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SC Court of Appeals

THE STATE OF SOUTH CAROLINA
IN THE COURT OF APPEALS

APPEAL FROM THE ADMINISTRATIVE LAW COURT
The Honorable S. Phillip Lenski, Administrative Law Judge

Appellate Case No. 2015-000056
Lower Court Docket No. 11-ALJ-07-0575-CC

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S.C. SUPREME COURT

Amisub of South Carolina, Inc. d/b/a Piedmont Medical Center d/b/a Fort Mill Medical Center ..... Respondent,

v.

South Carolina Department of Health and Environmental Control and The Charlotte-Mecklenburg Hospital Authority, d/b/a Carolinas Medical Center-Fort Mill ..... Respondents,

Of whom The Charlotte-Mecklenburg Hospital Authority, d/b/a Carolinas Medical Center-Fort Mill, is ..... Appellant.

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INDEX

Record Volume I of XVII

ORDERS

Order of Judge Matthews, filed December 9, 2009 1

Order of Supreme Court Order dated April 8, 2010 29

Final Order and Decision of Judge Lenski, filed March 31, 2014 34

Order of Judge Lenski Vacating Final Order, May 2, 2014 73

Amended Final Order of Judge Lenski, filed December 15, 2014 74

PLEADINGS

Respondent CHS's Motion in Limine, filed April 2, 2013 127

Respondent CHS's Motion for Reconsideration, filed April 9, 2014 227

Petitioner's Response in Opposition to Motion for Reconsideration, dated April 21, 2014 250

TRANSCRIPTS

Transcript of Administrative Hearing before the Honorable S. Phillip Lenski, April 8, 2013 – May 7, 2013 271

(pp. 6-66 omitted)

Arun Adlakha, M.D.
Direct Examination by Mr. Andrews 297
Re-Direct Examination by Mr. Andrews 338
Re-Cross Examination by Mr. Muller 341

Bill Masterson
Direct Examination Mr. Westbrook 342
Cross Examination by Mr. Muller 394
Re-Direct Examination by Mr. Westbrook 395

Roy Norman Taylor, M.D.
Direct Examination by Mr. Andrews 400
Cross Examination by Mr. Gaskins 447
Re-Direct Examination by Mr. Andrews 449

Robert Walsh
Direct Examination by Mr. Westbrook 459

Record Volume II of XVII

Robert Walsh
Cross Examination by Mr. Gaskins 534
Re-Direct Examination by Mr. Westbrook 535

David Samuel Levitt
Direct Examination by Mr. Andrews 542

Sushil Singhi, M.D.
Direct Examination by Mr. Andrews 848
Cross Examination by Mr. Gaskins 896
Re-Direct Examination by Mr. Andrews 898
Re-Direct Examination by Mr. Andrews 905

David Samuel Levitt (Resumed)
Re-Direct Examination by Mr. Andrews 917

Record Volume III of XVII

Charles Miller
Re- Direct Examination by Mr. Andrews 1021

Joel Grice
Direct Examination by Mr. Andrews 1031

Daniel Sullivan
Direct Examination by Mr. Westbrook 1143
Cross Examination by Mr. Gaskins 1164
Re-Direct Examination by Mr. Westbrook 1166

Joel Grice (Resumed)
Re-Direct Examination by Mr. Andrews 1188
Re-Cross Examination by Mr. Muller 1199

Beverly Brandt
Cross Examination by Mr. Andrews 1204
Re-Cross by Mr. Andrews 1317
Re-Cross by Ms. Robertson 1319

Frank Murphy, Jr.
Cross Examination by Mr. Westbrook 1325

Donald Stewart
Cross Examination by Mr. Westbrook 1448

Record Volume IV of XVII

Donald Stewart
Re-Cross Examination by Mr. Westbrook 1504

Robert Alexander, M.D.
Cross Examination by Mr. Andrews 1511

Re-Direct Examination by Mr. Gaskins 1531

William Revell, M.D.
Cross Examination by Mr. Andrews 1534

Kathryn M.T. Platt
Cross Examination by Mr. Andrews 1585

Dawn Carter
Cross Examination by Mr. Westbrook 1850

Record Volume V of XVII

Dawn Carter
Redirect Examination by Ms. Robertson 2005

David Samuel Levitt
Rebuttal Direct Examination by Mr. Andrews 2006
Rebuttal Re-Direct Examination by Mr. Andrews 2069
Rebuttal Re-Cross Examination by Mr. Muller 2076

Bill Masterson
Rebuttal Direct Examination by Mr. Westbrook 2077
Rebuttal Cross Examination by Mr. Gaskins 2095
Rebuttal Re-Cross Examination by Mr. Gaskins 2096

Daniel Sullivan
Rebuttal Direct Examination by Mr. Westbrook 2098

Exhibits

Joint-A-CHS-001

.0009-10, Figures 3-4 2132

.0015-17 2134

.0047-52 2137

.0056-57 2143

.0059-61 2145

.0064 2148

.0067 2149

.0079-80 2150

.1164-1167 2152

.1174-1182 2156

.1184 2165

.1187-1188 2166

.1191 2168

.1198 2169

.1210-1211 2170

.1215 2172

.1303-1315 2173

Joint-B-PMC-001

.0002-0266 2186

Record Volume VI of XVII

Joint-B-PMC-001

0267-0415 2451

.0449-0643 2600

.0690-0835 2795

Record Volume VII of XVII

Joint-B-PMC-001

.0836-0902 2941

.0990-0996 3008

.1000-1014 3015

.1017-1031 3030

CHS

12 3045
32, p 1 3217

Petitioner

1B 3218
2.0032 3229
3.0029 3230
4.0001 3231

Record Volume VIII of XVII

Petitioner Exhibits (Cont'd)

4.0201 3431
5 3514
6.0001 3778

Record Volume IX of XVII

6.0140 3917
7 3997
8 3998
11 4170
12.0001 4173

Record Volume X of XVII

14 4361
15 4445
16 4449
17A 4619
17B 4679
17C 4740
17D 4804

Record Volume XI of XVII

17D.0048 4851
18 4868
19 4885
20 4886
21 4887
22 4889
23 4994
24 4997
25 5010
26 5057
27 5058
28 5060
29 5066
30 5105
32 5106
33 5107

34.....5108
35.....5109
36A.....5111
36B.....5176
37A.....5244
37B.....5272
38A.....5300

Record Volume XII of XVII

38B.....5335
39A.....5373
39B.....5407
40A.....5440
40B.....5470
41A.....5501
41B.....5530
44A.....5562
44B.....5591
45A.....5594
45B.....5623
46A.....5627
46B.....5656
47A.....5660
47B.....5689
48A.....5693
48B.....5722
49.....5726
50.....5730
51.....5734
52.....5738
53.....5741
54.....5744
55.....5748

Record Volume XIII of XVII

55.0070.....5817
56.....6181
57.....6183
58.....6185
59.....6187
60.....6189
61.....6191
62.....6193
63.....6195
64.....6197

66.....6205
67.....6289
69.....6296
70.....6300

Record Volume XIV of XVII

71.....6303
72.....6308
73.....6328
74.....6330
75A.....6342
75B.....6452
76A.....6612

Record Volume XV of XVII

76B.....6705
77A.....6800
77B.....6875
78A.....6972
78B.....7047

Record Volume XVI of XVII

79A.....7147
79B.....7245
80A.....7345
80B.....7421
81A.....7506
81B.....7606

Record Volume XVII of XVII

81B.0030.....7635
82.....7710
83.....7730
84.....7750
88.....7753
89.....7754
90.....7762
91.....7768
92.....7774
93.....7781
94.....7788
95.....7794
96.....7800
97.....7807

98.....7808
99.....7809
100.....7810
101.....7811
102A.....7812
102B.....7818
102C.....7819
103.....7820
104.....7823
105.....7824
106.....7825
107.....7826
108.....7827
109.....7829
110.....7831
111.....7832
114.....7835
115.....7854
116.....7856
117.....7858

DHEC

DHEC Record 000057 7860
DHEC Record 000211 – 000213 7861

2005 and 2011 Discharges and Market Share by Facility (Summary)
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

		2005												2011											
CHS or Other	Hospital	29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total	29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total
CHS	Anmed Health				1				1					2				1				1					2
	Bon Secours St. Francis Xavier								3				1	4								1					1
	Carolinas HealthCare System Charlotte	1		11	17	14		2	16	13	2		1	69	1	21	16	22	10	2		23	25	1	4	16	144
	Carolinas HealthCare System Kings Mtn			1	60	1			1	1		1		14			1	37	5			1	8	1	1	5	59
	Carolinas HealthCare System University			1	2	2			5	4				12		3	3	4	17			5	6	1	1	1	40
	Carolinas Medical Center	28		235	292	353	3	8	275	347	13	5	215	1,886	57	332	427	387	480	17	13	691	553	28	9	352	3,946
	Carolinas Medical Center Northeast			1	1	2				4			1	9		6	6	4	5			4	9			2	36
	Carolinas Specialty Hospital				1	7	2		8	1	1		2	17	1	2		3	3			10	6			9	34
	Charles A. Cannon Jr. Memorial Hospital																	2				1	1			1	5
	Cleveland Regional Medical Center			1	7				3	2	3	2	1	19		1		10							4	11	26
	CMC - Lincoln Medical Center				1					1				2				2									2
	Cone Health																		1								1
	Gaston Hospital															1	1	1				1	2			1	7
	MedWest Haywood																	1									1
	Mercy Hospital	13		209	219	657	3	11	358	270	7	2	156	1,873	69	543	506	408	521	7	6	936	727	15	3	270	5,574
	Mercy Hospital Mercy Hospital				1									1													
	Randolph Hospital					1								1													
	Roper Hospital			1					2	2				5		2			2		1	1					6
	St. Luke's Hospital								1					1													
	Stanly Memorial Hospital				1									1													
	Union Regional Med Center	1		1	1	12			2	2			2	21	1	19	6	7	19	1		2	6	2		12	66
	Wilkes Regional Med cal Center				1									1													
CHS Total		41		341	531	1,039	8	22	731	647	30	8	417	4,141	119	967	974	969	1,155	27	20	1,747	1,347	49	22	881	7,344
PMC	Piedmont Medical Center	333	1	373	11	691	52	147	4,894	3,388	199	1	2,318	12,935	322	108	391	850	617	98	104	4,894	3,037	194	87	1,898	11,855
Other NC Total		19		291	669	336	10	9	884	371	93	29	300	2,350	32	893	304	823	211	8	7	825	287	17	18	282	2,910
Other SC Total		37		32	41	97	39	17	186	169	49	38	82	703	30	66	85	71	91	23	19	260	193	44	43	63	991
Other Total		43		323	1,030	433	39	26	419	433	88	67	287	3,119	53	339	350	894	302	31	26	493	457	61	34	372	3,411
Grand Total		407	1	1,137	1,882	2,473	169	195	6,894	4,435	329	76	3,208	18,354	394	1,394	1,695	2,643	2,048	164	150	6,825	4,791	304	165	2,359	22,510

Market Share

		2005												2011											
CHS or Other	Hospital	29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total	29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total
CHS	Anmed Health	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Carolinas HealthCare System Charlotte	0.3%	0.0%	1.0%	1.0%	0.6%	0.0%	1.0%	0.2%	0.3%	0.0%	0.0%	0.0%	0.4%	0.3%	1.5%	1.1%	-0.9%	0.5%	1.7%	0.0%	0.4%	0.5%	0.3%	-2.0%	0.5%	0.6%
	Carolinas HealthCare System Kings Mtn	0.0%	0.0%	0.1%	4.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.3%	0.0%	0.3%	0.0%	0.0%	0.1%	1.4%	0.1%	0.0%	0.0%	0.0%	0.1%	0.3%	0.7%	0.3%	0.3%
	Carolinas HealthCare System University	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.2%	0.5%	0.2%	0.8%	0.0%	0.0%	0.1%	0.1%	0.3%	0.7%	0.0%	0.2%
	Carolinas Medical Center	8.4%	0.0%	20.7%	16.0%	14.7%	2.3%	4.0%	4.2%	7.8%	4.0%	3.0%	7.2%	8.5%	14.8%	22.1%	20.8%	15.0%	23.5%	11.0%	12.2%	10.1%	11.9%	9.9%	5.8%	12.0%	14.8%
	Carolinas Medical Center Northeast	0.0%	0.0%	0.1%	0.3%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%	0.5%	0.2%	0.2%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.1%	0.2%
	Carolinas Specialty Hospital	0.0%	0.0%	0.2%	0.1%	0.3%	1.2%	-0.0%	0.0%	0.0%	0.4%	0.0%	0.1%	0.1%	0.3%	0.1%	0.0%	0.1%	0.1%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.3%	0.2%
	Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Cleveland Regional Medical Center	0.0%	0.0%	0.1%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	2.6%	0.0%	0.1%	0.0%	0.1%	0.0%	-0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	-2.6%	0.4%	0.1%
	CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Cone Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Gaston Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	MedWest Haywood	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Mercy Hospital	2.3%	0.0%	25.4%	19.3%	29.5%	2.3%	6.5%	5.5%	6.1%	2.5%	2.5%	5.5%	9.8%	15.0%	30.5%	31.1%	15.4%	30.4%	4.5%	3.5%	10.4%	13.3%	5.5%	2.5%	9.5%	15.0%
	Mcrae H Cone Mem Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Roper Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Union Regional Med Center	0.2%	0.0%	0.1%	0.1%	-0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.3%	1.3%	0.3%	0.3%	0.8%	0.0%	0.0%	0.0%	0.1%	0.7%	0.0%	0.3%	0.3%
	Wilkes Regional Med cal Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
CHS Total		10.1%	0.0%	47.5%	37.4%	46.8%	5.2%	11.3%	12.4%	14.8%	8.2%	10.5%	14.8%	20.0%	20.5%	52.5%	51.1%	34.0%	55.8%	17.5%	16.7%	31.4%	28.4%	16.1%	14.4%	23.2%	32.6%
PMC	Piedmont Medical Center	79.4%	100.0%	32.6%	0.7%	40.1%	63.5%	76.4%	80.7%	75.8%	70.3%	1.3%	73.0%	69.4%	68.3%	7.8%	18.2%	32.2%	30.2%	63.3%	69.7%	70.2%	64.0%	63.9%	43.8%	64.2%	61.8%
Other NC Total		3.8%	0.0%	17.7%	30.5%	13.2%	7.8%	4.8%	3.7%	8.1%	3.5%	36.2%	10.0%	12.0%	5.9%	21.5%	16.1%	31.1%	10.3%	5.5%	4.9%	3.8%	3.5%	5.9%	11.8%	2.9%	11.3%
Other SC Total		8.6%	0.0%	1.9%	2.6%	3.9%	22.5%	8.7%	3.2%	3.4%	17.5%	50.0%	2.2%	3.7%	7.6%	4.6%	1.6%	2.7%	3.0%	14.3%	12.2%	4.8%	-0.4%	14.8%	30.1%	3.1%	4.0%
Other Total		12.5%	0.0%	19.6%	33.2%	17.1%	30.3%	13.5%	6.9%	9.8%	20.9%	86.2%	12.2%	15.7%	13.5%	26.2%	17.7%	33.8%	13.3%	20.1%	16.7%	8.6%	3.1%	20.1%	41.9%	13.2%	15.3%
Grand Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

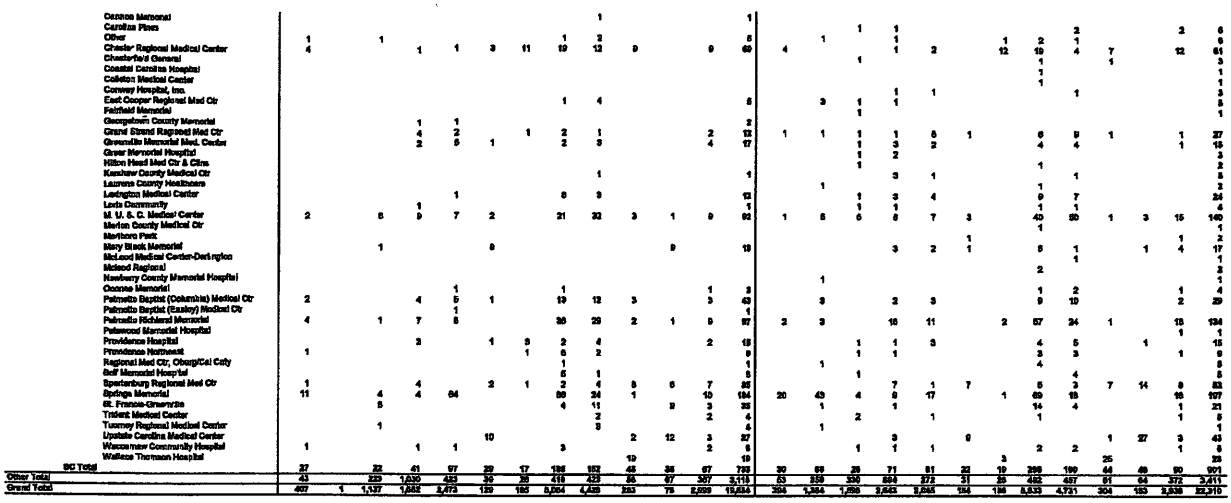
Petitioner's Trial Exhibit 014

PET-EX014

2005 and 2011 Discharges and Market Share by Facility (Detail)
Piedmont Medical Center - Fort Mill Service Area
Excludes Mental Hazlthcare
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

			2005											2011										
CHS or Other	State	Hospital	29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total	29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total
CHS	NC	Carolinas HealthCare System Blue Ridge	1		11	17	14		2	16	18	2		10	63	1	21	10	23	10	3		23	26	1	4	10	122
		Carolinas HealthCare System Kings Mtn			1	39	1			1	1		1	14	63			1	27	3			1	3	1	1	6	83
		Carolinas HealthCare System University			1	2	2			5	4			2	15		2	2	4	17			5	5	1	1	1	44
		Carolinas Medical Center	29		235	299	353	3	9	376	347	13	3	210	1,885	57	302	427	367	430	17	19	691	883	29	9	252	3,845
		Carolinas Medical Center Northeast			1	1	2				4			1	9		5		4	8			4	9			5	35
		Catawba Specialty Hospital				1	7	2		5	1	1		2	27	1	2		3	3			15	6			9	36
		Charles A. Cannon Jr. Memorial Hospital																	2				1	1			1	4
		Cleveland Regional Medical Center			1	7				5	2	3	2	1	15		1		10							4	11	25
		CMC - Lincoln Medical Center				1					1				2				2									2
		Cone Health															1	1					1	2			1	7
		Gaston Hospital															1	1	1				1	2			1	7
		MedWest-Haywood																1										1
		Mercy Hospital	13		259	219	657	3	11	358	270	7	3	184	1,973	59	343	505	406	821	7	9	606	827	16	3	229	3,978
		Meals H Cone Mem Hospital				1									1													
		Randolph Hospital					1								1													
		St. Luke's Hospital								1					1													
		Stanly Memorial Hospital				1									1													
		Union Regional Med Center	1		1	1	12			2	2			2	21	1	12	5	7	13	1		2	8	2		10	63
		Wilkes Regional Medical Center				1									1													
	NC Total		41		540	620	1,089	8	22	748	648	26	6	419	4,131	119	695	979	896	1,152	27	36	1,344	1,847	60	22	661	7,952
	SC	Ashley Health				1				1				1	2					1			1					2
		Bon Secours St. Francis Xavier								2				1	3			1		2			1					4
		Roper Hospital								2	2				4					2		1	1					4
	SC Total				1	1				5	2			1	9		2	1	1	4		1	3					12
CHS Total			41		541	621	1,089	8	22	753	647	26	6	417	4,140	119	697	979	899	1,156	27	36	1,347	1,847	60	22	661	7,964
PMC	SC	Piedmont Medical Center	629	1	372	11	951	82	147	6,894	5,369	199	1	3,218	17,824	222	196	291	880	917	27	68	104	4,084	5,027	194	87	1,888	14,885
Other	NC	Alamance Regional Med Ctr															2											2
		Alternate Health								1					1													
		Alleghany Memorial Hosp									1				1													
		Anson Penn Hospital																					1					1
		Brunswick Hospital																1									1	2
		Bryan Mem Behavioral Hs									1				1													
		Caldwell Memorial Hospital																		4								4
		Cannon Memorial									1				1													
		Cape Fear Valley Hlth Sys								1				1	2									1				1
		CarePartners Rehabilitation Hospital																2										2
		Carolina Health Inc	5		7	147	2	5	2	6	7	5	15	155	356		1	5	621	2	4	4	7	7	7	13	181	852
		Catawba Valley Medical Center									3			1	4		1		1				1					3
		Craven Regional Med Ctr												1	1													
		Davie Medical Center								1					1	2		1	2	1				3			3	12
		Duke Raleigh																	1									1
		Duke University Med Ctr	1		9	10	3		1	18	17			7	72	2	4	15	7	9			7	10			6	60
		Durham Regional Hospital												2	2			1		1	1							2
		Fellowship Hall				1	2			1	1				5													
		First Health Moore Regl																						1				1
		Forsyth Memorial Hospital	1				1								2			2										2
		Fpe Regional Med Center				2									2		1	2	2				1					6
		High Point Regional Hosp	1			1				1					3									1				1
		High Chatham Mem Hospital												1	1													
		Iredell Health System				1	1			1					3									1				1
		Johnston Medical Center-Smithfield																						1				1
		Kindred Hosp Greensboro				1									1									1				1
		Lake Norman Reg Med Ctr			1	1	1				5				8			2	5	2			3	2				12
		Lexington Memorial Hospital															1											1
		Margaret R. Pardee Memorial Hospital					1								1		1	1	1									3
		Medical Park Hospital																						1				1
		Mission Health System				3	1							2	6			7	2	3				1			2	15
		New Hanover Regional Med.									3			1	4		1	2		1			1					5
		North Carolina Specialty Hospital																1										1
		Park Ridge Health					1		1					2	4		1											1
		Person County Mem Hosp				1									1													
		Pitt County Memorial Hospital	1				2							2	5													
		Presb Orthopaedic Hosp	4		37	91	47	4	1	47	43		3	25	220	8	81	29	36	29		1	35	47	4	1	22	229
		Presbyterian Hospital	5		138	166	225	1	4	151	163	6	5	78	941	9	157	155	121	155		2	140	170	8	5	78	1,004
		Presbyterian Hospital Huntersville				4					4				8		3	2	2					5			1	14
		Presbyterian Hospital Matthews			13	11	33			8	6			5	76	2	16	14	15	26			8	13			6	100
		Psychiatric Solutions of NC dba: Holly																3		2								5
		Rex Healthcare																						1				1
		Rowan Regional Med Center								2	2				4		1	2	1	1			1					5
		Rutherford Hospital												1	1								1					1
		Stanly Regional Medical Center																1	2				1	1		1	1	7
		The NC Baptist Hospitals			5	5	2			6	6		1	10	35	1	4	3	6	1			9	15			6	45
		Thomasville Medical Center																3		1							1	5
		Transylvania Reg Hosp																1										1
		UNC Hospitals			3	3	1			3	22		1	7	36	1	7	8	8	4			9	2			3	34
		Vidant Medical Center															1											1
		Watauga																		1			1	3				4
		Watauga Med Ctr																					1					1
		Watauga Medical Center																						1				1
	SC Total		16		201	469	336	10	9	333	371	10	29	303	2,388	33	333	304	323	211	6	7	339	397	17	10	202	2,203
	GC	Alice Regional Med. Center												1	1	2	1			1			2	3				9
		Allen Bennett Memorial								1					1													
		Bamberg County Memorial																					1					1
		Beaufort Memorial								2	1	1			4												1	1



