0	\$18,313	\$781,823	\$0	\$7,329,996	\$0	\$10,765,657
Operating Revenue		\$12,503,136	\$30,924,975	\$22,620,402	\$7,460,367	\$25,336,637	\$29,190,973	\$295,251,099
Other Operating Revenue	Continued	\$0	\$7,760,299	\$0	\$15,847	\$56,521	\$0	\$7,901,260
Total Operating Revenue			\$12,503,136	\$38,685,274	\$22,620,402	\$7,476,214	\$25,393,158	\$29,190,973
Operating Expenses	Continued	\$12,087,375	\$38,233,477	\$20,973,155	\$7,005,028	\$21,546,831	\$17,261,714	\$258,233,893
Net Operating Income			\$415,761	\$451,797	\$1,647,247	\$471,186	\$3,846,327	\$11,929,259
Non-Operating Revenue	Continued	\$3,419	\$113,349	\$64,694	\$0	\$323,160	\$0	\$505,144
Non-Operating Expense		\$0	\$0	\$0	\$0	\$0	\$2,292,161	\$2,303,163
Net Income (Loss)		\$419,180	\$565,146	\$1,711,941	\$471,186	\$4,169,487	\$9,637,098	\$43,120,447
Net Margin		3.35%	1.46%	7.55%	6.30%	16.21%	33.01%	14.20%
Inpatient Days	Continued	7,409	33,615	15,997	5,207	14,966	12,208	226,445
Admissions		314	1,548	529	173	1,020	425	13,241
Avg Length Of Stay		23.6	21.7	30.2	30.1	14.7	28.7	17.1
Avg Daily Census		20.3	92.1	43.8	14.3	41.0	33.4	620.4
Occupancy (%)		72.50%	64.86%	84.28%	59.44%	66.13%	55.74%	75.94%
Adjusted Inpatient Days	Continued	7,409.0	35,946.6	16,567.6	5,210.9	20,932.4	12,208.0	237,398.9
Adjusted Admissions		314.0	1,655.4	547.9	173.1	1,426.6	425.0	13,881.5
Per Adjusted Admission								
Billed Charges + Other Oper. Rev.	Continued	\$158,389	\$72,779	\$147,227	\$123,347	\$52,207	\$216,263	\$56,412
Operating Revenue		\$39,819	\$23,370	\$41,288	\$43,183	\$17,799	\$68,685	\$21,839
Operating Expenses		\$38,495	\$23,097	\$38,281	\$40,461	\$15,103	\$40,616	\$18,603
Net Income (Loss)		\$1,324	\$273	\$3,007	\$2,722	\$2,696	\$28,069	\$3,236
Per Adjusted Day								
Billed Charges + Other Oper. Rev.	Continued	\$6,713	\$3,352	\$4,869	\$4,098	\$3,558	\$7,529	\$3,299
Operating Revenue		\$1,688	\$1,076	\$1,365	\$1,435	\$1,213	\$2,391	\$1,277
Operating Expenses		\$1,631	\$1,064	\$1,266	\$1,344	\$1,029	\$1,414	\$1,088
Net Income (Loss)		\$56	\$13	\$99	\$90	\$184	\$977	\$189

HOSPITAL SUMMARIES

PSYCHIATRIC HOSPITALS	Montevista Hospital	Red Rock Behavioral Health Hospital	Seven Hills Behavioral Institute	Spring Mountain Sahara	Spring Mountain Treatment Center	West Hills Hospital	Willow Springs Center	TOTAL PSYCHIATRIC HOSPITALS
Inpatient Billed Charges	\$36,201,086	\$8,783,866	\$26,801,584	\$12,700,500	\$31,264,590	\$19,249,091	\$26,959,503	\$161,960,220
Outpatient Billed Charges	\$6,161,040	\$0	\$704,537	\$847,450	\$910,260	\$936,358	\$1,855,556	\$11,415,201
Billed Charges	\$42,362,126	\$8,783,866	\$27,506,121	\$13,547,950	\$32,174,850	\$20,185,449	\$28,815,059	\$173,375,421