Oconee Memorial								1				1																			
Carolina Pines															1	1								2				2			
Other	1		1				1	3				5		1		1				1	2	1								
Chester Regional Medical Center	4			1	1	3	11	19	13	9		9	69	4			1	2		12	19	4	7		12		61			
Chesterfield General															1						1		1				3			
Coastal Carolina Hospital																					1						1			
Colleton Medical Center																					1						1			
Conway Hospital, Inc.																1	1										3			
East Cooper Regional Med Ctr								1	4				5		3	1	1					1					5			
Fairfield Memorial																1											1			
Georgetown County Memorial				1	1								2																	
Grand Strand Regional Med Ctr				4	2		1	2	1			2	12	1	1	1	1	5	1		6	9	1		1		37			
Greenville Memorial Med. Center				2	9	1		2	3			4	17			1	3	2			4	4			1		16			
Grer Memorial Hospital																1	2										3			
Hilton Head Med Ctr & Clns																1					1						2			
Kershaw County Medical Ctr									1				1				3	1				1					5			
Laurens County Healthcare															1												1			
Lexington Medical Center					1			6	3				10			1	3	4			9	7					24			
Lexington Medical Center				1									1			1	1				1	1					4			
M. U. S. C. Medical Center	2		6	9	7	2		21	22	3	1	9	82	1	6	6	8	7	3		40	30	1	3	15		140			
Marion County Medical Ctr																					1						1			
Marlboro Park																			1			1					2			
Mary Black Memorial			1			6					9		16				3	2	1		6	1		1	4		17			
McLeod Medical Center-Darlington																						1					1			
Mcleod Regional																					2						2			
Newberry County Memorial Hospital															1												1			
Oconee Memorial					1			1				1	3								1	2			1		4			
Palmetto Baptist (Columbia) Medical Ctr	2			4	5	1		19	12	3		3	49		3		2	3			9	10			2		39			
Palmetto Baptist (Easley) Medical Ctr					1								1																	
Palmetto Richland Memorial	4		1	7	6			35	29	2	1	9	97	2	3		16	11		2	57	34	1		13		134			
Patewood Memorial Hospital																											1			
Providence Hospital				3		1	3	3	4			2	16			1	1	3			4	5		1			15			
Providence Northeast	1						1	6	2				9			1	1				3	3			1		9			
Regional Med Ctr, Orangeburg								1					1		1						4						6			
Self Memorial Hospital								5	1				6			1						4					5			
Spartanburg Regional Med Ctr	1			4		2	1	2	4	5	6	7	25				7	1	7		5	3	7	14		8	53			
Springs Memorial	11		4	4	84			56	24	1		10	194	20	43	4	8	17		1	69	18				98	197			
St. Francis-Greenville			5					4	11		3	3	26		1		1				14	4				1	21			
Trident Medical Center									2			2	4			2		1			1					1	5			
Tuomey Regional Medical Center			1						3				4		1												1			
Upstate Carolina Medical Center						10				2	12	3	27				3		9				1	27	3		43			
Wescarolina Community Hospital	1			1	1			3				2	6			1	1	1		3	2	2			1		9			
Wallace Thomson Hospital									19				19										25				25			
SC Total	27		22	41	67	29	17	186	163	45	36	67	700	30	66	28	71	61	22	10	288	199	44	46	80		901			
Other Total	43		329	1,030	435	30	28	418	439	36	40	307	3,115	53	338	330	884	572	31	25	492	407	91	64	372		3,411			
Grand Total	497	1	1,197	1,882	2,473	139	185	9,004	4,428	283	79	2,009	19,884	394	1,304	1,288	3,645	2,845	194	146	8,835	4,731	304	185	2,838		25,310			

Market Share

CHS or Other	State	Hospital	2006											2011										
			28704	28207	28709	28210	28715	28717	28726	28790	28758	28740	28743	28748	Total	28704	28227	28784	28710	28745	28712	28725	28730	28782	28742	28748	Total
CHS	NC	Carolinas HealthCare System Charlotte	0.3%	0.0%	1.0%	1.0%	0.0%	0.0%	1.3%	0.3%	0.3%	1.7%	0.0%	0.0%	0.5%	0.5%	0.3%	1.4%	0.0%	0.0%	0.0%	0.0%	0.0%	2.0%	0.5%	0.5%
		Carolinas HealthCare System Kings Mtn	0.0%	0.0%	0.1%	4.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	1.3%	0.0%	0.4%	0.0%	0.0%	1.4%	0.1%	0.0%	0.0%	0.1%	0.3%	0.7%	0.0%	0.2%
		Carolinas HealthCare System University	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.2%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.2%	0.0%	0.2%	0.0%	0.2%	0.0%	0.0%	0.1%	0.1%	0.1%	0.3%	0.7%	0.0%	0.2%
		Carolinas Medical Center	0.4%	0.0%	20.7%	16.9%	14.7%	2.3%	4.8%	0.2%	7.8%	4.6%	3.8%	7.2%	2.5%	14.9%	22.1%	20.5%	15.2%	23.2%	11.0%	12.3%	10.1%	11.9%	8.5%	6.0%	12.0%	14.5%
		Carolinas Medical Center Northeast	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%	0.9%	0.3%	0.3%	0.0%	0.3%	0.1%	0.2%	0.5%	0.1%	0.2%	0.2%
		Carolinas Specialty Hospital	0.0%	0.0%	0.0%	0.1%	0.3%	1.6%	0.0%	0.0%	0.0%	0.4%	0.0%	0.1%	0.1%	0.3%	0.1%	0.0%	0.1%	0.0%	0.3%	0.2%	0.1%	0.0%	0.0%	0.3%	0.2%
		Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.0%	0.1%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	0.0%	2.8%	0.0%	0.1%	0.0%	0.1%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Gaston Hospital	0.0%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mercy Hospital	0.2%	0.1%	23.4%	13.2%	15.0%	2.3%	0.0%	0.1%	2.6%	2.2%	0.5%	0.0%	0.2%	10.0%	22.2%	21.7%	15.4%	22.4%	4.5%	3.8%	10.4%	13.2%	0.0%	2.1%	2.2%	10.5%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		1.0%	0.0%	47.8%	37.2%	32.8%	6.2%	11.2%	0.7%	14.6%	9.3%	10.8%	13.5%	5.8%	30.5%	56.8%	51.5%	34.0%	36.5%	17.8%	19.2%	21.4%	28.4%	10.1%	14.4%	23.2%	36.8%
	SC	Ankle Health	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%
CHS Total			1.0%	0.0%	47.9%	37.4%	32.8%	6.2%	11.3%	0.7%	14.6%	9.3%	10.8%	13.5%	5.8%	30.5%	56.9%	51.5%	34.0%	36.5%	17.9%	19.2%	21.4%	28.4%	10.1%	14.4%	23.2%	36.9%
Peid	SC	Piedmont Medical Center	76.4%	100.0%	32.8%	0.1%	40.1%	83.8%	76.4%	80.7%	73.6%	76.3%	1.8%	73.8%	83.6%	64.3%	7.9%	16.5%	33.3%	50.5%	61.3%	58.7%	70.3%	64.0%	63.8%	43.8%	64.3%	51.3%
Other	NC	Alamance Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bryan Mem Behavioral Hl	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehab Mation Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Hlth Inc	0.7%	0.0%	0.0%	44.9%	0.1%	0.0%	1.0%	0.1%	0.2%	1.6%	23.7%	5.2%	4.8%	0.0%	0.1%	0.5%	23.0%	0.1%	2.6%	2.0%	0.1%	0.1%	2.8%	4.5%	0.1%	3.7%
		Catawba Valley Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davie Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Durham Regional Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Iredell Health System	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M.C.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		North Carolina Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.2%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	1.0%	0.0%	0.4%	1.0%	1.9%	3.1%	0.6%	0.9%	0.0%	3.9%	0.0%	1.2%	1.5%	2.3%	1.0%	1.1%	1.1%	0.0%	0.0%	0.0%	1.0%	1.3%	0.7%	0.7%	1.0%
		Presbyterian Hospital	1.2%	0.0%	12.0%	10.1%	0.0%	0.6%	2.1%	2.2%	3.6%	1.6%	7.8%	2.0%	4.6%	2.9%	11.6%	12.1%	4.7%	0.8%	2.9%	1.3%	2.5%	3.7%	2.5%	2.5%	2.0%	4.6%
		Presbyterian Hospital Huntersville	0.2%	0.0%	0.0%	0.2%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%
		Presbyterian Hospital Matthews	0.0%	0.0%	1.1%	0.7%	1.5%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.2%	0.4%	0.0%	0.0%	0.0%	0.4%	1.2%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.7%
		Psychiatric Solutions of NC dba: Holly	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roman Regional Med Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rutherford Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		The NC Baptist Hospitals	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	1.2%	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Thomasville Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.3%	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%
		Vidant Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Wakemed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Wakemed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		2.2%	0.0%	17.1%	55.8%	13.3%	7.0%	4.9%	3.1%	0.1%	3.8%	52.3%	10.0%	13.0%	6.8%	31.5%	19.1%	34.1%	10.3%	3.8%	4.0%	6.8%	6.9%	8.8%	11.8%	8.0%	11.3%

SC	Allen Regional Med. Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
	Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Berkeley County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Carmen Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Carolina Pines	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Other	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	Chester Regional Medical Center	1.0%	0.0%	0.0%	0.1%	0.0%	2.3%	5.6%	0.3%	0.3%	3.2%	0.6%	0.3%	0.3%	0.3%	1.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.1%	7.7%	0.3%	0.1%	2.3%	0.3%	0.4%	0.3%		
	Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%		
	Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Colleton Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Georgetown County Memorial	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Grand Strand Regional Med Ctr	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.3%	0.1%	0.1%	0.0%	0.2%	0.0%	0.0%	0.0%	0.1%	0.2%	0.3%	0.0%	0.0%	0.1%		
	Greenville Memorial Med. Center	0.2%	0.0%	0.0%	0.1%	0.2%	0.8%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%		
	Grier Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Hilton Head Med Ctr & Clns	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Lancaster County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Lexington Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.1%		
	Loris Community	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	M. U. S. C. Medical Center	0.5%	0.0%	0.5%	0.5%	0.3%	1.6%	0.0%	0.3%	0.7%	1.1%	1.3%	0.9%	0.5%	0.3%	0.4%	0.4%	0.3%	0.3%	1.9%	0.0%	0.7%	1.1%	0.3%	2.0%	0.5%	0.5%				
	Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Mary Black Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	7.0%	0.0%	0.0%	0.0%	0.0%	11.5%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.1%	0.1%			
	McLeod Medical Center-Darlington	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		
	Palmetto Baptist (Columbia) Medical Ctr	0.5%	0.0%	0.0%	0.2%	0.2%	0.5%	0.0%	0.3%	0.3%	1.1%	0.0%	0.1%	0.2%	0.0%	0.2%	0.0%	0.1%	0.1%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.1%	0.1%				
	Palmetto Baptist (Easley) Medical Ctr	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				
	Palmetto Richland Memorial	1.0%	0.0%	0.1%	0.4%	0.3%	0.0%	0.0%	0.0%	0.7%	0.7%	1.3%	0.3%	0.5%	0.0%	0.2%	0.0%	0.0%	0.0%	1.3%	1.0%	0.0%	0.3%	0.0%	0.0%	0.5%					
	Pelzwood Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				
	Providence Hospital	0.0%	0.0%	0.0%	0.2%	0.0%	0.6%	1.6%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.7%	0.0%	0.1%				
	Providence Northeast	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%				
	Regional Med Ctr, Orang/Cal Cnty	0.0%	0.0%	0.0%	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%				
	Self Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%				
	Spartanburg Regional Med Ctr	0.5%	0.0%	0.0%	0.5%	0.0%	1.5%	0.5%	0.0%	0.1%	2.5%	7.5%	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	4.5%	0.0%	0.1%	0.1%	2.3%	0.2%	0.3%	0.2%				
	Springs Memorial	0.2%	0.0%	0.4%	0.2%	2.5%	0.0%	0.0%	1.1%	0.5%	0.4%	0.0%	0.3%	0.9%	0.1%	0.1%	0.0%	0.0%	0.0%	1.2%	0.4%	0.0%	0.0%	0.0%	0.0%						
	St. Francis-Greenville	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.1%	0.2%	0.0%	11.5%	0.1%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%					
	Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%					
	Tuomey Regional Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				
	Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	7.8%	0.0%	0.0%	0.0%	0.7%	13.8%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	17.0%	0.1%	0.2%				
	Westminster Community Hospital	0.5%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%				
	Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	5.7%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	1.9%	0.0%	0.0%	8.2%	0.0%	0.0%	0.1%					
SC Total		8.8%	0.0%	1.9%	2.5%	3.9%	22.5%	8.7%	3.2%	3.4%	17.0%	50.0%	2.2%	3.7%	7.9%	4.6%	1.9%	2.7%	3.0%	14.3%	12.5%	4.0%	3.4%	54.9%	30.1%	3.1%	4.0%				
Other Total		10.4%	0.0%	13.0%	82.0%	17.1%	30.2%	33.3%	8.9%	0.0%	20.9%	38.5%	13.3%	13.7%	13.0%	28.3%	20.7%	33.8%	13.3%	20.1%	16.7%	8.4%	9.7%	20.1%	41.8%	12.7%	18.9%				
Grand Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%				

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	29704	29707	29708	29710	29715	29717	2005 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	40		536	537	1,036	6	22	736	634	22	5	396	3,970
CHS-Other	1		5	84	23	2		15	13	4	3	21	171
Other	43		223	1,030	423	39	26	419	423	58	67	367	3,118
PMC	323	1	373	11	991	82	147	4,894	3,358	199	1	2,215	12,595
Grand Total	407	1	1,137	1,662	2,473	129	195	6,064	4,428	283	76	2,999	19,854

Market Share by ZIP Code

Facility Grouping	29704	29707	29708	29710	29715	29717	2005 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	9.8%	0.0%	47.1%	32.3%	41.9%	4.7%	11.3%	12.1%	14.3%	7.8%	6.6%	13.2%	20.0%
CHS-Other	0.2%	0.0%	0.4%	5.1%	0.9%	1.6%	0.0%	0.2%	0.3%	1.4%	3.9%	0.7%	0.9%
Other	10.6%	0.0%	19.6%	62.0%	17.1%	30.2%	13.3%	6.9%	9.6%	20.5%	88.2%	12.2%	15.7%
PMC	79.4%	100.0%	32.8%	0.7%	40.1%	63.6%	75.4%	80.7%	75.8%	70.3%	1.3%	73.9%	63.4%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	69	570	766	630	1,004	16	26	1,040	998	21	12	518	5,670
CHS-Other	5	16	11	75	27	1	1	25	26	1	5	30	223
Other	55	264	387	1,023	394	41	31	467	381	76	67	394	3,580
PMC	217	79	342	729	692	68	107	3,621	2,560	147	61	1,655	10,278
Grand Total	346	929	1,506	2,457	2,117	126	165	5,153	3,965	245	145	2,597	19,751

Market Share by

Facility Grouping	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	19.9%	61.4%	50.9%	25.6%	47.4%	12.7%	15.8%	20.2%	25.2%	8.6%	8.3%	19.9%	28.7%
CHS-Other	1.4%	1.7%	0.7%	3.1%	1.3%	0.8%	0.6%	0.5%	0.7%	0.4%	3.4%	1.2%	1.1%
Other	15.9%	28.4%	25.7%	41.6%	18.6%	32.5%	18.8%	9.1%	9.6%	31.0%	46.2%	15.2%	18.1%
PMC	62.7%	8.5%	22.7%	29.7%	32.7%	54.0%	64.8%	70.3%	64.6%	60.0%	42.1%	63.7%	52.0%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	117	869	959	832	1,128	26	25	1,225	1,220	46	17	639	7,103
CHS-Other	2	28	15	67	28	1	1	22	27	3	5	42	241
Other	53	359	330	894	272	31	26	492	457	61	64	372	3,411
PMC	222	108	291	850	617	96	104	4,094	3,027	194	67	1,885	11,555
Grand Total	394	1,364	1,595	2,643	2,045	154	156	5,833	4,731	304	153	2,938	22,310

Market Share by

Facility Grouping	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	29.7%	63.7%	60.1%	31.5%	55.2%	16.9%	16.0%	21.0%	25.8%	15.1%	11.1%	21.7%	31.8%
CHS-Other	0.5%	2.1%	0.9%	2.5%	1.4%	0.6%	0.6%	0.4%	0.6%	1.0%	3.3%	1.4%	1.1%
Other	13.5%	26.3%	20.7%	33.8%	13.3%	20.1%	16.7%	8.4%	9.7%	20.1%	41.8%	12.7%	15.3%
PMC	56.3%	7.9%	18.2%	32.2%	30.2%	62.3%	66.7%	70.2%	64.0%	63.8%	43.8%	64.2%	51.8%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	State	Facility	2005											
			29704	29707	29708	29710	29715	29717	29725	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	1		11	17	14		2	18	13	2		15	93
		Carolinas HealthCare System University			1	2	2			6	4			2	16
		Carolinas Medical Center	26		225	299	363	3	9	375	347	13	3	215	1,888
		Mercy Hospital	13		299	219	657	3	11	338	270	7	2	184	1,973
	NC Total		40		536	537	1,036	6	22	738	634	22	5	396	3,970
CHS-Charlotte Total			40		536	537	1,036	6	22	738	634	22	5	396	3,970
CHS-Other	NC	Carolinas HealthCare System Kings Moun			1	69	1			1	1		1	14	88
		Carolinas Medical Center Northeast			1	1	2				4			1	9
		Carolinas Specialty Hospital				1	7	2		3	1	1		2	17
		Charles A. Cannon Jr Memorial Hospital													
		Cleveland Regional Medical Center			1	7				3	2	3	2	1	19
		CMC - Lincoln Medical Center				1					1				2
		Cone Health													
		Grace Hospital													
		MedWest Haywood													
		Moses H Cone Mem Hospital				1									1
		Randolph Hospital					1								1
		St. Luke's Hospital								1					1
		Stanly Memorial Hospital				1									1
		Union Regional Med Center	1		1	1	12			2	2			2	21
		Wilkes Regional Medical Center				1									1
	NC Total		1		4	83	23	2		10	11	4	3	20	161
	SC	ArMed Health				1				1					2
		Bon Secours St. Francis Xavier								2				1	3
		Roper Hospital			1					2	2				5
	SC Total				1	1				5	2			1	10
CHS-Other Total			1		5	84	23	2		15	13	4	3	21	171

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Other	NC	Alamance Regional Med Ctr							1					1
		Albemarle Health								1				1
		Alleghany Memorial Hosp												
		Annie Penn Hospital								1				1
		Brunswick Hospital												
		Bryan Mem Behavioral Hs								1				1
		Caldwell Memorial Hospital												
		Cannon Memorial								1				1
		Cape Fear Valley Hlth Sys							1				1	2
		CarePartners Rehabilitation Hospital												
		CarolinaEast Medical Ctr												
		CaroMont Health Inc.	3	7	747	2	5	2	5	7	5	18	155	956
		Catawba Valley Medical Center								3			1	4
		Craven Regional Med Ctr											1	1
		Davis Medical Center							1					1
		Duke Raleigh												
		Duke University Med Ctr	1	9	10	8		1	19	17			7	72
		Durham Regional Hospital											2	2
		Fellowship Hall			1	2			1	1				5
		First Health Moore Rgnl												
		Forsyth Memorial Hospital	1			1								2
		Frye Regional Med Center			2									2
		High Point Regional Hosp	1		1				1					3
		Highlands-Cashiers Hosp												
		Hugh Chatham Mem Hospital											1	1
		Iredell Health System			1	1			1					3
		Johnston Medical Center-Smithfield												
		Kindred Hosp Greensboro			1									1
		Lake Norman Reg Med Ctr		1	1	1				3				6
		Lexington Memorial Hospital												
		Margaret R. Pardee Memorial Hospital				1								1
		Medical Park Hospital												
		MedWest Harris												
		Mission Health System			3	1							2	6
		Murphy Medical Center												
		NC Specialty Hospital												
		New Hanover Regional M.C.								3			1	4
		North Carolina Specialty Hospital												
		Park Ridge Health				1		1					2	4
		Person County Mem Hosp			1									1
		Pitt County Memorial Hospital	1			2							2	5
		Presb Orthopaedic Hosp	4	27	31	47	4	1	47	42		3	23	229
		Presbyterian Hospital	5	136	168	223	1	4	131	153	5	6	79	911
		Presbyterian Hospital Huntersville			4					1				5
		Presbyterian Hospital Matthews		13	11	33			6	8			6	78
		Psychiatric Solutions of NC dba: Holly												
		Rex Healthcare												
		Rowan Regional Med Center							2	2				4
		Rutherford Hospital											1	1
		Scotland Health Care Sys												
		Stanly Regional Medical Center												
		The NC Baptist Hospitals		5	5	2			6	6		1	10	35
		Thomasville Medical Center												
		Transylvania Reg Hosp												
		UNC Hospitals		3	2	1			2	22		1	7	38
		Vidant Medical Center												
		WakeMed												
		WakeMed Cary												
		Watauga Medical Center												
	NC Total		15	201	989	326	10	9	224	271	10	29	300	2,385

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

	SC	Allen Regional Med Center											1	1
		Allen Bennett Memorial							1					1
		Bamberg County Memorial												
		Beaufort Memorial							2	1	1			4
		Cannon Memorial								1				1
		Carolina Pines												
		Other	1		1				1	2				5
		Chester Regional Medical Center	4			1	1	3	11	19	12	9		9	69
		Chesterfield General													
		Coastal Carolina Hospital													
		Colleton Medical Center													
		Conway Hospital, Inc.													
		East Cooper Regional Med Ctr													
		Fairfield Memorial								1	4				5
		Georgetown County Memorial													
		Grand Strand Regional Med Ctr				1	1								2
		Greenville Memorial Med. Center				4	2		1	2	1			2	12
		Greer Memorial Hospital				2	5	1		2	3			4	17
		Hilton Head Med Ctr & Clins													
		Kershaw County Medical Ctr													
		Laurens County Healthcare									1				1
		Lexington Medical Center					1			8	3				12
		Loris Community				1									1
		M U S C Medical Center	2		8	9	7	2		21	32	3	1	9	92
		Marion County Medical Ctr													
		Marlboro Park													
		Mary Black Memorial			1			9					9		19
		McLeod Medical Center-Darlington													
		McLeod Medical Center-Dillonn													
		Mcleod Regional													
		Newberry County Memorial Hospital													
		Oconee Memorial					1			1				1	3
		Palmetto Baptist (Columbia) Medical Ctr	2			4	5	1		13	12	3		3	43
		Palmetto Baptist (Easley) Medical Ctr					1								1
		Palmetto Richland Memorial	4		1	7	8			36	29	2	1	9	97
		Patewood Memorial Hospital													
		Providence Hospital				3		1	3	2	4			2	15
		Providence Northeast	1						1	5	2				9
		Regional Med Ctr, Oburg/Cal Cnty								1					1
		Self Memorial Hospital								5	1				6
		Spartanburg Regional Med Ctr	1			4		2	1	2	4	8	6	7	35
		Springs Memorial	11		4	4	64			66	24	1		10	184
		St. Francis-Greenville			8					4	11		9	3	35
		Trident Medical Center									2			2	4
		Tuomey Regional Medical Center			1						3				4
		Upstate Carolina Medical Center						10				2	12	3	27
		Village Hospital													
		Waccamaw Community Hospital	1			1	1			3				2	8
		Wallace Thomson Hospital										19			19
	SC Total		27		22	41	97	29	17	195	152	48	38	67	733
Other Total			43		223	1,030	423	39	26	419	423	58	67	367	3,118
PMC	SC	Piedmont Medical Center	323	1	373	11	991	52	147	4,894	3,358	199	1	2,215	12,565
Grand Total			407	1	1,137	1,882	2,473	129	195	6,064	4,428	253	76	2,999	19,854

2005, 2008 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Market Share by ZIP Code

Facility Grouping	State	Facility	2005 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.2%	0.0%	1.0%	1.0%	0.6%	0.0%	1.0%	0.3%	0.3%	0.7%	0.0%	0.5%	0.5%
		Carolinas HealthCare System University	0 0%	0 0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
		Carolinas Medical Center	5 4%	0.0%	20 7%	18.0%	14.7%	2.3%	4 6%	8.2%	7.5%	4.8%	3.8%	7.2%	9.5%
		Mercy Hospital	3.2%	0.0%	25 4%	13.2%	26.6%	2.3%	5 8%	5.6%	6.1%	2.5%	2.6%	5.5%	9.9%
	NC Total		9.5%	0.0%	47.1%	32.3%	41.9%	4.7%	11.3%	12.1%	14.3%	7.8%	6.6%	13.2%	20.0%
CHS-Charlotte Total			9.5%	0.0%	47.1%	32.3%	41.9%	4.7%	11.3%	12.1%	14.3%	7.8%	6.6%	13.2%	20.0%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.0%	0.1%	4.2%	0.0%	0 0%	0 0%	0 0%	0 0%	0.0%	1 3%	0.5%	0.4%
		Carolinas Medical Center Northeast	0 0%	0.0%	0.1%	0 1%	0.1%	0.0%	0.0%	0 0%	0 1%	0.0%	0.0%	0 0%	0.0%
		Carolinas Specialty Hospital	0 0%	0.0%	0.0%	0.1%	0.3%	1.6%	0.0%	0 0%	0 0%	0.4%	0.0%	0.1%	0 1%
		Charles A. Cannon Jr Memorial Hospital	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.0%	0.1%	0 4%	0.0%	0.0%	0.0%	0.0%	0.0%	1.1%	2.6%	0.0%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0 0%	0.1%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%
		Cone Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		MedWest Haywood	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		St. Luke's Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.1%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.2%	0.0%	0.1%	0 1%	0 6%	0 0%	0 0%	0.0%	0 0%	0.0%	0 0%	0 1%	0 1%
		Wilkes Regional Medical Center	0 0%	0.0%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
	NC Total		0.2%	0.0%	0.4%	5.0%	0.9%	1.6%	0.0%	0.2%	0.2%	1.4%	3.9%	0.7%	0.5%
	SC	AnMed Health	0 0%	0.0%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Ben Secours St. Francis Xavier	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%
		Roper Hospital	0 0%	0 0%	0.1%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%
	SC Total		0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
CHS-Other Total			0.2%	0.0%	0.4%	5.1%	0.9%	1.6%	0.0%	0.2%	0.3%	1.4%	3.9%	0.7%	0.9%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Other	NC	Alamance Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.7%	0.0%	0.6%	44.8%	0.1%	3.9%	1.0%	0.1%	0.2%	1.8%	23.7%	5.2%	4.8%
		Catawba Valley Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.2%	0.0%	0.6%	0.6%	0.3%	0.0%	0.6%	0.3%	0.4%	0.0%	0.0%	0.2%	0.4%
		Durham Regional Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Iredell Health System	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Lexington Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M C.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		North Carolina Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.2%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Presb Orthopaedic Hosp	1.0%	0.0%	2.4%	1.9%	1.9%	3.1%	0.5%	0.8%	0.9%	0.0%	3.9%	0.8%	1.2%
		Presbyterian Hospital	1.2%	0.0%	12.0%	10.1%	9.0%	0.8%	2.1%	2.2%	3.5%	1.8%	7.9%	2.6%	4.6%
		Presbyterian Hospital Huntersville	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Presbyterian Hospital Matthews	0.0%	0.0%	1.1%	0.7%	1.3%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.2%	0.4%
		Psychiatric Solutions of NC dba. Holly	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rutherford Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		The NC Baptist Hospitals	0.0%	0.0%	0.4%	0.3%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	1.3%	0.3%	0.2%
		Thomasville Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.0%	0.0%	0.3%	0.1%	0.0%	0.0%	0.0%	0.0%	0.5%	0.0%	1.3%	0.2%	0.2%
		Vidant Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		3.9%	0.0%	17.7%	59.5%	13.2%	7.8%	4.8%	3.7%	6.1%	3.8%	38.2%	10.0%	12.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

	SC	Aiken Regional Med. Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Other	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	1.0%	0.0%	0.0%	0.1%	0.0%	2.3%	5.6%	0.3%	0.3%	3.2%	0.0%	0.3%	0.3%
		Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Colleton Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.5%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Greenville Memorial Med. Center	0.0%	0.0%	0.0%	0.1%	0.2%	0.8%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clins	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%
		Loris Community	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C. Medical Center	0.5%	0.0%	0.5%	0.5%	0.3%	1.8%	0.0%	0.3%	0.7%	1.1%	1.3%	0.3%	0.5%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	7.0%	0.0%	0.0%	0.0%	0.0%	11.8%	0.0%	0.1%
		McLeod Medical Center-Darlington	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.5%	0.0%	0.0%	0.2%	0.2%	0.8%	0.0%	0.2%	0.3%	1.1%	0.0%	0.1%	0.2%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	1.0%	0.0%	0.1%	0.4%	0.3%	0.0%	0.0%	0.6%	0.7%	0.7%	1.3%	0.3%	0.5%
		Patewood Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.0%	0.2%	0.0%	0.8%	1.8%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Providence Northeast	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Regional Med Ctr, Cburg/Cal Cnty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.2%	0.0%	0.0%	0.2%	0.0%	1.6%	0.5%	0.0%	0.1%	2.6%	7.9%	0.2%	0.2%
		Springs Memorial	2.7%	0.0%	0.4%	0.2%	2.6%	0.0%	0.0%	1.1%	0.5%	0.4%	0.0%	0.3%	0.9%
		St. Francis-Greenville	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.1%	0.2%	0.0%	11.8%	0.1%	0.2%
		Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Tuomey Regional Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	7.8%	0.0%	0.0%	0.0%	0.7%	16.8%	0.1%	0.1%
		Village Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%	0.1%
	SC Total		6.5%	0.0%	1.9%	2.5%	3.9%	22.5%	8.7%	3.2%	3.4%	17.0%	60.0%	2.2%	3.7%
Other Total			10.5%	0.0%	19.5%	62.0%	17.1%	30.2%	13.3%	6.9%	9.5%	20.5%	88.2%	12.2%	15.7%
PMC	SC	Piedmont Medical Center	78.4%	100.0%	32.5%	0.7%	40.1%	83.5%	78.4%	80.7%	76.5%	70.3%	1.3%	73.5%	63.4%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	State	Facility	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte		12	12	26	13		1	23	24			8	119
		Carolinas HealthCare System University		1	2	6	7			4	2			3	25
		Carolinas Medical Center	30	248	351	342	383	10	19	585	564	17	10	322	2,881
		Mercy Hospital	39	309	401	256	601	6	6	428	408	4	2	185	2,645
	NC Total		69	570	766	630	1,004	16	26	1,040	998	21	12	518	5,670
CHS-Charlotte Total			69	570	766	630	1,004	16	26	1,040	998	21	12	518	5,670
CHS-Other	NC	Carolinas HealthCare System Kings Moun	1	1	2	46	2	1			3	1	1	15	75
		Carolinas Medical Center Northeast		1	1	1	4			1	3			1	12
		Carolinas Specialty Hospital	1	1	2	3	6			12	9			3	37
		Charles A. Cannon Jr. Memorial Hospital													
		Cleveland Regional Medical Center	1			16	1			1			3	5	27
		CMC - Lincoln Medical Center									1			1	2
		Cone Health			1					2					3
		Grace Hospital													
		MedWest Haywood		1	1										2
		Moses H Cone Mem Hospital													
		Randolph Hospital													
		St. Luke's Hospital									1				1
		Stanly Memorial Hospital		1											1
		Union Regional Med Center	2	11	4	7	12		1	7	5		1	3	53
		Wilkes Regional Medical Center													
	NC Total		5	16	11	75	25	1	1	23	22	1	5	28	213
	SC	AnMed Health					1				1				2
		Bon Secours St. Francis Xavier								1	1			1	3
		Roper Hospital					1			1	2			1	5
	SC Total						2			2	4			2	10
CHS-Other Total			5	16	11	75	27	1	1	25	26	1	5	30	223

2008, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Other	NC	Alamance Regional Med Ctr					2					1			3
		Albemarle Health													
		Alleghany Memorial Hosp													
		Annie Penn Hospital													
		Brunswick Hospital												1	1
		Brynn Marr Behavioral Hs													
		Caldwell Memorial Hospital												2	2
		Cannon Memorial													
		Cape Fear Valley Hlth Sys				1									1
		CarePartners Rehabilitation Hospital													
		CarolinaEast Medical Ctr								1					1
		CaroMont Health Inc.	1		7	722	2	4	2	10	5	10	14	118	895
		Catawba Valley Medical Center													
		Craven Regional Med Ctr													
		Davis Medical Center													
		Duke Raleigh							1		1				2
		Duke University Med Ctr	1	9	12	12	8			12	30	1	1	5	88
		Durham Regional Hospital								3				1	4
		Fellowship Hall													
		First Health Moore Rgnl			1										1
		Forsyth Memorial Hospital									2			3	5
		Frye Regional Med Center				1	1								2
		High Point Regional Hosp				1					1				2
		Highlands-Cashiers Hosp									1				1
		Hugh Chatham Mem Hospital												3	3
		Iredell Health System								3					3
		Johnston Medical Center-Smithfield													
		Kindred Hosp Greensboro				1									1
		Lake Norman Reg Med Ctr			2	3	1			3	1			1	11
		Lexington Memorial Hospital													
		Margaret R. Pardee Memorial Hospital								1					1
		Medical Park Hospital													
		MedWest Harris								1					1
		Mission Health System		1			1				1			2	5
		Murphy Medical Center								1					1
		NC Specialty Hospital		1											1
		New Hanover Regional M.C.		1	1						3			3	8
		North Carolina Specialty Hospital													
		Park Ridge Health								1	2				3
		Person County Mem Hosp													
		Pitt County Memorial Hospital								1	1			1	3
		Presb Orthopaedic Hosp	2	29	35	27	35	2	2	41	31	1	2	23	230
		Presbyterian Hospital	19	133	257	186	207	2	4	165	137	6	5	104	1,205
		Presbyterian Hospital Huntersville			1	6	1				2			2	12
		Presbyterian Hospital Matthews		45	19	6	39			16	14	1		7	148
		Psychiatric Solutions of NC dba. Holly													
		Rex Healthcare													
		Rowan Regional Med Center			1	1				4	3			2	11
		Rutherford Hospital			1										1
		Scotland Health Care Sys			1					1					2
		Stanly Regional Medical Center													
		The NC Baptist Hospitals		4	2	12	2		1	16	7			6	50
		Thomasville Medical Center			1		1								2
		Transylvania Reg Hosp												1	1
		UNC Hospitals			4	11	1			1	2	1		2	22
		Vidant Medical Center													
		WakeMed													
		WakeMed Cary													
		Watauga Medical Center			1						1			1	3
	NC Total		23	220	348	970	301	8	10	280	245	21	22	288	2,734

2005, 2008 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

	SC	Aiken Regional Med. Center		1							1					2
		Allen Bennett Memorial														
		Bamberg County Memorial														
		Beaufort Memorial			1	1									1	1
		Cannon Memorial														2
		Carolina Pines								1	1				1	3
		Other					1									1
		Chester Regional Medical Center	2			1	2	1	14	18	6	15			9	68
		Chesterfield General								1	1					2
		Coastal Carolina Hospital														
		Colleton Medical Center			1											1
		Conway Hospital, Inc.				1	1				1				2	5
		East Cooper Regional Med Ctr				1				2	1				1	5
		Fairfield Memorial														
		Georgetown County Memorial		1							1					2
		Grand Strand Regional Med Ctr			2	1	1			1	3				3	11
		Greenville Memorial Med. Center			1	2				7					3	13
		Greer Memorial Hospital											1			1
		Hilton Head Med Ctr & Clins								2						2
		Kershaw County Medical Ctr				1	1									2
		Laurens County Healthcare														
		Lexington Medical Center	2		3	1	3	1		8	7	1			6	32
		Loris Community			1						1					2
		M. U. S. C. Medical Center	1	1	3	11	11	1	1	32	37	1	1		18	118
		Marion County Medical Ctr														
		Marlboro Park														
		Mary Black Memorial				1	2	4		1	2	4	2		4	20
		McLeod Medical Center-Darlington														
		McLeod Medical Center-Dillonn				1										1
		Mcleod Regional	1		2	2	3			3					1	12
		Newberry County Memorial Hospital														
		Oconee Memorial				2									2	4
		Palmetto Baptist (Columbia) Medical Ctr			3	3	3			4	4	3			8	28
		Palmetto Baptist (Easley) Medical Ctr								1						1
		Palmetto Richland Memorial	2	4	3	5	14	2	2	33	12	1			9	87
		Patewood Memorial Hospital			1	1										2
		Providence Hospital			1				2	3	6				3	15
		Providence Northeast			2		1			2	3				1	9
		Regional Med Ctr, Oburg/Cal Cnty													2	2
		Self Memorial Hospital		1	2	1					3					7
		Spartanburg Regional Med Ctr			4	5	3	6	1	6	3	14	14		6	62
		Springs Memorial	24	36	8	8	46	2	1	52	37	1			20	235
		St. Francis-Greenville			1	4	1			3					1	10
		Trident Medical Center						3		2	1					6
		Tuomey Regional Medical Center								1	1					2
		Upstate Caroline Medical Center						13		2	1		26	4		46
		Village Hospital			1											1
		Waccamaw Community Hospital			1					2	3		1	1		8
		Wallace Thomson Hospital										15				15
	SC Total		32	44	41	53	93	33	21	187	136	65	45	100		849
Other Total			55	264	387	1,023	394	41	31	467	391	76	67	394		3,590
PMC	SC	Piedmont Medical Center	217	79	342	729	692	68	107	3,621	2,850	147	81	1,668		10,278
Grand Total			348	929	1,508	2,457	2,117	128	166	5,163	3,985	246	145	2,597		15,751

2005, 2008 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
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Market Share by ZIP Code

Facility Grouping	State	Facility	2008 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.0%	1.3%	0.5%	1.1%	0.6%	0.0%	0.5%	0.4%	0.6%	0.0%	0.0%	0.3%	0.5%
		Carolinas HealthCare System University	0.0%	0.1%	0.1%	0.2%	0.3%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
		Carolinas Medical Center	8.7%	26.7%	23.3%	13.9%	10.1%	7.9%	11.5%	11.4%	14.2%	6.9%	6.9%	12.4%	14.0%
		Mercy Hospital	11.3%	33.3%	26.6%	10.4%	28.4%	4.8%	3.8%	8.3%	10.3%	1.9%	1.4%	7.1%	13.4%
	NC Total		19.9%	61.4%	50.9%	25.5%	47.4%	12.7%	15.8%	20.2%	25.2%	8.8%	8.3%	19.9%	28.7%
CHS-Charlotte Total			19.9%	61.4%	50.9%	25.5%	47.4%	12.7%	15.8%	20.2%	25.2%	8.8%	8.3%	19.9%	28.7%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.3%	0.1%	0.1%	2.0%	0.1%	0.8%	0.0%	0.0%	0.1%	0.4%	0.7%	0.6%	0.4%
		Carolinas Medical Center Northeast	0.0%	0.1%	0.1%	0.0%	0.2%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%
		Carolinas Specialty Hospital	0.3%	0.1%	0.1%	0.1%	0.3%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.1%	0.2%
		Charles A. Cannon Jr Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.3%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.1%	0.2%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.6%	1.2%	0.3%	0.3%	0.6%	0.0%	0.6%	0.1%	0.1%	0.0%	0.7%	0.1%	0.3%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		1.4%	1.7%	0.7%	3.1%	1.2%	0.8%	0.6%	0.4%	0.6%	0.4%	3.4%	1.1%	1.1%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
CHS-Other Total			1.4%	1.7%	0.7%	3.1%	1.3%	0.8%	0.6%	0.5%	0.7%	0.4%	3.4%	1.2%	1.1%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Other	NC	Alamance Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.3%	0.0%	0.5%	29.4%	0.1%	3.2%	1.2%	0.2%	0.1%	4.1%	8.7%	4.5%	4.5%
		Catawba Valley Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.3%	0.6%	0.6%	0.5%	0.4%	0.0%	0.0%	0.2%	0.8%	0.4%	0.7%	0.2%	0.4%
		Durham Regional Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Iredell Health System	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
		Lexington Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R Pardee Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M.C	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%
		North Carolina Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	0.8%	3.1%	2.3%	1.1%	1.7%	1.8%	1.2%	0.8%	0.8%	0.4%	1.4%	0.8%	1.2%
		Presbyterian Hospital	5.5%	14.3%	17.1%	6.8%	8.8%	1.8%	2.4%	3.2%	3.5%	2.4%	3.4%	4.0%	6.1%
		Presbyterian Hospital Huntersville	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Presbyterian Hospital Matthews	0.0%	4.8%	1.3%	0.2%	1.8%	0.0%	0.0%	0.3%	0.4%	0.4%	0.0%	0.3%	0.7%
		Psychiatric Solutions of NC dba: Holly	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
		Rutherford Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		The NC Baptist Hospitals	0.0%	0.4%	0.1%	0.5%	0.1%	0.0%	0.0%	0.3%	0.2%	0.0%	0.0%	0.2%	0.3%
		Thomasville Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.0%	0.0%	0.3%	0.4%	0.0%	0.0%	0.0%	0.0%	0.1%	0.4%	0.0%	0.1%	0.1%
		Vidant Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		6.6%	23.7%	23.0%	39.5%	14.2%	6.3%	6.1%	5.4%	6.2%	8.8%	16.2%	11.1%	13.8%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