Inpatient Deductions	\$17,451,282	\$3,332,234	\$12,944,540	\$5,852,051	\$16,203,978	\$8,892,688	\$9,258,858	\$73,935,631
Outpatient Deductions	\$2,804,483	\$0	\$489,073	\$374,382	\$496,714	\$341,342	\$923,851	\$5,429,845
Deductions	\$20,255,765	\$3,332,234	\$13,433,613	\$6,226,433	\$16,700,692	\$9,234,030	\$10,182,709	\$79,365,476
Inpatient Operating Revenue	\$18,749,804	\$5,451,632	\$13,857,044	\$6,848,449	\$15,060,612	\$10,356,403	\$17,700,645	\$88,024,589
Outpatient Operating Revenue	\$3,356,557	\$0	\$215,464	\$473,068	\$413,546	\$595,016	\$931,705	\$5,985,356
Operating Revenue	\$22,106,361	\$5,451,632	\$14,072,508	\$7,321,517	\$15,474,158	\$10,951,419	\$18,632,350	\$94,009,945
Other Operating Revenue	\$0	\$0	\$6,519	\$6,033	\$405,766	\$691,034	\$88,091	\$1,197,443
Total Operating Revenue	\$22,106,361	\$5,451,632	\$14,079,027	\$7,327,550	\$15,879,924	\$11,642,453	\$18,720,441	\$95,207,388
Operating Expenses	\$17,696,180	\$3,858,203	\$12,484,432	\$4,909,506	\$13,050,362	\$11,722,861	\$14,900,743	\$78,622,287
Net Operating Income	\$4,410,181	\$1,593,429	\$1,594,595	\$2,418,044	\$2,829,562	(\$80,408)	\$3,819,698	\$16,585,101
Non-Operating Revenue	\$47,553	\$6,616	\$31,830	\$229,959	\$0	\$0	\$0	\$315,958
Non-Operating Expense	\$0	\$0	\$29,830	\$686,595	\$2,519,108	\$665,147	\$4,928,854	\$8,829,534
Net Income (Loss)	\$4,457,734	\$1,600,045	\$1,596,595	\$1,961,408	\$310,454	(\$745,555)	(\$1,109,156)	\$8,071,525
Net Margin	20.12%	29.31%	11.31%	25.95%	1.96%	(6.40%)	(5.92%)	8.45%
Inpatient Days	26,808	6,827	18,426	8,463	21,676	14,928	34,061	131,189
Admissions	3,067	522	2,751	595	2,093	553	370	9,951
Avg Length Of Stay	8.7	13.1	6.7	14.2	10.4	27.0	92.1	13.2
Avg Daily Census	73.4	18.7	50.5	23.2	59.4	40.9	93.3	359.4
Occupancy (%)	91.81%	89.07%	87.04%	77.29%	72.42%	43.05%	80.45%	74.57%
Adjusted Inpatient Days	31,370.4	6,827.0	18,914.8	9,031.7	22,588.4	16,190.1	36,516.6	141,405.3
Adjusted Admissions	3,589.0	522.0	2,824.0	635.0	2,181.1	599.8	396.7	10,725.9
Per Adjusted Admission								
Billed Charges + Other Oper. Rev.	\$11,803	\$16,827	\$9,742	\$21,345	\$14,938	\$34,808	\$72,864	\$16,276
Operating Revenue	\$6,160	\$10,444	\$4,986	\$11,540	\$7,281	\$19,412	\$47,193	\$8,876
Operating Expenses	\$4,931	\$7,391	\$4,421	\$7,732	\$5,983	\$19,546	\$37,564	\$7,330
Net Income (Loss)	\$1,229	\$3,053	\$565	\$3,808	\$1,297	(\$134)	\$9,629	\$1,546
Per Adjusted Day								
Billed Charges + Other Oper. Rev.	\$1,350	\$1,287	\$1,455	\$1,501	\$1,442	\$1,289	\$792	\$1,235
Operating Revenue	\$705	\$799	\$744	\$811	\$703	\$719	\$513	\$673
Operating Expenses	\$564	\$565	\$660	\$544	\$578	\$724	\$408	\$556
Net Income (Loss)	\$141	\$233	\$84	\$268	\$125	(\$5)	\$105	\$117