	SC	Aiken Regional Med. Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Other	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	0.5%	0.0%	0.0%	0.0%	0.1%	0.6%	8.5%	0.3%	0.2%	6.1%	0.0%	0.3%	0.3%	0.3%
		Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Colleton Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.1%
		Greenville Memorial Med. Center	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clins	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.8%	0.0%	0.2%	0.0%	0.1%	0.5%	0.0%	0.2%	0.2%	0.4%	0.0%	0.2%	0.2%	0.2%
		Loris Community	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C Medical Center	0.3%	0.1%	0.2%	0.4%	0.5%	0.8%	0.5%	0.6%	0.9%	0.4%	0.7%	0.7%	0.5%	0.5%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.0%	0.0%	0.1%	3.2%	0.0%	0.0%	0.1%	1.6%	1.4%	0.2%	0.1%	0.1%
		McLeod Medical Center-Darlington	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.3%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.0%	0.0%	0.2%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	1.2%	0.0%	0.3%	0.1%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.6%	0.4%	0.2%	0.2%	0.7%	1.8%	1.2%	0.6%	0.3%	0.4%	0.0%	0.3%	0.4%	0.4%
		Patewood Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	1.2%	0.1%	0.2%	0.0%	0.0%	0.1%	0.1%	0.1%
		Providence Northeast	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Regional Med Ctr, Cburg/Cel Cnty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.0%	0.0%	0.3%	0.2%	0.1%	4.8%	0.6%	0.1%	0.1%	5.7%	9.7%	0.2%	0.3%	0.3%
		Springs Memorial	6.8%	3.9%	0.5%	0.3%	2.2%	1.8%	0.6%	1.0%	0.9%	0.4%	0.0%	0.8%	1.5%	1.5%
		St. Francis-Greenville	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	2.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	10.3%	0.0%	0.0%	0.0%	0.0%	17.9%	0.2%	0.2%	0.2%
		Village Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.7%	0.0%	0.0%	0.0%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	6.1%	0.0%	0.0%	0.1%	0.1%
	SC Total		9.2%	4.7%	2.7%	2.2%	4.4%	28.2%	12.7%	3.6%	3.4%	22.4%	31.0%	4.1%	4.3%	4.3%
Other Total			15.9%	26.4%	25.7%	41.6%	18.5%	32.5%	18.5%	9.1%	9.6%	31.0%	48.2%	15.2%	18.1%	18.1%
PMC	SC	Piedmont Medical Center	62.7%	8.5%	22.7%	29.7%	32.7%	54.0%	64.8%	70.3%	64.8%	60.0%	42.1%	63.7%	62.0%	62.0%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	State	Facility	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	1	21	18	23	10	2		23	25	1	4	16	144
		Carolinas HealthCare System University		3	8	4	17			5	5	1	1	1	45
		Carolinas Medical Center	67	302	427	397	460	17	19	691	663	26	9	352	3,240
		Mercy Hospital	59	543	506	408	621	7	6	606	627	18	3	270	3,674
	NC Total		117	869	959	832	1,128	26	25	1,225	1,220	46	17	639	7,103
CHS-Charlotte Total			117	869	959	832	1,128	26	25	1,225	1,220	46	17	639	7,103
CHS-Other	NC	Carolinas HealthCare System Kings Moun			1	37	3			1	3	1	1	8	55
		Carolinas Medical Center Northeast		8	5	4	5			4	8			2	35
		Carolinas Specialty Hospital	1	2		3	3			10	6			9	34
		Charles A. Cannon Jr. Memorial Hospital				2				1	1			1	5
		Cleveland Regional Medical Center		1		10							4	11	26
		CMC - Lincoln Medical Center				2									2
		Cone Health			1										1
		Grace Hospital		1	1	1				1	2			1	7
		MedWest Haywood			1										1
		Moses H Cone Mem Hospital													
		Randolph Hospital													
		St. Luke's Hospital													
		Stanly Memorial Hospital													
		Union Regional Med Center	1	15	5	7	13	1		2	6	2		10	63
		Wilkes Regional Medical Center													
	NC Total		2	26	14	66	24	1		19	27	3	5	42	229
	SC	AnMed Health				1				1					2
		Bon Secours St. Francis Xavier			1		2			1					4
		Roper Hospital		2			2		1	1					6
	SC Total			2	1	1	4		1	3					12
CHS-Other Total			2	28	15	67	28	1	1	22	27	3	5	42	241

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Other	NC	Alamance Regional Med Ctr		2												2
		Albemarle Health														
		Alleghany Memorial Hosp														
		Annie Penn Hospital								1						1
		Brunswick Hospital			1										1	2
		Brynn Marr Behavioral Hs														
		Caldwell Memorial Hospital				4										4
		Cannon Memorial														
		Cape Fear Valley Hlth Sys									1					1
		CarePartners Rehabilitation Hospital			3											3
		CarolinaEast Medical Ctr														
		CaroMont Health Inc.		1	8	621	2	4	4	7	7	7	13	151		825
		Catawba Valley Medical Center		1		1				1						3
		Craven Regional Med Ctr														
		Davis Medical Center	2		1	8	1				3			3		13
		Duke Raleigh				1										1
		Duke University Med Ctr	2	4	18	7	6			7	18			6		66
		Durham Regional Hospital			1		1	1								3
		Fellowship Hall														
		First Health Moore Rgnl									1					1
		Forsyth Memorial Hospital			2											2
		Frye Regional Med Center		1	2	2				1						6
		High Point Regional Hosp									1					1
		Highlands-Cashiers Hosp														
		Hugh Chatham Mem Hospital														
		Iredell Health System									1					1
		Johnston Medical Center-Smithfield									1					1
		Kindred Hosp Greensboro									1					1
		Lake Norman Reg Med Ctr			2	3	2			3	2					12
		Lexington Memorial Hospital		1												1
		Margaret R. Pardee Memorial Hospital		1	1	1										3
		Medical Park Hospital									1					1
		MedWest Harris														
		Mission Health System			7	2	3				1			2		15
		Murphy Medical Center														
		NC Specialty Hospital														
		New Hanover Regional M.C		1	2		1			1						5
		North Carolina Specialty Hospital			1											1
		Park Ridge Health		1												1
		Person County Mem Hosp														
		Pitt County Memorial Hospital														
		Presb Orthopaedic Hosp	6	31	29	29	23		1	38	47	4	1	22		229
		Presbyterian Hospital	9	157	193	123	139	4	2	146	176	6	3	76		1,034
		Presbyterian Hospital Huntersville		4	2	2					5			1		14
		Presbyterian Hospital Matthews	2	76	14	10	24			6	10			9		150
		Psychiatric Solutions of NC dba: Holly			2		1									3
		Rex Healthcare									1					1
		Rowan Regional Med Center		1	2	1	1			1						6
		Rutherford Hospital								1						1
		Scotland Health Care Sys														
		Stanly Regional Medical Center			1	2				1	1		1	1		7
		The NC Baptist Hospitals	1	4	4	6	1			9	15			6		46
		Thomasville Medical Center			1		1							1		3
		Transylvania Reg Hosp			1											1
		UNC Hospitals	1	7	6	5	4			3	2			3		31
		Vidant Medical Center		1												1
		WakeMed					1			1	3					5
		WakeMed Cary								1						1
		Watauga Medical Center									1					1
	NC Total		23	298	304	823	211	9	7	228	297	17	16	282		2,510

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
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Sources: SC Office of Research and Statistics and Thomson Reuters

	SC	Aiken Regional Med. Center	2	1		1			2	3				9
		Allen Bennett Memorial							1					1
		Bamberg County Memorial											1	1
		Beaufort Memorial												
		Cannon Memorial			1	1				2			2	6
		Carolina Pines		1		1		1	2	1				6
		Other	4			1	2	12	18	4	7		12	61
		Chester Regional Medical Center			1				1		1			3
		Chesterfield General							1					1
		Coastal Carolina Hospital							1					1
		Colleton Medical Center				1	1			1				3
		Conway Hospital, Inc.		3	1	1								5
		East Cooper Regional Med Ctr			1									1
		Fairfield Memorial												
		Georgetown County Memorial	1	1	1	1	5	1	8	9	1		1	27
		Grand Strand Regional Med Ctr			1	3	2		4	4			1	15
		Greenville Memorial Med. Center			1	2								3
		Greer Memorial Hospital			1				1					2
		Hilton Head Med Ctr & Clns				3	1			1				5
		Kershaw County Medical Ctr		1					1					2
		Laurens County Healthcare			1	3	4		9	7				24
		Lexington Medical Center			1	1			1	1				4
		Loris Community	1	6	6	6	7	3	40	50	1	3	15	140
		M U S C Medical Center							1					1
		Marion County Medical Ctr						1					1	2
		Marlboro Park				3	2	1	5	1		1	4	17
		Mary Black Memorial								1				1
		McLeod Medical Center-Darlington												
		McLeod Medical Center-Dillonn							2					2
		Mcleod Regional		1										1
		Newberry County Memorial Hospital							1	2			1	4
		Oconee Memorial		3		2	3		9	10			2	29
		Palmetto Baptist (Columbia) Medical Ctr												
		Palmetto Baptist (Easley) Medical Ctr	2	3		16	11	2	57	24	1		16	134
		Palmetto Richland Memorial											1	1
		Patewood Memorial Hospital			1	1	3		4	5		1		15
		Providence Hospital			1	1			3	3			1	9
		Providence Northeast		1					4					5
		Regional Med Ctr, Oburg/Cal Cnty			1					4				5
		Self Memorial Hospital				7	1	7	5	3	7	14	9	52
		Spartanburg Regional Med Ctr	20	43	4	9	17	1	69	18			16	197
		Springs Memorial		1		1			14	4			1	21
		St. Francis-Greenville			2		1		1				1	5
		Trident Medical Center		1										1
		Tuomey Regional Medical Center				3		9			1	27	3	43
		Upstate Carolina Medical Center												
		Village Hospital			1	1	1		2	2			1	8
		Waccamaw Community Hospital						3			25			28
		Wallace Thomson Hospital	30	68	26	71	61	22	19	268	180	44	48	60	901
	SC Total		53	359	330	894	272	31	26	492	457	61	64	372	3,411
Other Total			222	108	291	850	617	95	104	4,094	3,027	194	87	1,585	11,585
PMC	SC	Piedmont Medical Center	394	1,384	1,595	2,843	2,048	154	155	5,833	4,731	304	153	2,938	22,310
Grand Total															

2005, 2008 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
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Market Share by ZIP Code

Facility Grouping	State	Facility	2011 29704	29707	29708	29710	29715	29717	29725	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.3%	1.5%	1.1%	0.8%	0.5%	1.3%	0.0%	0.4%	0.5%	0.3%	2.6%	0.5%	0.8%
		Carolinas HealthCare System University	0.0%	0.2%	0.5%	0.2%	0.8%	0.0%	0.0%	0.1%	0.1%	0.3%	0.7%	0.0%	0.2%
		Carolinas Medical Center	14.5%	22.1%	28.8%	15.0%	23.5%	11.0%	12.2%	10.1%	11.9%	6.5%	5.9%	12.0%	14.6%
		Mercy Hospital	15.0%	38.8%	31.7%	15.4%	30.4%	4.5%	3.8%	10.4%	13.3%	5.9%	2.0%	9.2%	16.5%
	NC Total		29.7%	63.7%	60.1%	31.5%	55.2%	16.9%	16.0%	21.0%	25.5%	15.1%	11.1%	21.7%	31.5%
CHS-Charlotte Total			29.7%	63.7%	60.1%	31.5%	55.2%	16.9%	16.0%	21.0%	25.5%	15.1%	11.1%	21.7%	31.5%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.0%	0.1%	1.4%	0.1%	0.0%	0.0%	0.0%	0.1%	0.3%	0.7%	0.3%	0.2%
		Carolinas Medical Center Northeast	0.0%	0.4%	0.3%	0.2%	0.2%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.1%	0.2%
		Carolinas Specialty Hospital	0.3%	0.1%	0.0%	0.1%	0.1%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.3%	0.2%
		Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.1%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.8%	0.4%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.3%	1.2%	0.3%	0.3%	0.6%	0.6%	0.0%	0.0%	0.1%	0.7%	0.0%	0.3%	0.3%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		0.5%	1.8%	0.8%	2.5%	1.2%	0.6%	0.0%	0.3%	0.6%	1.0%	3.3%	1.4%	1.0%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.1%	0.1%	0.0%	0.2%	0.0%	0.6%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
CHS-Other Total			0.5%	2.1%	0.9%	2.5%	1.4%	0.6%	0.6%	0.4%	0.6%	1.0%	3.3%	1.4%	1.1%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Other	NC	Alamance Regional Med Ctr	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.0%	0.1%	0.5%	23.5%	0.1%	2.6%	2.6%	0.1%	0.1%	2.3%	8.5%	5.1%	3.7%
		Catawba Valley Medical Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.5%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.5%	0.3%	1.1%	0.3%	0.3%	0.0%	0.0%	0.1%	0.3%	0.0%	0.0%	0.2%	0.3%
		Durham Regional Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Iredell Health System	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
		Lexington Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.0%	0.4%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M C.	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		North Carolina Specialty Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	1.6%	2.3%	1.6%	1.1%	1.1%	0.0%	0.6%	0.6%	1.0%	1.3%	0.7%	0.7%	1.0%
		Presbyterian Hospital	2.3%	11.5%	12.1%	4.7%	6.8%	2.6%	1.3%	2.5%	3.7%	2.0%	2.0%	2.6%	4.6%
		Presbyterian Hospital Huntersville	0.0%	0.3%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%
		Presbyterian Hospital Matthews	0.6%	5.5%	0.9%	0.4%	1.2%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.3%	0.7%
		Psychiatric Solutions of NC dba: Holly	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rutherford Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%
		The NC Baptist Hospitals	0.3%	0.3%	0.3%	0.2%	0.0%	0.0%	0.0%	0.2%	0.3%	0.0%	0.0%	0.2%	0.2%
		Thomasville Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.3%	0.5%	0.4%	0.2%	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%
		Vidant Medical Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		WakeMed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		5.8%	21.5%	19.1%	31.1%	10.3%	6.8%	4.5%	3.9%	6.3%	5.6%	11.8%	9.8%	11.3%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

	SC	Aiken Regional Med. Center	0.5%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Other	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	1.0%	0.0%	0.0%	0.0%	0.1%	0.0%	7.7%	0.3%	0.1%	2.3%	0.0%	0.4%	0.3%
		Chesterfield General	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%
		Colleton Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.3%	0.1%	0.1%	0.0%	0.2%	0.6%	0.0%	0.1%	0.2%	0.3%	0.0%	0.0%	0.1%
		Greenville Memorial Med. Center	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clins	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.0%	0.0%	0.1%	0.1%	0.2%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.1%
		Loris Community	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C Medical Center	0.3%	0.4%	0.4%	0.3%	0.3%	1.5%	0.0%	0.7%	1.1%	0.3%	2.0%	0.5%	0.5%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.0%	0.1%	0.1%	0.5%	0.0%	0.1%	0.0%	0.0%	0.7%	0.1%	0.1%
		McLeod Medical Center-Darlington	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Newberry County Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.0%	0.2%	0.0%	0.1%	0.1%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.1%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.5%	0.2%	0.0%	0.6%	0.5%	0.0%	1.3%	1.0%	0.5%	0.3%	0.0%	0.6%	0.6%
		Patewood Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.7%	0.0%	0.1%
		Providence Northeast	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%
		Regional Med Ctr, Oburg/Cal Cnty	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.0%	0.0%	0.0%	0.3%	0.0%	4.5%	0.0%	0.1%	0.1%	2.3%	0.2%	0.3%	0.2%
		Springs Memorial	5.1%	3.2%	0.3%	0.3%	0.8%	0.0%	0.6%	1.2%	0.4%	0.0%	0.0%	0.5%	0.9%
		St. Francis-Greenville	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.1%
		Trident Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	5.8%	0.0%	0.0%	0.0%	0.3%	17.8%	0.1%	0.2%
		Village Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.9%	0.0%	0.0%	8.2%	0.0%	0.0%	0.1%
	SC Total		7.8%	4.8%	1.6%	2.7%	3.0%	14.3%	12.2%	4.8%	3.4%	14.5%	30.1%	3.1%	4.0%
Other Total			13.5%	20.3%	20.7%	33.8%	13.3%	20.1%	16.7%	8.4%	9.7%	20.1%	41.8%	12.7%	15.3%
PMC	SC	Piedmont Medical Center	86.3%	7.9%	18.2%	32.2%	30.2%	62.3%	66.7%	70.2%	84.0%	63.8%	43.8%	84.2%	81.8%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - With a Relative Weight Less than Two
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	29704	20707	29708	29710	29715	29717	2005 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	33		478	464	939	6	18	643	550	19	5	332	3,487
CHS-Other	1		5	79	23	2		15	13	4	3	19	164
Other	37		195	940	380	36	24	356	342	57	63	320	2,750
PMC	284	1	346	9	904	75	137	4,562	3,163	184		2,058	11,723
Grand Total	355	1	1,024	1,492	2,246	119	179	5,576	4,068	264	71	2,729	18,124

Market Share by ZIP Code

Facility Grouping	29704	20707	29708	29710	29715	29717	2005 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	9.3%	0.0%	46.7%	31.1%	41.8%	5.0%	10.1%	11.5%	13.5%	7.2%	7.0%	12.2%	19.2%
CHS-Other	0.3%	0.0%	0.5%	5.3%	1.0%	1.7%	0.0%	0.3%	0.3%	1.5%	4.2%	0.7%	0.9%
Other	10.4%	0.0%	19.0%	63.0%	16.9%	30.3%	13.4%	6.4%	8.4%	21.6%	88.7%	11.7%	15.2%
PMC	80.0%	100.0%	33.8%	0.6%	40.2%	63.0%	76.5%	81.8%	77.8%	69.7%	0.0%	75.4%	64.7%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	53	438	618	465	824	14	17	783	748	9	10	398	4,377
CHS-Other	4	15	8	70	22	1	1	18	20	1	5	23	188
Other	48	201	302	822	312	32	27	329	274	61	55	301	2,764
PMC	186	67	292	613	581	54	87	3,120	2,193	124	50	1,409	8,776
Grand Total	291	721	1,220	1,970	1,739	101	132	4,250	3,235	195	120	2,131	16,105

Market Share by ZIP Code

Facility Grouping	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	18.2%	60.7%	50.7%	23.6%	47.4%	13.9%	12.9%	18.4%	23.1%	4.6%	8.3%	18.7%	27.2%
CHS-Other	1.4%	2.1%	0.7%	3.6%	1.3%	1.0%	0.8%	0.4%	0.6%	0.5%	4.2%	1.1%	1.2%
Other	16.5%	27.9%	24.8%	41.7%	17.9%	31.7%	20.5%	7.7%	8.5%	31.3%	45.8%	14.1%	17.2%
PMC	63.9%	9.3%	23.9%	31.1%	33.4%	53.5%	65.9%	73.4%	67.8%	63.6%	41.7%	66.1%	54.5%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	83	643	772	859	912	22	18	942	927	32	12	483	5,505
CHS-Other	1	22	15	61	24	1		13	21	3	4	31	196
Other	43	268	259	716	212	22	24	377	311	49	57	293	2,631
PMC	199	95	256	734	547	79	95	3,606	2,657	165	58	1,678	10,169
Grand Total	326	1,028	1,302	2,170	1,695	124	137	4,938	3,916	249	131	2,485	18,501

Market Share by ZIP Code

Facility Grouping	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	25.5%	62.5%	59.3%	39.4%	53.8%	17.7%	13.1%	19.1%	23.7%	12.9%	9.2%	19.4%	29.8%
CHS-Other	0.3%	2.1%	1.2%	2.8%	1.4%	0.8%	0.0%	0.3%	0.5%	1.2%	3.1%	1.2%	1.1%
Other	13.2%	26.1%	19.9%	33.0%	12.5%	17.7%	17.5%	7.6%	7.9%	19.7%	43.5%	11.8%	14.2%
PMC	61.0%	9.2%	19.7%	33.8%	32.3%	63.7%	69.3%	73.0%	67.8%	66.3%	44.3%	67.5%	55.0%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - With a Relative Weight Less than Two - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	State	Facility	2005 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	1		11	17	14		2	18	13	2		15	93
		Carolinas HealthCare System University			1	2	2			5	3			2	15
		Carolinas Medical Center	19		195	238	295	3	6	301	275	10	3	180	1,505
		Mercy Hospital	13		271	207	628	3	10	319	259	7	2	155	1,874
	NC Total		33		478	464	939	6	18	643	550	19	5	332	3,487
CHS-Charlotte Total			33		478	464	939	6	18	643	550	19	5	332	3,487
CHS-Other	NC	Carolinas HealthCare System Kings Moun			1	66	1			1	1		1	14	85
		Carolinas Medical Center Northeast			1		2				4			1	8
		Carolinas Specialty Hospital				1	7	2		3	1	1		1	16
		Charles A. Cannon Jr Memorial Hospital													
		Cleveland Regional Medical Center			1	7				3	2	3	2	1	19
		CMC - Lincoln Medical Center				1					1				2
		Cone Health													
		Grace Hospital													
		MedWest Haywood													
		Moses H Cone Mem Hospital				1									1
		Randolph Hospital					1								1
		St. Luke's Hospital								1					1
		Stanly Memorial Hospital				1									1
		Union Regional Med Center	1		1	1	12			2	2			1	20
		Wilkes Regional Medical Center				1									1
	NC Total		1		4	79	23	2		10	11	4	3	18	155
	SC	AnMed Health								1					1
		Bon Secours St. Francis Xavier								2				1	3
		Roper Hospital			1					2	2				5
	SC Total				1					5	2			1	9
CHS-Other Total			1		5	79	23	2		15	13	4	3	19	164

Other	NC	Alamance Regional Med Ctr													
		Albemarle Health							1						1
		Alleghany Memorial Hosp								1					1
		Annie Penn Hospital													
		Brunswick Hospital													
		Brynn Marr Behavioral Hs								1					1
		Caldwell Memorial Hospital													
		Cannon Memorial								1					1
		Cape Fear Valley Hlth Sys												1	1
		CarePartners Rehabilitation Hospital													
		CarolinaEast Medical Ctr													
		CaroMont Health Inc.	3	7	898	2	5	2	5	8	5	17	145		895
		Catawba Valley Medical Center								3				1	4
		Craven Regional Med Ctr												1	1
		Davis Medical Center							1						1
		Duke Raleigh													
		Duke University Med Ctr		4	8	6		1	14	14				5	52
		Durham Regional Hospital												2	2
		Fellowship Hall			1	2			1	1					5
		First Health Moore Rgnl													
		Forsyth Memorial Hospital	1			1									2
		Frye Regional Med Center			1										1
		High Point Regional Hosp	1		1				1						3
		Highlands-Cashiers Hosp													
		Hugh Chatham Mem Hospital												1	1
		Iredell Health System				1									1
		Johnston Medical Center-Smithfield													
		Kindred Hosp Greensboro			1										1
		Lake Norman Reg Med Ctr		1	1	1				2					5
		Lexington Memorial Hospital													
		Margaret R. Pardee Memorial Hospital				1									1
		Medical Park Hospital													
		MedWest Harris													
		Mission Health System			2	1								1	4
		Murphy Medical Center													
		NC Specialty Hospital													
		New Hanover Regional M.C.								3				1	4
		Park Ridge Health				1								2	3
		Person County Mem Hosp			1										1
		Pitt County Memorial Hospital				2								1	3
		Presb Orthopaedic Hosp	4	24	25	38	4	1	38	31		3	14		182
		Presbyterian Hospital	4	123	150	203	1	4	105	124	5	5	70		794
		Presbyterian Hospital Huntersville			4					1					5
		Presbyterian Hospital Matthews		11	10	32			6	8			5		72
		Psychiatric Solutions of NC dba: Holly													
		Rex Healthcare													
		Rowan Regional Med Center							1	2					3
		Rutherford Hospital												1	1
		Scotland Health Care Sys													
		Stanly Regional Medical Center													
		The NC Baptist Hospitals		3	2	1			6	2		1	5		20
		Thomasville Medical Center													
		Transylvania Reg Hosp													
		UNC Hospitals		3	1					14		1	7		26
		WakeMed													
		WakeMed Cary													
		Watauga Medical Center													
	NC Total		13	176	906	282	10	8	179	214	10	27	263		2,088

	SC	Aiken Regional Med. Center													1	1
		Allen Bennett Memorial								1						1
		Bamberg County Memorial														
		Beaufort Memorial								2	1	1				4
		Cannon Memorial									1					1
		Carolina Pines														
		Other	1		1					1	2					5
		Chester Regional Medical Center	3			1	1	3	11	18	10	9			9	66
		Chesterfield General														
		Coastal Carolina Hospital														
		Colleton Medical Center														
		Conway Hospital, Inc.														
		East Cooper Regional Med Ctr								1	4					5
		Fairfield Memorial														
		Georgetown County Memorial				1	1									2
		Grand Strand Regional Med Ctr				3	2		1	2	1				2	11
		Greenville Memorial Med. Center				2	5	1		2	3				3	16
		Greer Memorial Hospital														
		Hilton Head Med Ctr & Clns														
		Kershaw County Medical Ctr														
		Laurens County Healthcare														
		Lexington Medical Center					1			7	3					11
		Loris Community				1										1
		M. U. S. C. Medical Center	2		5	5	4	1		16	22	3	1		5	64
		Marion County Medical Ctr														
		Marlboro Park														
		Mary Black Memorial			1			7					9			17
		McLeod Medical Center-Darlington														
		McLeod Medical Center-Dillonn														
		Mcleod Regional														
		Newberry County Memorial Hospital														
		Oconee Memorial					1			1					1	3
		Palmetto Baptist (Columbia) Medical Ctr	1			4	4	1		13	12	3			3	41
		Palmetto Baptist (Easley) Medical Ctr					1									1
		Palmetto Richland Memorial	3		1	6	7			28	27	2	1		8	83
		Patewood Memorial Hospital														
		Providence Hospital				2		1	2	2	4				2	13
		Providence Northeast	1						1	5	2					9
		Regional Med Ctr, Oburg/Cal Cnty								1						1
		Self Memorial Hospital								5	1					6
		Spartanburg Regional Med Ctr	1			4		2	1	2	4	7	5		5	31
		Springs Memorial	11		4	4	61			64	23	1			10	178
		St. Francis-Greenville			6					2	8		9		2	25
		Trident Medical Center													1	1
		Tuomey Regional Medical Center			1						2					3
		Upstate Carolina Medical Center						10				2	11		3	26
		Village Hospital														
		Waccamaw Community Hospital	1			1				3					2	7
		Wallace Thomson Hospital										19				19
	SC Total		24		19	34	88	26	16	177	128	47	36		57	652
Other Total			37		185	840	380	36	24	355	342	57	63		320	2,759
PMC	SC	Piedmont Medical Center	284	1	346	9	604	75	137	4,562	3,163	184			2,055	11,723
Grand Total			355	1	1,024	1,492	2,248	119	179	5,576	4,088	284	71		2,729	18,124

Market Share by ZIP Code

Facility Grouping	State	Facility	2005											
			28704	28707	28708	28710	28715	28717	28728	28730	28732	28742	28743	28745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.3%	0.0%	1.1%	1.1%	0.6%	0.0%	1.1%	0.3%	0.3%	0.6%	0.0%	0.5%	0.5%
		Carolinas HealthCare System University	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
		Carolinas Medical Center	5.4%	0.0%	19.0%	16.0%	13.1%	2.5%	3.4%	5.4%	6.8%	3.6%	4.2%	5.9%	8.3%
		Mercy Hospital	3.7%	0.0%	26.5%	13.9%	28.0%	2.5%	5.6%	5.7%	6.4%	2.7%	2.8%	5.7%	10.3%
	NC Total		9.3%	0.0%	46.7%	31.1%	41.8%	5.0%	10.1%	11.5%	13.5%	7.2%	7.0%	12.2%	19.2%
CHS-Charlotte Total			9.3%	0.0%	46.7%	31.1%	41.8%	5.0%	10.1%	11.5%	13.5%	7.2%	7.0%	12.2%	19.2%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.0%	0.1%	4.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.4%	0.5%	0.5%
		Carolinas Medical Center Northeast	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Carolinas Specialty Hospital	0.0%	0.0%	0.0%	0.1%	0.3%	1.7%	0.0%	0.1%	0.0%	0.4%	0.0%	0.0%	0.1%
		Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.0%	0.1%	0.5%	0.0%	0.0%	0.0%	0.1%	0.0%	1.1%	2.8%	0.0%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.3%	0.0%	0.1%	0.1%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		0.3%	0.0%	0.4%	5.3%	1.0%	1.7%	0.0%	0.2%	0.3%	1.5%	4.2%	0.7%	0.9%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
CHS-Other Total			0.3%	0.0%	0.5%	5.3%	1.0%	1.7%	0.0%	0.3%	0.3%	1.5%	4.2%	0.7%	0.9%

Other	NC	Alamance Regional Med Ctr	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%
		Albemarle Health	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Alleghany Memorial Hosp	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%
		Brunswick Hospital	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Caldwell Memorial Hospital	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%
		Cannon Memorial	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%
		Cape Fear Valley Hlth Sys	0 0%	0 0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%
		CarolinaEast Medical Ctr	0 0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%
		CaroMont Health Inc.	0.8%	0.0%	0.7%	46.6%	0.1%	4.2%	1 1%	0.1%	0 1%	1.9%	23.9%	5 3%	4.9%
		Catawba Valley Medical Center	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 1%	0 0%	0 0%	0.0%	0.0%
		Craven Regional Med Ctr	0 0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		Duke Raleigh	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%
		Duke University Med Ctr	0.0%	0.0%	0.4%	0.5%	0.3%	0.0%	0.6%	0.3%	0.3%	0.0%	0.0%	0.2%	0.3%
		Durham Regional Hospital	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.1%	0.0%
		Fellowship Hall	0 0%	0.0%	0.0%	0.1%	0.1%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		First Health Moore Rgnl	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.3%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0 3%	0 0%	0.0%	0.1%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Iredell Health System	0.0%	0 0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0 0%	0.0%	0 1%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0 0%	0.1%	0 1%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Memorial Hospital	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		MedWest Harris	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Murphy Medical Center	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M.C.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.1%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.1%	0.0%	0 0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.0%	0 0%	0.0%	0 0%	0.1%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	1 1%	0.0%	2.3%	1.7%	1.7%	3 4%	0.8%	0.7%	0 8%	0 0%	4.2%	0.5%	1.0%
		Presbyterian Hospital	1 1%	0 0%	12.0%	10 1%	8.0%	0.8%	2.2%	1.9%	3.0%	1.9%	7.0%	2.8%	4.4%
		Presbyterian Hospital Huntersville	0.0%	0.0%	0.0%	0 3%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Presbyterian Hospital Matthews	0.0%	0.0%	1.1%	0.7%	1.4%	0.0%	0 0%	0 1%	0.2%	0.0%	0.0%	0.2%	0.4%
		Psychiatric Solutions of NC dba: Holly	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%
		Rutherford Hospital	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Stanly Regional Medical Center	0 0%	0.0%	0 0%	0 0%	0 0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%
		The NC Baptist Hospitals	0 0%	0 0%	0.3%	0 1%	0 0%	0 0%	0 0%	0.1%	0 0%	0 0%	1.4%	0.2%	0.1%
		Thomasville Medical Center	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0 0%	0.0%	0.3%	0 1%	0 0%	0.0%	0.0%	0.0%	0.3%	0.0%	1.4%	0 3%	0.1%
		WakeMed	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		WakeMed Cary	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
	NC Total		3.7%	0.0%	17.2%	80.7%	13.0%	8.4%	4.5%	3.2%	5.3%	3.8%	39.0%	9.8%	11.6%

	SC	Aiken Regional Med. Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Other	0.3%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	0.8%	0.0%	0.0%	0.1%	0.0%	2.5%	0.1%	0.3%	0.2%	3.4%	0.0%	0.3%	0.4%	
		Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Colleton Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	
		Greenville Memorial Med. Center	0.0%	0.0%	0.0%	0.1%	0.2%	0.8%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	
		Greer Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clins	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	
		Lone Community	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M U S C Medical Center	0.5%	0.0%	0.5%	0.3%	0.2%	0.5%	0.0%	0.3%	0.5%	1.1%	1.4%	0.2%	0.4%	
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	5.9%	0.0%	0.0%	0.0%	0.0%	12.7%	0.0%	0.1%	
		McLeod Medical Center-Darlington	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.3%	0.0%	0.0%	0.3%	0.2%	0.8%	0.0%	0.2%	0.3%	1.1%	0.0%	0.1%	0.2%	
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.8%	0.0%	0.1%	0.4%	0.3%	0.0%	0.0%	0.5%	0.7%	0.8%	1.4%	0.3%	0.5%	
		Patewood Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.8%	1.1%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	
		Providence Northeast	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Regional Med Ctr, Oburg/Cal Cnty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.3%	0.0%	0.0%	0.3%	0.0%	1.7%	0.8%	0.0%	0.1%	2.7%	7.0%	0.2%	0.2%	
		Springs Memorial	3.1%	0.0%	0.4%	0.3%	2.7%	0.0%	0.0%	1.1%	0.8%	0.4%	0.0%	0.4%	1.0%	
		St. Francis-Greenville	0.0%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	12.7%	0.1%	0.1%	
		Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	8.4%	0.0%	0.0%	0.0%	0.8%	15.5%	0.1%	0.1%	
		Village Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.3%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	7.2%	0.0%	0.0%	0.1%	
	SC Total		6.8%	0.0%	1.9%	2.3%	3.9%	21.8%	6.9%	3.2%	3.1%	17.8%	50.7%	2.1%	3.6%	
Other Total			10.4%	0.0%	10.0%	63.0%	16.9%	30.3%	13.4%	6.4%	8.4%	21.5%	68.7%	11.7%	15.2%	
PMC	SC	Piedmont Medical Center	80.0%	100.0%	33.8%	0.6%	48.2%	63.0%	76.5%	81.2%	77.5%	60.7%	0.0%	76.4%	64.7%	
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	

2008, 2009 and 2011 Discharges and Market Share by Facility Grouping - With a Relative Weight Le
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	State	Facility	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte		12	12	28	13		1	23	24			6	119
		Carolinas HealthCare System University		1	2	6	5			4	2			2	22
		Carolinas Medical Center	22	181	279	224	295	8	13	406	394	6	8	242	2,078
		Mercy Hospital	31	244	325	209	511	6	3	350	328	3	2	146	2,158
	NC Total		53	438	618	465	824	14	17	783	748	9	10	396	4,377
CHS-Charlotte Total			53	438	618	465	824	14	17	783	748	9	10	396	4,377
CHS-Other	NC	Carolinas HealthCare System Kings Moun		1	2	46	2	1			3	1	1	15	72
		Carolinas Medical Center Northeast		1	1		4			1	3				10
		Carolinas Specialty Hospital	1	1		2	3			7	5			1	20
		Charles A. Cannon Jr Memorial Hospital													
		Cleveland Regional Medical Center	1			15	1			1			3	2	23
		CMC - Lincoln Medical Center									1			1	2
		Cone Health								2					2
		Grace Hospital													
		MedWest Haywood		1	1										2
		Moses H Cone Mem Hospital													
		Randolph Hospital													
		St. Luke's Hospital													
		Stanly Memorial Hospital		1											1
		Union Regional Med Center	2	10	4	7	10		1	6	5		1	3	49
		Wilkes Regional Medical Center													
	NC Total		4	15	8	70	20	1	1	17	17	1	5	22	181
	SC	AnMed Health					1				1				2
		Bon Secours St. Francis Xavier								1	1				2
		Roper Hospital					1				1			1	3
	SC Total						2			1	3			1	7
CHS-Other Total			4	15	8	70	22	1	1	18	20	1	5	23	188

Other	NC	Alamance Regional Med Ctr					2						1				3
		Albemarle Health															
		ABeghany Memorial Hosp															
		Annie Penn Hospital															
		Brunswick Hospital														1	1
		Brynn Marr Behavioral Hs															
		Caldwell Memorial Hospital														2	2
		Cannon Memorial															
		Cape Fear Valley Hlth Sys				1											1
		CarePartners Rehabilitation Hospital															
		CarolinaEast Medical Ctr									1						1
		CaroMont Health Inc.	1		8	804	2	2	2	7	5	8	13	107	757
		Catawba Valley Medical Center															
		Craven Regional Med Ctr															
		Davis Medical Center															
		Duke Raleigh							1								1
		Duke University Med Ctr		4	8	9	6			4	18	1	1	3	53
		Durham Regional Hospital								2				1	3
		Fellowship Hall															
		First Health Moore Rgnl			1												1
		Forsyth Memorial Hospital									2			3	5
		Frye Regional Med Center				1	1										2
		High Point Regional Hosp				1					1						2
		Highlands-Cashiers Hosp									1						1
		Hugh Chatham Mem Hospital												3	3
		Iredell Health System															
		Johnston Medical Center-Smithfield															
		Kindred Hosp Greensboro															
		Lake Norman Reg Med Ctr			2	3	1			3	1						10
		Lexington Memorial Hospital															
		Margaret R. Pardee Memorial Hospital								1							1
		Medical Park Hospital															
		MedWest Harris								1							1
		Mission Health System		1			1							1	3
		Murphy Medical Center								1							1
		NC Specialty Hospital		1													1
		New Hanover Regional M.C.		1	1						3			2	7
		Park Ridge Health								1	2						3
		Person County Mem Hosp															
		Pitt County Memorial Hospital															
		Presb Orthopaedic Hosp	1	3	6	5	6		1	6	9			3	42
		Presbyterian Hospital	18	113	218	137	173	2	3	118	101	3	5	81	872
		Presbyterian Hospital Huntersville				5	1				1			2	9
		Presbyterian Hospital Matthews		37	17	6	37			13	14	1		6	131
		Psychiatric Solutions of NC dba: Holly															
		Rex Healthcare															
		Rowan Regional Med Center			1	1				4	2			1	9
		Rutherford Hospital			1												1
		Scotland Health Care Sys			1					1							2
		Stanly Regional Medical Center															
		The NC Baptist Hospitals		3	2	7	1		1	11	4			4	33
		Thomasville Medical Center			1		1										2
		Transylvania Reg Hosp												1	1
		UNC Hospitals			2	7	1				1	1		2	14
		WakeMed															
		WakeMed Cary															
		Watauga Medical Center			1						1			1	3
	NC Total		20	183	266	786	233	4	8	176	188	15	19	224	2,082

	SC	Aiken Regional Med. Center		1							1					2
		Allen Bennett Memorial														
		Bamberg County Memorial														
		Beaufort Memorial			1	1										2
		Cannon Memorial														
		Carolina Pines								1	1				1	3
		Other					1									1
		Chester Regional Medical Center	2			1	1	1	14	18	5	15			8	65
		Chesterfield General								1	1					2
		Coastal Carolina Hospital														
		Colleton Medical Center			1											1
		Conway Hospital, Inc.				1	1				1				2	5
		East Cooper Regional Med Ctr				1				1	1					3
		Fairfield Memorial														
		Georgetown County Memorial		1							1					2
		Grand Strand Regional Med Ctr			2	1	1			1	2				2	9
		Greenville Memorial Med. Center			1	1				8					3	11
		Greer Memorial Hospital														
		Hilton Head Med Ctr & Clns														
		Kershaw County Medical Ctr					1									1
		Laurens County Healthcare														
		Lexington Medical Center	2		3		2	1		8	8	1			3	28
		Loris Community			1						1					2
		M. U. S. C. Medical Center	1		2	6	5		1	21	25	1			13	75
		Marion County Medical Ctr														
		Marlboro Park														
		Mary Black Memorial				1	2	2		1	1	1	2		4	14
		McLeod Medical Center-Darlington														
		McLeod Medical Center-Dillonn				1										1
		Mcleod Regional	1		2	2	3			3					1	12
		Newberry County Memorial Hospital														
		Oconee Memorial				2									2	4
		Palmetto Baptist (Columbia) Medical Ctr			2	3	3			4	3	2			6	23
		Palmetto Baptist (Easley) Medical Ctr								1						1
		Palmetto Richland Memorial	2	3	2	4	12	1	2	25	8	1			3	63
		Patewood Memorial Hospital			1											1
		Providence Hospital			1				1	3	6				2	13
		Providence Northeast								2						2
		Regional Med Ctr, Oburg/Cal Cnty													2	2
		Self Memorial Hospital			2	1					2					5
		Spartanburg Regional Med Ctr			2	2	3	5		3	3	11	10		3	42
		Springs Memorial	20	33	8	7	44	2	1	48	34				17	214
		St. Francis-Greenville			1	1										2
		Trident Medical Center						3		1	1					5
		Tuomey Regional Medical Center								1	1					2
		Upstate Carolina Medical Center						13		2	1		23	4	43	
		Village Hospital			1											1
		Waccamaw Community Hospital			1					2	3		1	1	8	
		Wallace Thomson Hospital										14				14
	SC Total		28	38	34	36	79	28	19	153	108	46	36	77	662	
Other Total			48	201	302	822	312	32	27	328	274	61	55	301	2,764	
PMC	SC	Piedmont Medical Center	186	67	292	613	681	54	67	3,120	2,193	124	80	1,409	8,776	
Grand Total			291	721	1,220	1,970	1,739	101	132	4,250	3,235	195	120	2,131	16,105	

Market Share by ZIP Code

Facility Grouping	State	Facility	2009 29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.0%	1.7%	1.0%	1.3%	0.7%	0.0%	0.8%	0.5%	0.7%	0.0%	0.0%	0.4%	0.7%
		Carolinas HealthCare System University	0.0%	0.1%	0.2%	0.3%	0.3%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
		Carolinas Medical Center	7.6%	25.1%	22.9%	11.4%	17.0%	7.9%	9.8%	9.6%	12.2%	3.1%	6.7%	11.4%	12.9%
		Mercy Hospital	10.7%	33.6%	26.6%	10.6%	29.4%	5.9%	2.3%	8.2%	10.1%	1.5%	1.7%	6.9%	13.4%
	NC Total		18.2%	60.7%	50.7%	23.6%	47.4%	13.9%	12.9%	18.4%	23.1%	4.6%	8.3%	18.7%	27.2%
CHS-Charlotte Total			18.2%	60.7%	50.7%	23.6%	47.4%	13.9%	12.9%	18.4%	23.1%	4.6%	8.3%	18.7%	27.2%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.1%	0.2%	2.3%	0.1%	1.0%	0.0%	0.0%	0.1%	0.5%	0.8%	0.7%	0.4%
		Carolinas Medical Center Northeast	0.0%	0.1%	0.1%	0.0%	0.2%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%
		Carolinas Specialty Hospital	0.3%	0.1%	0.0%	0.1%	0.2%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.0%	0.1%
		Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.3%	0.0%	0.0%	0.8%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	2.5%	0.1%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.7%	1.4%	0.3%	0.4%	0.5%	0.0%	0.5%	0.1%	0.2%	0.0%	0.5%	0.1%	0.3%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		1.4%	2.1%	0.7%	3.6%	1.2%	1.0%	0.5%	0.4%	0.5%	0.5%	4.2%	1.0%	1.1%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
CHS-Other Total			1.4%	2.1%	0.7%	3.6%	1.3%	1.0%	0.5%	0.4%	0.5%	0.5%	4.2%	1.1%	1.2%

Other	NC	Alamance Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.5%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.3%	0.0%	0.5%	30.7%	0.1%	2.0%	1.5%	0.2%	0.2%	4.1%	10.8%	5.0%	4.7%
		Catawba Valley Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davie Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.0%	0.8%	0.7%	0.4%	0.3%	0.0%	0.0%	0.1%	0.6%	0.5%	0.6%	0.1%	0.3%
		Durham Regional Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Iredell Health System	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.2%	0.2%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
		Lexington Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M.C.	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%
		Park Ridge Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	0.3%	0.4%	0.5%	0.3%	0.3%	0.0%	0.8%	0.2%	0.3%	0.0%	0.0%	0.1%	0.3%
		Presbyterian Hospital	6.2%	15.7%	17.8%	7.0%	9.6%	2.0%	2.3%	2.8%	3.1%	1.5%	4.2%	3.8%	8.0%
		Presbyterian Hospital Huntersville	0.0%	0.0%	0.0%	0.3%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Presbyterian Hospital Matthews	0.0%	5.1%	1.4%	0.3%	2.1%	0.0%	0.0%	0.3%	0.4%	0.5%	0.0%	0.3%	0.8%
		Psychiatric Solutions of NC dba: Holly	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%
		Rutherford Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		The NC Baptist Hospitals	0.0%	0.4%	0.2%	0.4%	0.1%	0.0%	0.8%	0.3%	0.1%	0.0%	0.0%	0.2%	0.2%
		Thomasville Medical Center	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.0%	0.0%	0.2%	0.4%	0.1%	0.0%	0.0%	0.0%	0.0%	0.5%	0.0%	0.1%	0.1%
		WakeMed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		6.9%	22.5%	22.0%	39.8%	13.4%	4.0%	6.1%	4.1%	5.1%	7.7%	15.8%	10.5%	12.6%

	SC	Aiken Regional Med. Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Other	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	0.7%	0.0%	0.0%	0.1%	0.1%	1.0%	10.6%	0.4%	0.2%	7.7%	0.0%	0.4%	0.4%
		Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Colleton Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.0%	0.0%	0.2%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Greenville Memorial Med. Center	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clns	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.7%	0.0%	0.2%	0.0%	0.1%	1.0%	0.0%	0.2%	0.2%	0.5%	0.0%	0.1%	0.2%
		Loris Community	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C Medical Center	0.3%	0.0%	0.2%	0.3%	0.3%	0.0%	0.8%	0.5%	0.8%	0.5%	0.0%	0.8%	0.5%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.0%	0.1%	0.1%	2.0%	0.0%	0.0%	0.0%	0.5%	1.7%	0.2%	0.1%
		McLeod Medical Center-Darlington	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.3%	0.0%	0.2%	0.1%	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
		Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.0%	0.0%	0.2%	0.2%	0.2%	0.0%	0.0%	0.1%	0.1%	1.0%	0.0%	0.3%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.7%	0.4%	0.2%	0.2%	0.7%	1.0%	1.5%	0.6%	0.2%	0.5%	0.0%	0.1%	0.4%
		Patewood Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.8%	0.1%	0.2%	0.0%	0.0%	0.1%	0.1%
		Providence Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Regional Med Ctr, Cburg/Cal Cnty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.0%	0.0%	0.2%	0.1%	0.2%	5.0%	0.0%	0.1%	0.1%	5.6%	8.3%	0.1%	0.3%
		Springs Memorial	6.8%	4.8%	0.7%	0.4%	2.5%	2.0%	0.8%	1.1%	1.1%	0.0%	0.0%	0.8%	1.3%
		St. Francis-Greenville	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	3.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	12.6%	0.0%	0.0%	0.0%	0.0%	18.2%	0.2%	0.3%
		Village Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.8%	0.0%	0.0%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	7.2%	0.0%	0.0%	0.1%
	SC Total		9.6%	5.3%	2.8%	1.8%	4.5%	27.7%	14.4%	3.6%	3.3%	23.6%	30.0%	3.6%	4.2%
Other Total			16.5%	27.9%	24.8%	41.7%	17.9%	31.7%	20.5%	7.7%	8.5%	31.3%	45.8%	14.1%	17.2%
PMC	SC	Piedmont Medical Center	63.9%	9.3%	23.9%	31.1%	33.4%	53.5%	65.8%	73.4%	67.8%	63.6%	41.7%	68.1%	64.5%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2006, 2009 and 2011 Discharges and Market Share by Facility Grouping - With a Relative Weight Le
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	State	Facility	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	1	21	18	23	10	2		23	25	1	4	16	144
		Carolinas HealthCare System University		2	6	3	14			4	6	1	1	1	37
		Carolinas Medical Center	41	216	351	296	374	13	13	432	406	17	5	258	2,422
		Mercy Hospital	41	402	397	337	514	7	5	483	491	13	2	210	2,902
	NC Total		83	643	772	659	912	22	18	942	927	32	12	483	5,505
CHS-Charlotte Total			83	643	772	659	912	22	18	942	927	32	12	483	5,505
CHS-Other	NC	Carolinas HealthCare System Kings Moun			1	37	3			1	3	1	1	8	55
		Carolinas Medical Center Northeast		5	5	4	4			3	7			2	30
		Carolinas Specialty Hospital		1			2			3	2			2	10
		Charles A. Cannon Jr Memorial Hospital				2				1	1			1	5
		Cleveland Regional Medical Center		1		9							3	10	23
		CMC - Lincoln Medical Center				1									1
		Cone Health			1										1
		Grace Hospital		1	1	1				1	2			1	7
		MedWest Haywood			1										1
		Moses H Cone Mem Hospital													
		Randolph Hospital													
		St. Luke's Hospital													
		Stanly Memorial Hospital													
		Union Regional Med Center	1	13	5	6	12	1		1	6	2		7	54
		Wilkes Regional Medical Center													
	NC Total		1	21	14	60	21	1		10	21	3	4	31	187
	SC	AnMed Health				1				1					2
		Bon Secours St. Francis Xavier			1		1			1					3
		Roper Hospital		1			2			1					4
	SC Total			1	1	1	3			3					9
CHS-Other Total			1	22	15	61	24	1		13	21	3	4	31	196

Other	NC	Alamance Regional Med Ctr		2												2
		Albemarle Health														
		Alleghany Memorial Hosp														
		Annie Penn Hospital								1						1
		Brunswick Hospital			1										1	2
		Brynn Marr Behavioral Hs														
		Caldwell Memorial Hospital				4										4
		Cannon Memorial														
		Cape Fear Valley Hlth Sys									1					1
		CarePartners Rehabilitation Hospital			3											3
		CarolinaEast Medical Ctr														
		CaroMont Health Inc.			7	509	2	3	3	6	4	6	10	128		678
		Catawba Valley Medical Center		1		1				1						3
		Craven Regional Med Ctr														
		Davis Medical Center	2		1	3	1				3			3		13
		Duke Raleigh				1										1
		Duke University Med Ctr	1	2	12	5	3			3	10			4		40
		Durham Regional Hospital			1		1									2
		Fellowship Hall														
		First Health Moore Rgnl									1					1
		Forsyth Memorial Hospital			2											2
		Frye Regional Med Center		1	2	2				1						6
		High Point Regional Hosp									1					1
		Highlands-Cashiers Hosp														
		Hugh Chatham Mem Hospital														
		Iredell Health System									1					1
		Johnston Medical Center-Smithfield									1					1
		Kindred Hosp Greensboro														
		Lake Norman Reg Med Ctr			1	3	2			3	1					10
		Lexington Memorial Hospital		1												1
		Margaret R. Pardee Memorial Hospital		1	1											2
		Medical Park Hospital									1					1
		MedWest Harris														
		Mission Health System			8	1	2				1			1		11
		Murphy Medical Center														
		NC Specialty Hospital														
		New Hanover Regional M.C.		1	1					1						3
		Park Ridge Health		1												1
		Person County Mem Hosp														
		Pitt County Memorial Hospital														
		Presb Orthopaedic Hosp	2	4	4	7	7		1	8	8		1	3		45
		Presbyterian Hospital	6	123	186	99	116	2	1	111	127	3	2	62		818
		Presbyterian Hospital Huntersville		2	1	2					3			1		9
		Presbyterian Hospital Matthews	2	59	14	7	21			6	9			8		126
		Psychiatric Solutions of NC dba: Holly			2		1									3
		Rex Healthcare									1					1
		Rowan Regional Med Center			2		1			1						4
		Rutherford Hospital								1						1
		Scotland Health Care Sys														
		Stanly Regional Medical Center			1	2				1	1		1	1		7
		The NC Baptist Hospitals	1	3	3	6	1			6	11			5		36
		Thomasville Medical Center			1		1							1		3
		Transylvania Reg Hosp			1											1
		UNC Hospitals	1	6	5	3	3			2	2			2		24
		WakeMed					1			1	3					5
		WakeMed Cary								1						1
		Watauga Medical Center									1					1
	NC Total		15	207	238	655	183	5	5	154	191	9	14	220		1,576

	SC	Aiken Regional Med Center	2	1		1				2	3				9
		Allen Bennett Memorial													
		Bamberg County Memorial								1					1
		Beaufort Memorial												1	1
		Cannon Memorial													
		Carolina Pines			1	1					2			2	6
		Other		1		1			1	2	1				6
		Chester Regional Medical Center	4			1	2		12	19	4	7		12	61
		Chesterfield General			1					1		1			3
		Coastal Carolina Hospital								1					1
		Colleton Medical Center								1					1
		Conway Hospital, Inc.				1	1				1				3
		East Cooper Regional Med Ctr		3		1									4
		Fairfield Memorial			1										1
		Georgetown County Memorial													
		Grand Strand Regional Med Ctr	1		1	1	4	1		5	8	1		1	23
		Greenville Memorial Med. Center			1	3	2			3	1			1	11
		Greer Memorial Hospital			1										1
		Hilton Head Med Ctr & Clins			1					1					2
		Kershaw County Medical Ctr				3	1								4
		Laurens County Healthcare		1						1					2
		Lexington Medical Center			1	2	3			7	6				19
		Loris Community			1	1				1	1				4
		M. U. S. C. Medical Center	1	4	4	5	4	3		31	33	1	2	10	98
		Marion County Medical Ctr								1					1
		Marlboro Park						1						1	2
		Mary Black Memorial				3	2			5	1		1	3	15
		McLeod Medical Center-Darlington									1				1
		McLeod Medical Center-Dillonn													
		Mcleod Regional								2					2
		Newberry County Memorial Hospital		1											1
		Oconee Memorial								1	1			1	3
		Palmetto Baptist (Columbia) Medical Ctr		3		2	2			9	9			2	27
		Palmetto Baptist (Easley) Medical Ctr													
		Palmetto Richland Memorial	1	3		13	7		2	48	18	1		14	105
		Palewood Memorial Hospital													
		Providence Hospital				1	2			2	2		1		8
		Providence Northeast				1				2	1				4
		Regional Med Ctr, Oburg/Cal Cnty		1						3					4
		Self Memorial Hospital			1						4				5
		Spartanburg Regional Med Ctr				6		4		4	2	5	12	6	39
		Springs Memorial	19	41	4	9	17		1	63	17			14	185
		St. Francis-Greenville		1		1				6	2				10
		Trident Medical Center			2		1			1				1	5
		Tuomey Regional Medical Center		1											1
		Upstate Carolina Medical Center				3		8				1	27	3	42
		Village Hospital													
		Waccamaw Community Hospital			1	1	1			2	2			1	8
		Wallace Thomson Hospital							3			23			26
	SC Total		28	61	21	61	49	17	18	223	120	40	43	73	755
Other Total			43	268	258	716	212	22	24	377	311	49	57	293	2,631
PMC	SC	Piedmont Medical Center	199	95	256	734	547	79	95	3,606	2,657	165	58	1,678	10,169
Grand Total			326	1,028	1,302	2,170	1,695	124	137	4,936	3,916	249	131	2,485	18,501

Market Share by ZIP Code

Facility Grouping	State	Facility	2011 29704	29707	29708	29710	29715	29717	29720	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.3%	2.0%	1.4%	1.1%	0.6%	1.6%	0.0%	0.5%	0.6%	0.4%	3.1%	0.6%	0.6%
		Carolinas HealthCare System University	0.0%	0.2%	0.5%	0.1%	0.8%	0.0%	0.0%	0.1%	0.1%	0.4%	0.8%	0.0%	0.2%
		Carolinas Medical Center	12.6%	21.2%	27.0%	13.5%	22.1%	10.5%	9.5%	8.7%	10.4%	6.8%	3.8%	10.3%	13.1%
		Mercy Hospital	12.6%	39.1%	30.5%	15.5%	30.3%	5.6%	3.6%	9.8%	12.5%	5.2%	1.5%	8.5%	15.7%
	NC Total		25.5%	62.5%	59.3%	30.4%	53.8%	17.7%	13.1%	19.1%	23.7%	12.8%	9.2%	19.4%	29.8%
CHS-Charlotte Total			25.5%	62.5%	59.3%	30.4%	53.8%	17.7%	13.1%	19.1%	23.7%	12.8%	9.2%	19.4%	29.8%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.0%	0.1%	1.7%	0.2%	0.0%	0.0%	0.0%	0.1%	0.4%	0.8%	0.3%	0.3%
		Carolinas Medical Center Northeast	0.0%	0.5%	0.4%	0.2%	0.2%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.1%	0.2%
		Carolinas Specialty Hospital	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
		Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.1%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.3%	0.4%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.3%	1.3%	0.4%	0.3%	0.7%	0.8%	0.0%	0.0%	0.2%	0.8%	0.0%	0.3%	0.3%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		0.3%	2.0%	1.1%	2.8%	1.2%	0.8%	0.0%	0.2%	0.5%	1.2%	3.1%	1.2%	1.0%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.1%	0.1%	0.0%	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
CHS-Other Total			0.3%	2.1%	1.2%	2.8%	1.4%	0.8%	0.0%	0.3%	0.5%	1.2%	3.1%	1.2%	1.1%

Other	NC	Alamance Regional Med Ctr	0 0%	0.2%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0 0%	0.2%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.2%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.0%	0.0%	0 5%	28.5%	0.1%	2.4%	2.2%	0.1%	0 1%	2.4%	7.8%	5.2%	3.7%
		Catawba Valley Medical Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.6%	0.0%	0 1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%
		Duke University Med Ctr	0 3%	0.2%	0 9%	0 2%	0.2%	0.0%	0.0%	0 1%	0 3%	0 0%	0.0%	0.2%	0.2%
		Durham Regional Hospital	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fellowship Hall	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.0%	0.0%	0.2%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.1%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Iredell Health System	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0 1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0 0%	0.0%	0 0%	0.1%
		Lexington Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.1%	0 1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0 0%	0.0%	0.5%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%
		Murphy Medical Center	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M.C.	0.0%	0.1%	0 1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	0.8%	0.4%	0.3%	0.3%	0.4%	0.0%	0.7%	0.2%	0.2%	0.0%	0.8%	0.1%	0.2%
		Presbyterian Hospital	1.8%	12.0%	12.7%	4.8%	6.8%	1.6%	0.7%	2.2%	3.2%	1.2%	1.6%	2.5%	4.4%
		Presbyterian Hospital Huntersville	0 0%	0.2%	0 1%	0.1%	0.0%	0.0%	0.0%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%
		Presbyterian Hospital Matthews	0 6%	5.7%	1.1%	0.3%	1.2%	0 0%	0 0%	0 1%	0.2%	0.0%	0.0%	0.3%	0.7%
		Psychiatric Solutions of NC dba: Holly	0 0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rutherford Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0 0%	0.0%	0.1%	0.1%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.8%	0.0%	0.0%
		The NC Baptist Hospitals	0.3%	0.3%	0.2%	0.3%	0.1%	0.0%	0.0%	0.1%	0.3%	0.0%	0.0%	0.2%	0.2%
		Thomasville Medical Center	0.0%	0.0%	0.1%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0 3%	0.6%	0 4%	0.1%	0.2%	0.0%	0.0%	0.0%	0 1%	0.0%	0.0%	0.1%	0.1%
		WakeMed	0.0%	0.0%	0 0%	0.0%	0 1%	0.0%	0.0%	0.0%	0 1%	0.0%	0 0%	0.0%	0.0%
		WakeMed Cary	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
	NC Total		4.6%	20.1%	18.3%	30.2%	9.6%	4.0%	3.6%	3.1%	4.9%	3.6%	10.7%	8.9%	10.1%

	SC	Aiken Regional Med. Center	0.6%	0.1%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0 1%	0.0%	0.0%	0.0%	0 0%	0.0%	0.1%	0.0%	0 0%	0.1%	0.0%
		Other	0.0%	0.1%	0 0%	0.0%	0.0%	0 0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	1.2%	0.0%	0 0%	0 0%	0 1%	0.0%	8.8%	0.4%	0.1%	2.8%	0 0%	0.5%	0.3%
		Chesterfield General	0.0%	0.0%	0.1%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.4%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Colleton Medical Center	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		East Cooper Regional Med Ctr	0 0%	0.3%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0 1%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Georgetown County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Grand Strand Regional Med Ctr	0.3%	0.0%	0.1%	0.0%	0.2%	0.8%	0 0%	0.1%	0.2%	0.4%	0.0%	0.0%	0.1%
		Greenville Memorial Med. Center	0.0%	0 0%	0 1%	0 1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0 0%	0.0%	0.1%
		Greer Memorial Hospital	0.0%	0 0%	0.1%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clns	0.0%	0.0%	0 1%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0 0%	0.1%	0 1%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.1%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.0%	0.0%	0.1%	0.1%	0.2%	0.0%	0 0%	0.1%	0.2%	0 0%	0.0%	0.0%	0.1%
		Loris Community	0 0%	0.0%	0.1%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		M U S C Medical Center	0 3%	0.4%	0.3%	0.2%	0.2%	2.4%	0.0%	0.8%	0 8%	0.4%	1.5%	0.4%	0.5%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Marlboro Park	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0 0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.8%	0.1%	0.1%
		McLeod Medical Center-Darlington	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Newberry County Memorial Hospital	0.0%	0.1%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0 0%	0.3%	0 0%	0.1%	0.1%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.1%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.3%	0.3%	0 0%	0.6%	0 4%	0.0%	1.5%	0.9%	0 6%	0.4%	0.0%	0.6%	0.6%
		Patewood Memorial Hospital	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.8%	0.0%	0.0%
		Providence Northeast	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Regional Med Ctr, Oburg/Cal Cnty	0.0%	0.1%	0.0%	0 0%	0.0%	0 0%	0.0%	0 1%	0.0%	0.0%	0.0%	0 0%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0 0%	0.0%
		Spartanburg Regional Med Ctr	0 0%	0.0%	0.0%	0.3%	0.0%	3.2%	0 0%	0.1%	0.1%	2.0%	9.2%	0.2%	0.2%
		Springs Memorial	5.8%	4.0%	0.3%	0.4%	1 0%	0.0%	0.7%	1.3%	0 4%	0.0%	0.0%	0.6%	1.0%
		St. Francis-Greenville	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 1%	0.1%	0 0%	0.0%	0.0%	0.1%
		Trident Medical Center	0 0%	0 0%	0.2%	0 0%	0.1%	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0 0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0 0%	0 1%	0 0%	5.5%	0 0%	0.0%	0 0%	0.4%	20.8%	0.1%	0.2%
		Village Hospital	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Waccamaw Community Hospital	0.0%	0.0%	0 1%	0 0%	0.1%	0.0%	0 0%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%
		Wallace Thomson Hospital	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	2.2%	0.0%	0.0%	8.2%	0.0%	0.0%	0.1%
	SC Total		8.6%	5.9%	1.8%	2.8%	2.8%	13.7%	13.9%	4.8%	3.1%	16.1%	32.8%	2.9%	4.1%
Other Total			13.2%	26.1%	19.9%	33.0%	12.6%	17.7%	17.5%	7.6%	7.9%	19.7%	43.6%	11.8%	14.2%
PMC	SC	Piedmont Medical Center	61.0%	9.2%	16.7%	33.8%	32.3%	63.7%	68.3%	73.0%	67.8%	68.3%	44.3%	67.5%	65.0%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - With a Relative Weight Greater than Two
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges

Facility Grouping	2005 29704	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	7	58	73	97		4	93	84	3		64	483
CHS-Other			5								2	7
Other	6	28	90	43	3	2	63	81	1	4	47	368
PMC	39	27	2	87	7	10	332	195	15	1	157	872
Grand Total	52	113	170	227	10	16	488	360	19	5	270	1,730

Market Share by ZIP Code

Facility Grouping	2005 29704	20707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	13.5%		51.3%	42.9%	42.7%	0.0%	25.0%	19.1%	23.3%	15.8%	0.0%	23.7%	27.9%
CHS-Other	0.0%		0.0%	2.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.4%
Other	11.5%		24.8%	52.9%	18.9%	30.0%	12.5%	12.9%	22.5%	5.3%	80.0%	17.4%	21.3%
PMC	75.0%		23.9%	1.2%	38.3%	70.0%	62.5%	68.0%	54.2%	78.9%	20.0%	58.1%	50.4%
Grand Total	100.0%		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	16	132	148	165	180	2	9	257	250	12	2	120	1,293
CHS-Other	1	1	3	5	5			7	6			7	35
Other	7	63	85	200	80	9	4	137	106	15	12	92	810
PMC	31	12	50	116	111	14	20	501	367	23	11	246	1,502
Grand Total	55	208	286	486	376	25	33	902	729	50	25	465	3,640

Market Share by

Facility Grouping	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	29.1%	63.5%	51.7%	34 0%	47.9%	8.0%	27.3%	28.5%	34 3%	24.0%	8.0%	25.8%	35.5%
CHS-Other	1.8%	0.5%	1.0%	1.0%	1.3%	0.0%	0.0%	0.8%	0.8%	0.0%	0 0%	1.5%	1.0%
Other	12.7%	30 3%	29 7%	41.2%	21.3%	36.0%	12.1%	15.2%	14.5%	30.0%	48.0%	19.8%	22.3%
PMC	56.4%	5.8%	17.5%	23.9%	29.5%	56.0%	60.6%	55.5%	50.3%	46.0%	44.0%	52.9%	41.3%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	29704	29707	29708	29710	29715	29717	2011 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	34	226	187	173	216	4	7	282	293	14	5	156	1,597
CHS-Other	1	6		6	4		1	9	6		1	11	45
Other	10	90	71	178	60	9	2	115	145	12	7	79	778
PMC	23	12	35	116	70	17	9	487	370	29	9	207	1,384
Grand Total	**68**	**334**	**293**	**473**	**350**	**30**	**19**	**893**	**814**	**55**	**22**	**453**	**3,804**

Market Share by

Facility Grouping	29704	29707	29708	29710	29715	29717	2011 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	50.0%	67.7%	63.8%	36.8%	61.7%	13.3%	36.8%	31.6%	36.0%	25.5%	22.7%	34.4%	42.0%
CHS-Other	1.5%	1.8%	0.0%	1.3%	1.1%	0.0%	5.3%	1.0%	0.7%	0.0%	4.5%	2.4%	1.2%
Other	14.7%	26.9%	24.2%	37.6%	17.1%	30.0%	10.5%	12.9%	17.8%	21.8%	31.8%	17.4%	20.5%
PMC	33.8%	3.6%	11.9%	24.5%	20.0%	56.7%	47.4%	54.5%	45.5%	52.7%	40.9%	45.7%	36.4%
Grand Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Excluding OB, Psych, OHS, Therapeutic Cath and Dx Cath
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Excludes the following MS DRGs-			**DRGs-**		
	OB	765-770, 774-782		OB	370-384, 390-391
	Psych	876, 880-887		Psych	424-432
	OHS	216-221, 231-236		OHS	104, 105, 106, 547, 548, 549, 550
	Ther. Cath	246-251		Ther. Cath	555-558
	Dx Cath	222-225, 286-287		Dx Cath	124, 125

Discharges

Facility Grouping	**29704**	**29707**	**29708**	**29710**	**29715**	**29717**	**2005 29726**	**29730**	**29732**	**29742**	**29743**	**29745**	**Total**
CHS-Charlotte	33	-	354	439	792	5	21	592	496	18	4	322	3,076
CHS-Other	1	-	5	74	18	2	-	14	10	4	3	20	151
Other	35	-	153	852	310	38	22	355	349	49	59	279	2,501
PMC	264	1	302	7	732	61	110	3,775	2,542	149	1	1,663	9,607
Grand Total	**333**	**1**	**814**	**1,372**	**1,852**	**106**	**153**	**4,736**	**3,397**	**220**	**67**	**2,284**	**15,335**

Market Share by ZIP Code

Facility Grouping	**29704**	**29707**	**29708**	**29710**	**29715**	**29717**	**2005 29726**	**29730**	**29732**	**29742**	**29743**	**29745**	**Total**
CHS-Charlotte	9.9%	0.0%	43.5%	32.0%	42.8%	4.7%	13.7%	12.5%	14.6%	8.2%	6.0%	14.1%	20.1%
CHS-Other	0.3%	0.0%	0.6%	5.4%	1.0%	1.9%	0.0%	0.3%	0.3%	1.8%	4.5%	0.9%	1.0%
Other	10.5%	0.0%	18.8%	62.1%	16.7%	35.8%	14.4%	7.5%	10.3%	22.3%	88.1%	12.2%	16.3%
PMC	79.3%	100.0%	37.1%	0.5%	39.5%	57.5%	71.9%	79.7%	74.8%	67.7%	1.5%	72.8%	62.6%
Grand Total	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**	**100.0%**

Discharges

Facility Grouping	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	58	443	550	522	786	11	23	866	758	19	9	427	4,470
CHS-Other	5	13	9	66	24		1	25	23	1	4	28	199
Other	43	195	261	797	273	35	30	375	314	68	58	321	2,770
PMC	165	35	234	500	495	55	86	2,685	1,905	113	35	1,207	7,515
Grand Total	269	686	1,054	1,885	1,578	101	140	3,951	3,000	201	106	1,983	14,954

Market Share by

Facility Grouping	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	20.8%	64.6%	52.2%	27.7%	49.8%	10.9%	16.4%	21.9%	25.3%	9.5%	8.5%	21.5%	29.9%
CHS-Other	1.9%	1.9%	0.9%	3.5%	1.5%	0.0%	0.7%	0.6%	0 8%	0 5%	3.8%	1.4%	1.3%
Other	16.0%	28.4%	24.8%	42.3%	17.3%	34.7%	21.4%	9.5%	10.5%	33.6%	54.7%	16.2%	18.5%
PMC	61.3%	5.1%	22.2%	26.5%	31.4%	54.5%	61.4%	68.0%	63 5%	56.2%	33.0%	60.9%	50.3%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Discharges

Facility Grouping	29704	29707	29708	29710	29715	29717	2011 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	99	714	731	705	920	22	21	985	940	38	16	523	5,712
CHS-Other	2	25	11	54	24	1	1	19	24	3	4	38	208
Other	46	262	201	714	190	26	22	373	379	57	50	293	2,613
PMC	173	65	197	575	441	74	80	3,096	2,270	159	43	1,452	8,625
Grand Total	320	1,066	1,140	2,048	1,575	123	124	4,471	3,613	257	113	2,306	17,156

Market Share by

Facility Grouping	29704	29707	29708	29710	29715	29717	2011 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	30.9%	67.0%	64.1%	34.4%	58.4%	17.9%	16.9%	22.0%	26.0%	14.8%	14.2%	22.7%	33.3%
CHS-Other	0.6%	2.3%	1.0%	2.6%	1.5%	0.8%	0.8%	0.4%	0 7%	1.2%	3.5%	1.6%	1.2%
Other	14.4%	24.6%	17.6%	34.9%	12.1%	21.1%	17.7%	8.3%	10 5%	22.2%	44.2%	12.7%	15.2%
PMC	54.1%	6.1%	17.3%	28.1%	28.0%	60.2%	64.5%	69.2%	62.8%	61.9%	38.1%	63.0%	50.3%
Grand Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Excluding OB, Psych, OHS, Therapeutic Cath and Dx Cath - Detail by Facility
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters
Excludes the following MS DRGs-

		DRGs-		
OB	765-770, 774-782		OB	370-384, 390-391
Psych	876, 880-887		Psych	424-432
OHS	216-221, 231-236		OHS	104, 105, 106, 547, 548, 549, 550
Ther Cath	246-251		Ther Cath	555-558
Dx Cath	222-225, 286-287		Dx Cath	124, 125

Discharges

			2005										
Facility Grouping	State	Facility	29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	1		11	17	14		2	18	13	2		15	93
		Carolinas HealthCare System University			1	2	2			5	2				12
		Carolinas Medical Center	25		168	262	289	3	9	338	306	12	3	195	1,508
		Mercy Hospital	7		174	158	487	2	10	233	175	4	1	112	1,363
	NC Total		33		354	439	792	5	21	592	496	18	4	322	3,076
CHS-Charlotte Total			33	-	354	439	792	5	21	592	496	18	4	322	3,076
CHS-Other	NC	Carolinas HealthCare System Kings Moun			1	62					1		1	13	78
		Carolinas Medical Center Northeast			1	1	2				1			1	6
		Carolinas Specialty Hospital				1	7	2		3	1	1		2	17
		Charles A. Cannon Jr Memorial Hospital													
		Cleveland Regional Medical Center			1	5				3	2	3	2	1	17
		CMC - Lincoln Medical Center				1					1				2
		Cone Health													
		Grace Hospital													
		MedWest Haywood													
		Moses H Cone Mem Hospital				1									1
		Randolph Hospital													
		St. Luke's Hospital								1					1
		Stanly Memorial Hospital													
		Union Regional Med Center	1		1	1	9			2	2			2	18
		Wilkes Regional Medical Center				1									1
	NC Total		1		4	73	18	2		9	8	4	3	19	141
	SC	AnMed Health				1				1					2
		Bon Secours St. Francis Xavier								2				1	3
		Roper Hospital			1					2	2				5
	SC Total				1	1				5	2			1	10
CHS-Other Total			1		5	74	18	2		14	10	4	3	20	151

Other	NC	Alamance Regional Med Ctr														
		Albemarle Health								1						1
		Alleghany Memorial Hosp									1					1
		Annie Penn Hospital														
		Brunswick Hospital														
		Brynn Marr Behavioral Ha														
		Caldwell Memorial Hospital														
		Cannon Memorial									1					1
		Cape Fear Valley Hlth Sys								1					1	2
		CarePartners Rehabilitation Hospital														
		CarolinaEast Medical Ctr														
		CaroMont Health Inc.	1		6	820	1	5	1	2	5	2	16	111	770	
		Catawba Valley Medical Center									3			1	4	
		Craven Regional Med Ctr												1	1	
		Davis Medical Center								1					1	
		Duke Raleigh														
		Duke University Med Ctr			6	10	7		1	17	16			7	66	
		Durham Regional Hospital												2	2	
		Fellowship Hall				1	2			1	1				5	
		First Health Moore Rgnl														
		Forsyth Memorial Hospital	1												1	
		Frye Regional Med Center				1									1	
		High Point Regional Hosp	1			1				1					3	
		Highlands-Cashiers Hosp														
		Hugh Chatham Mem Hospital												1	1	
		Iredell Health System				1	1			1					3	
		Johnston Medical Center-Smithfield														
		Kindred Hosp Greensboro				1									1	
		Lake Norman Reg Med Ctr				1					2				3	
		Lexington Memorial Hospital														
		Margaret R. Pardee Memorial Hospital					1								1	
		Medical Park Hospital														
		MedWest Harris														
		Mission Health System				2	1							1	4	
		Murphy Medical Center														
		NC Specialty Hospital														
		New Hanover Regional M.C.									3				3	
		North Carolina Specialty Hospital														
		Park Ridge Health							1					2	3	
		Person County Mem Hosp				1									1	
		Pitt County Memorial Hospital					2							1	3	
		Presb Orthopaedic Hosp	4		27	31	47	4	1	47	42		3	23	229	
		Presbyterian Hospital	5		78	132	147	1	3	108	114	5	4	54	649	
		Presbyterian Hospital Huntersville				4					1				5	
		Presbyterian Hospital Matthews			9	8	21			5	6			3	52	
		Rex Healthcare														
		Rowan Regional Med Center								2	2				4	
		Rutherford Hospital												1	1	
		Scotland Health Care Sys														
		Stanly Regional Medical Center														
		The NC Baptist Hospitals			5	5	2			6	6		1	10	35	
		Thomasville Medical Center														
		Transylvania Reg Hosp														
		UNC Hospitals			3	2	1			2	19		1	7	35	
		WakeMed														
		WakeMed Cary														
		Watauga Medical Center														
	NC Total		12		136	821	233	10	7	193	222	7	25	228	1,892	

	SC	Aiken Regional Med. Center															
		Allen Bennett Memorial									1						1
		Bamberg County Memorial															
		Beaufort Memorial									2	1					3
		Cannon Memorial										1					1
		Carolina Pines															
		Other	1		1						1	2					5
		Chester Regional Medical Center	3			1	1	3	10		19	12	9			9	67
		Chesterfield General															
		Coastal Carolina Hospital															
		Conway Hospital, Inc.															
		East Cooper Regional Med Ctr									1	4					5
		Fairfield Memorial															
		Georgetown County Memorial				1	1										2
		Grand Strand Regional Med Ctr				3	2		1		2	1				2	11
		Greenville Memorial Med. Center					4	1			1	2				3	11
		Greer Memorial Hospital															
		Hilton Head Med Ctr & Clns															
		Kershaw County Medical Ctr										1					1
		Laurens County Healthcare															
		Lexington Medical Center					1				8	3					12
		Loris Community				1											1
		M. U. S. C. Medical Center	1		4	8	6	2			15	25	2	1		5	69
		Marion County Medical Ctr															
		Mary Black Memorial			1			9						9			19
		McLeod Medical Center-Dillonn															
		Mcleod Regional															
		Newberry County Memorial Hospital															
		Oconee Memorial					1									1	2
		Palmetto Baptist (Columbia) Medical Ctr	1			2	3	1			5	3	2				17
		Palmetto Baptist (Easley) Medical Ctr															
		Palmetto Richland Memorial	4			6	8				29	25	1	1		8	82
		Patewood Memorial Hospital															
		Providence Hospital				2		1	2		2	4				1	12
		Providence Northeast	1						1		5	1					8
		Regional Med Ctr, Oburg/Cal Cnty									1						1
		Self Memorial Hospital									5						5
		Spartanburg Regional Med Ctr	1			2		2	1		1	3	7	4		7	28
		Springs Memorial	10		2	4	49				57	23				9	154
		St. Francis-Greenville			8						4	11		9		2	34
		Trident Medical Center										2				1	3
		Tuomey Regional Medical Center			1							3					4
		Upstate Carolina Medical Center						9					2	10		3	24
		Village Hospital															
		Waccamaw Community Hospital	1			1	1				3					2	8
		Wallace Thomson Hospital											19				19
	SC Total		23	-	17	31	77	25	15		162	127	42	34		53	609
Other Total			35	-	153	852	310	38	22		385	349	49	59		279	2,501
PMC	SC	Piedmont Medical Center	264	1	302	7	732	61	110		3,776	2,842	149	1		1,983	9,807
Grand Total			333	1	814	1,372	1,852	108	153		4,736	3,397	220	67		2,284	15,336

Market Share by ZIP Code

Facility Grouping	State	Facility	2005 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.3%	0.0%	1.4%	1.2%	0.8%	0.0%	1.3%	0.4%	0.4%	0.9%	0.0%	0.7%	0.6%
		Carolinas HealthCare System University	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%
		Carolinas Medical Center	7.5%	0.0%	20.6%	10.1%	15.6%	2.8%	5.9%	7.1%	9.0%	6.5%	4.5%	8.5%	10.5%
		Mercy Hospital	2.1%	0.0%	21.4%	11.5%	26.3%	1.9%	6.5%	4.9%	5.2%	1.8%	1.5%	4.9%	8.9%
	NC Total		9.9%	0.0%	43.5%	32.0%	42.8%	4.7%	13.7%	12.5%	14.5%	8.2%	6.0%	14.1%	20.1%
CHS-Charlotte Total			9.9%	0.0%	43.5%	32.0%	42.8%	4.7%	13.7%	12.5%	14.5%	8.2%	6.0%	14.1%	20.1%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.0%	0.1%	4.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	1.5%	0.6%	0.8%
		Carolinas Medical Center Northeast	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolinas Specialty Hospital	0.0%	0.0%	0.0%	0.1%	0.4%	1.9%	0.0%	0.1%	0.0%	0.5%	0.0%	0.1%	0.1%
		Charles A. Cannon Jr Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.0%	0.1%	0.4%	0.0%	0.0%	0.0%	0.1%	0.1%	1.4%	3.0%	0.0%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.3%	0.0%	0.1%	0.1%	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
	NC Total		0.3%	0.0%	0.5%	5.3%	1.0%	1.9%	0.0%	0.2%	0.2%	1.8%	4.5%	0.8%	0.9%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%
CHS-Other Total			0.3%	0.0%	0.6%	5.4%	1.0%	1.9%	0.0%	0.3%	0.3%	1.8%	4.5%	0.9%	1.0%

Other	NC	Alamance Regional Med Ctr	0 0%	0 0%	0.0%	0 0%	0 0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Albemarle Health	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%
		Anne Penn Hospital	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Bryrn Marr Behavioral Ha	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%
		Caldwell Memorial Hospital	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0 0%	0.0%	0 0%	0 0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0 0%	0 0%	0.0%	0 0%	0 0%	0 0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%
		CaroMont Health Inc.	0 3%	0.0%	0.7%	45.2%	0 1%	4.7%	0 7%	0 0%	0 1%	0.9%	23.9%	4.9%	5.0%
		Catawba Valley Medical Center	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.1%	0.0%	0.0%	0 0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Duke Raleigh	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Duke University Med Ctr	0 0%	0.0%	1.0%	0.7%	0 4%	0.0%	0 7%	0.4%	0.5%	0 0%	0.0%	0.3%	0.4%
		Durham Regional Hospital	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.1%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.3%	0.0%	0 0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0 1%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		High Point Regional Hosp	0.3%	0.0%	0.0%	0.1%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Hugh Chatham Mem Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		Iredell Health System	0 0%	0.0%	0 0%	0.1%	0 1%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0 0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.0%	0.1%	0.0%	0 0%	0.0%	0 0%	0.1%	0.0%	0.0%	0.0%	0.0%
		Lexington Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Medical Park Hospital	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		MedWest Harris	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0 0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%
		NC Specialty Hospital	0 0%	0 0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%
		New Hanover Regional M C.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%
		North Carolina Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Park Ridge Health	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Person County Mem Hosp	0 0%	0 0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Pitt County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0 1%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	1.2%	0 0%	3.3%	2.3%	2.5%	3.8%	0 7%	1.0%	1.2%	0.0%	4.5%	1.0%	1.8%
		Presbyterian Hospital	1.5%	0.0%	9.6%	9.6%	7.8%	0.8%	2.0%	2.2%	3.4%	2.3%	6.0%	2.4%	4.2%
		Presbyterian Hospital Huntersville	0 0%	0 0%	0.0%	0.3%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Presbyterian Hospital Matthews	0.0%	0.0%	1.1%	0.6%	1.1%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.1%	0.3%
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 1%	0.0%	0.0%	0.0%	0.0%
		Rutherford Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		The NC Baptist Hospitals	0.0%	0.0%	0.6%	0.4%	0 1%	0.0%	0.0%	0.1%	0.2%	0 0%	1.5%	0 4%	0.2%
		Thomasville Medical Center	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.0%	0.0%	0 4%	0.1%	0.1%	0.0%	0.0%	0.0%	0.6%	0 0%	1.5%	0 3%	0.2%
		WakeMed	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%
		WakeMed Cary	0.0%	0.0%	0 0%	0 0%	0 0%	0.0%	0.0%	0 0%	0 0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0 0%	0.0%	0.0%	0.0%	0 0%	0.0%	0 0%	0.0%	0.0%	0 0%	0.0%
	NC Total		3.6%	0.0%	18.7%	59.8%	12.6%	9.4%	4.8%	4.1%	6.5%	3.2%	37.3%	8.9%	12.3%

	SC	Aiken Regional Med. Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Other	0.3%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	0.9%	0.0%	0.0%	0.1%	0.1%	2.8%	6.5%	0.4%	0.4%	4.1%	0.0%	0.4%	0.4%	0.4%
		Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Greenville Memorial Med Center	0.0%	0.0%	0.0%	0.0%	0.2%	0.9%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clns	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
		Loris Community	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C. Medical Center	0.3%	0.0%	0.5%	0.5%	0.3%	1.9%	0.0%	0.3%	0.7%	0.9%	1.5%	0.2%	0.4%	0.4%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	8.5%	0.0%	0.0%	0.0%	0.0%	13.4%	0.0%	0.1%	0.1%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.3%	0.0%	0.0%	0.1%	0.2%	0.9%	0.0%	0.1%	0.1%	0.9%	0.0%	0.0%	0.1%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	1.2%	0.0%	0.0%	0.4%	0.4%	0.0%	0.0%	0.8%	0.7%	0.5%	1.5%	0.4%	0.5%	0.5%
		Patewood Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.0%	0.1%	0.0%	0.9%	1.3%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%
		Providence Northeast	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%
		Regional Med Ctr, Oburg/Cal Cnty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.3%	0.0%	0.0%	0.1%	0.0%	1.8%	0.7%	0.0%	0.1%	3.2%	8.0%	0.3%	0.2%	0.2%
		Springs Memorial	3.0%	0.0%	0.2%	0.3%	2.6%	0.0%	0.0%	1.2%	0.7%	0.0%	0.0%	0.4%	1.0%	1.0%
		St Francis-Greenville	0.0%	0.0%	1.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.3%	0.0%	13.4%	0.1%	0.2%	0.2%
		Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	8.5%	0.0%	0.0%	0.0%	0.9%	14.8%	0.1%	0.2%	0.2%
		Village Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.3%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	8.6%	0.0%	0.0%	0.1%	0.1%
	SC Total		8.9%	0.0%	2.1%	2.3%	4.2%	28.4%	9.8%	3.4%	3.7%	19.1%	80.7%	2.3%	4.0%	4.0%
Other Total			10.5%	0.0%	18.8%	82.1%	18.7%	36.8%	14.4%	7.8%	10.3%	22.3%	88.1%	12.2%	18.3%	18.3%
PMC	SC	Piedmont Medical Center	79.3%	100.0%	37.1%	0.8%	36.8%	87.8%	71.8%	79.7%	74.6%	67.7%	1.8%	72.8%	62.8%	62.8%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Excl
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters
Excludes the following MS DRGs-

Discharges

Facility Grouping	State	Facility	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte		12	12	26	13		1	23	24			8	119
		Carolinas HealthCare System University		1	2	4	4			3	1			3	18
		Carolinas Medical Center	29	199	264	306	315	9	19	537	491	16	8	288	2,481
		Mercy Hospital	27	231	272	186	454	2	3	303	242	3	1	128	1,852
	NC Total		56	443	550	522	786	11	23	866	758	19	9	427	4,470
CHS-Charlotte Total			56	443	550	522	786	11	23	866	758	19	9	427	4,470
CHS-Other	NC	Carolinas HealthCare System Kings Moun	1		1	40					1	1		14	58
		Carolinas Medical Center Northeast				1	3			1	2			1	8
		Carolinas Specialty Hospital	1	1	2	8	6			12	9			8	37
		Charles A Cannon Jr. Memorial Hospital													
		Cleveland Regional Medical Center	1			15	1			1			3	5	26
		CMC - Lincoln Medical Center									1				1
		Cone Health			1					2					3
		Grace Hospital													
		MedWest Haywood		1	1										2
		Moses H Cone Mem Hospital													
		Randolph Hospital													
		St. Luke's Hospital									1				1
		Stanly Memorial Hospital													
		Union Regional Med Center	2	11	4	7	12		1	7	5		1	3	53
		Wilkes Regional Medical Center													
	NC Total		5	13	9	66	22		1	23	19	1	4	28	189
	SC	AnMed Health					1				1				2
		Bon Secours St. Francis Xavier								1	1			1	3
		Roper Hospital					1			1	2			1	5
	SC Total						2			2	4			2	10
CHS-Other Total			5	13	9	66	24		1	25	23	1	4	28	199

Other	NC	Alamance Regional Med Ctr					2								2
		Albemarle Health													
		Alleghany Memorial Hosp													
		Annie Penn Hospital													
		Brunswick Hospital												1	1
		Brynn Marr Behavioral Hs													
		Caldwell Memorial Hospital												2	2
		Cannon Memorial													
		Cape Fear Valley Hlth Sys													
		CarePartners Rehabilitation Hospital													
		CarolinaEast Medical Ctr								1					1
		CaroMont Health Inc.			2	555		3	2	4	4	8	18	82	683
		Catawba Valley Medical Center													
		Craven Regional Med Ctr													
		Davis Medical Center													
		Duke Raleigh							1		1				2
		Duke University Med Ctr	1	5	11	12	8			10	29	1	1	5	83
		Durham Regional Hospital								3				1	4
		Fellowship Hall													
		First Health Moore Rgnl			1										1
		Forsyth Memorial Hospital									2			3	5
		Frye Regional Med Center				1									1
		High Point Regional Hosp				1					1				2
		Highlands-Cashiers Hosp									1				1
		Hugh Chatham Mem Hospital												3	3
		Iredell Health System								3					3
		Johnston Medical Center-Smithfield													
		Kindred Hosp Greensboro				1									1
		Lake Norman Reg Med Ctr			2	1				2	1			1	7
		Lexington Memorial Hospital													
		Margaret R. Pardee Memorial Hospital								1					1
		Medical Park Hospital													
		MedWest Harris								1					1
		Mission Health System		1			1				1			1	4
		Murphy Medical Center								1					1
		NC Specialty Hospital		1											1
		New Hanover Regional M.C.			1						1			3	5
		North Carolina Specialty Hospital													
		Park Ridge Health													
		Person County Mem Hosp													
		Pitt County Memorial Hospital								1	1				2
		Presb Orthopaedic Hosp	2	29	35	27	35	2	2	41	31	1	2	23	230
		Presbyterian Hospital	17	93	149	122	126	1	4	127	101	5	4	79	828
		Presbyterian Hospital Huntersville			1	5					2			2	10
		Presbyterian Hospital Matthews		30	17	5	25			12	6	1		4	100
		Rex Healthcare													
		Rowan Regional Med Center								1	2			1	4
		Rutherford Hospital			1										1
		Scotland Health Care Sys			1					1					2
		Stanly Regional Medical Center													
		The NC Baptist Hospitals		3	2	12	2		1	13	6			5	44
		Thomasville Medical Center													
		Transylvania Reg Hosp												1	1
		UNC Hospitals			4	11	1			1	2	1		2	22
		WakeMed													
		WakeMed Cary													
		Watauga Medical Center			1						1			1	3
	NC Total		20	162	228	753	200	6	10	223	183	17	20	230	2,062

	SC	Aiken Regional Med Center									1					1
		Allen Bennett Memorial														
		Bamberg County Memorial													1	1
		Beaufort Memorial			1	1										2
		Cannon Memorial														
		Carolina Pines								1					1	2
		Other					1									1
		Chester Regional Medical Center	2			1	2	1	14	18	8	15			9	88
		Chesterfield General								1	1					2
		Coastal Carolina Hospital														
		Conway Hospital, Inc.				1					1				2	4
		East Cooper Regional Med Ctr				1				2	1				1	5
		Fairfield Memorial														
		Georgetown County Memorial		1							1					2
		Grand Strand Regional Med Ctr			2	1	1				2				3	9
		Greenville Memorial Med. Center			1	2				6					3	12
		Greer Memorial Hospital												1		1
		Hilton Head Med Ctr & Clns								1						1
		Kershaw County Medical Ctr				1										1
		Laurens County Healthcare														
		Lexington Medical Center	2		2	1	3	1		8	7	1			5	30
		Loris Community			1						1					2
		M. U. S. C. Medical Center	1	1	3	10	9	1	1	28	37	1	1		18	111
		Marion County Medical Ctr														
		Mary Black Memorial						4			1	4	2	2	2	13
		McLeod Medical Center-Dillonn				1										1
		Mcleod Regional	1		1	1	3			3					1	10
		Newberry County Memorial Hospital														
		Oconee Memorial				2									2	4
		Palmetto Baptist (Columbia) Medical Ctr			1	1				3	2	3			6	16
		Palmetto Baptist (Easley) Medical Ctr								1						1
		Palmetto Richland Memorial	2	2	3	5	13	1	2	23	11	1			9	72
		Patewood Memorial Hospital			1	1										2
		Providence Hospital			1				1	2	6				1	11
		Providence Northeast			2		1			1	3				1	8
		Regional Med Ctr, Oburg/Cal Cnty													2	2
		Self Memorial Hospital		1	2						3					6
		Spartanburg Regional Med Ctr			4	5	2	3	1	5	3	12	11		6	52
		Springs Memorial	15	28	8	5	37	2	1	40	28				12	174
		St. Francis-Greenville				4	1			3					1	9
		Trident Medical Center						3		1	1					5
		Tuomey Regional Medical Center								1	1					2
		Upstate Carolina Medical Center						13		2	1		22	4		42
		Village Hospital			1											1
		Waccamaw Community Hospital			1					2	3		1	1		8
		Wallace Thomson Hospital										14				14
	SC Total		23	33	33	44	73	29	20	162	121	51	35	91	708	
Other Total			43	185	261	797	273	35	30	378	314	68	68	321	2,770	
PMC	SC	Piedmont Medical Center	185	35	234	500	495	85	88	2,688	1,905	113	35	1,207	7,515	
Grand Total			269	686	1,054	1,885	1,578	101	140	3,951	3,000	201	106	1,983	14,954	

Market Share by ZIP Code

Facility Grouping	State	Facility	2009 28704	28707	28708	28710	28715	28717	28726	28730	28732	28742	28743	28745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.0%	1.7%	1.1%	1.4%	0.8%	0.0%	0.7%	0.6%	0.8%	0.0%	0.0%	0.4%	0.8%
		Carolinas HealthCare System University	0.0%	0.1%	0.2%	0.2%	0.3%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.1%
		Carolinas Medical Center	10.8%	29.0%	25.0%	18.2%	20.0%	8.9%	13.6%	13.6%	16.4%	8.0%	7.6%	14.5%	16.8%
		Mercy Hospital	10.0%	33.7%	25.8%	8.9%	28.8%	2.0%	2.1%	7.7%	8.1%	1.5%	0.9%	6.5%	12.4%
	NC Total		20.8%	64.6%	52.2%	27.7%	49.8%	10.9%	16.4%	21.8%	25.3%	9.5%	8.5%	21.5%	29.8%
CHS-Charlotte Total			20.8%	64.6%	52.2%	27.7%	49.8%	10.9%	16.4%	21.8%	25.3%	9.5%	8.5%	21.5%	29.8%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.4%	0.0%	0.1%	2.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.5%	0.0%	0.7%	0.4%
		Carolinas Medical Center Northeast	0.0%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%
		Carolinas Specialty Hospital	0.4%	0.1%	0.2%	0.2%	0.4%	0.0%	0.0%	0.3%	0.3%	0.0%	0.0%	0.2%	0.2%
		Charles A. Cannon Jr. Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.4%	0.0%	0.0%	0.8%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	2.8%	0.3%	0.2%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.7%	1.8%	0.4%	0.4%	0.8%	0.0%	0.7%	0.2%	0.2%	0.0%	0.9%	0.2%	0.4%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		1.9%	1.9%	0.9%	3.5%	1.4%	0.0%	0.7%	0.6%	0.6%	0.5%	3.8%	1.3%	1.3%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Roper Hospital	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%
	SC Total		0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%
CHS-Other Total			1.9%	1.9%	0.9%	3.5%	1.5%	0.0%	0.7%	0.6%	0.8%	0.5%	3.8%	1.4%	1.3%

Other	NC	Alamance Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Brynn Marr Behavioral Ha	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.0%	0.0%	0.2%	29.4%	0.0%	3.0%	1.4%	0.1%	0.1%	4.0%	12.3%	4.6%	4.8%			
		Catawba Valley Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.4%	0.7%	1.0%	0.6%	0.5%	0.0%	0.0%	0.3%	1.0%	0.5%	0.9%	0.3%	0.5%			
		Durham Regional Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%			
		Fellowship Hall	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		First Health Moore Rgnl	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Forsyth Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.2%	0.0%			
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		High Point Regional Hosp	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Highlands-Cashiers Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.0%			
		Iredell Health System	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%			
		Lexington Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Margaret R. Pardee Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Mission Health System	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%			
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		NC Specialty Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		New Hanover Regional M.C.	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.2%	0.0%			
		North Carolina Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Park Ridge Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Pitt County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Presb Orthopaedic Hosp	0.7%	4.2%	3.3%	1.4%	2.2%	2.0%	1.4%	1.0%	1.0%	0.5%	1.6%	1.2%	1.5%			
		Presbyterian Hospital	6.3%	13.6%	14.1%	6.5%	6.0%	1.0%	2.8%	3.2%	3.4%	2.5%	3.6%	4.0%	5.5%			
		Presbyterian Hospital Huntersville	0.0%	0.0%	0.1%	0.3%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%			
		Presbyterian Hospital Matthews	0.0%	4.4%	1.6%	0.3%	1.6%	0.0%	0.0%	0.3%	0.2%	0.5%	0.0%	0.2%	0.7%			
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Rowan Regional Med Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.0%			
		Rutherford Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Scotland Health Care Sys	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Stanly Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		The NC Baptist Hospitals	0.0%	0.4%	0.2%	0.5%	0.1%	0.0%	0.7%	0.3%	0.2%	0.0%	0.0%	0.3%	0.3%			
		Thomasville Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Transylvania Reg Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%			
		UNC Hospitals	0.0%	0.0%	0.4%	0.5%	0.1%	0.0%	0.0%	0.0%	0.1%	0.5%	0.0%	0.1%	0.1%			
		WakeMed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		WakeMed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%			
		Watauga Medical Center	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%			
	NC Total		7.4%	23.6%	21.6%	39.9%	12.7%	5.9%	7.1%	5.6%	6.4%	8.5%	18.6%	11.6%	13.8%			

	SC	Aiken Regional Med. Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Other	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	0.7%	0.0%	0.0%	0.1%	0.1%	1.0%	10.0%	0.5%	0.2%	7.5%	0.0%	0.5%	0.5%	0.5%
		Chesterfield General	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.0%	0.0%	0.2%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.1%
		Greenville Memorial Med Center	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.2%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.9%	0.0%	0.0%
		Hilton Head Med Ctr & Clins	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.7%	0.0%	0.2%	0.1%	0.2%	1.0%	0.0%	0.2%	0.2%	0.5%	0.0%	0.3%	0.2%	0.2%
		Loris Community	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C. Medical Center	0.4%	0.1%	0.3%	0.5%	0.6%	1.0%	0.7%	0.7%	1.2%	0.5%	0.9%	0.9%	0.7%	0.7%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	4.0%	0.0%	0.0%	0.0%	2.0%	1.9%	0.1%	0.1%	0.1%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.4%	0.0%	0.1%	0.1%	0.2%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%
		Newberry County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	1.5%	0.0%	0.3%	0.1%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.7%	0.3%	0.3%	0.3%	0.8%	1.0%	1.4%	0.6%	0.4%	0.5%	0.0%	0.5%	0.5%	0.5%
		Patewood Memorial Hospital	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.7%	0.1%	0.2%	0.0%	0.0%	0.1%	0.1%	0.1%
		Providence Northeast	0.0%	0.0%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.1%	0.1%	0.1%
		Regional Med Ctr, Oburg/Cal Cnty	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.0%	0.0%	0.4%	0.3%	0.1%	3.0%	0.7%	0.1%	0.1%	6.0%	10.4%	0.3%	0.3%	0.3%
		Springs Memorial	5.8%	4.1%	0.6%	0.3%	2.3%	2.0%	0.7%	1.0%	0.9%	0.0%	0.0%	0.6%	1.2%	1.2%
		St. Francis-Greenville	0.0%	0.0%	0.0%	0.2%	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.1%	0.1%
		Trident Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	3.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	12.9%	0.0%	0.1%	0.0%	0.0%	20.8%	0.2%	0.3%	0.3%
		Village Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.9%	0.1%	0.1%	0.1%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	7.0%	0.0%	0.0%	0.1%	0.1%
	SC Total		8.8%	4.8%	3.1%	2.3%	4.8%	28.7%	14.3%	3.8%	4.0%	25.4%	35.8%	4.8%	4.7%	4.7%
Other Total			16.0%	26.4%	24.8%	42.3%	17.3%	34.7%	21.4%	9.8%	16.8%	33.8%	64.7%	16.2%	16.5%	16.5%
PMC	SC	Piedmont Medical Center	61.3%	8.1%	22.2%	26.8%	31.4%	64.5%	61.4%	88.6%	63.8%	58.2%	33.0%	60.9%	80.3%	80.3%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Facility Grouping - Excl
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters
Excludes the following MS DRGs-

Discharges

Facility Grouping	State	Facility	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	1	21	16	23	10	2		23	25	1	4	16	144
		Carolinas HealthCare System University		3	5	4	12			4	3	1	1	1	34
		Carolinas Medical Center	49	248	348	362	407	16	17	527	502	24	8	305	2,813
		Mercy Hospital	49	442	360	316	491	4	4	429	410	12	3	201	2,721
	NC Total		99	714	731	705	920	22	21	983	940	38	16	523	5,712
CHS-Charlotte Total			99	714	731	705	920	22	21	983	940	38	16	523	5,712
CHS-Other	NC	Carolinas HealthCare System Kings Moun				31					8	1	1	8	44
		Carolinas Medical Center Northeast		4	4	8	4			4	8			1	29
		Carolinas Specialty Hospital	1	2		8	8			10	6			8	34
		Charles A Cannon Jr Memorial Hospital				1					1			1	3
		Cleveland Regional Medical Center		1		6							3	8	18
		CMC - Lincoln Medical Center				2									2
		Cone Health													
		Grace Hospital			1									1	2
		MedWest Haywood													
		Moses H Cone Mem Hospital													
		Randolph Hospital													
		St. Luke's Hospital													
		Stanly Memorial Hospital													
		Union Regional Med Center	1	18	5	7	13	1		2	5	2		8	61
		Wilkes Regional Medical Center													
	NC Total		2	23	10	53	20	1		18	24	3	4	38	194
	SC	AnMed Health				1				1					2
		Bon Secours St. Francis Xavier			1		2			1					4
		Roper Hospital		2			2		1	1					6
	SC Total			2	1	1	4		1	3					12
CHS-Other Total			2	25	11	54	24	1	1	19	24	3	4	38	206

Other	NC	Alamance Regional Med Ctr		2												2
		Albemarle Health														
		Alleghany Memorial Hosp														
		Annie Penn Hospital								1						1
		Brunswick Hospital			1										1	2
		Brynn Marr Behavioral He														
		Caldwell Memorial Hospital				4										4
		Cannon Memorial														
		Cape Fear Valley Hlth Sys									1					1
		CarePartners Rehabilitation Hospital			3											3
		CarolinaEast Medical Ctr														
		CaroMont Health Inc.		1	4	510	1	3	4	4	4	5	10	114	660	
		Catawba Valley Medical Center								1						1
		Craven Regional Med Ctr														
		Davis Medical Center	1				1				2			1	5	
		Duke Raleigh				1										1
		Duke University Med Ctr	1	4	17	7	6			7	16			6	64	
		Durham Regional Hospital					1	1								2
		Fellowship Hall														
		First Health Moore Rgnl									1					1
		Forsyth Memorial Hospital			1											1
		Frye Regional Med Center				1				1						2
		High Point Regional Hosp									1					1
		Highlands-Cashiers Hosp														
		Hugh Chatham Mem Hospital														
		Iredell Health System									1					1
		Johnston Medical Center-Smithfield									1					1
		Kindred Hosp Greensboro									1					1
		Lake Norman Reg Med Ctr			1	3	1			2	2					9
		Lexington Memorial Hospital		1												1
		Margaret R. Pardee Memorial Hospital			1	1										2
		Medical Park Hospital									1					1
		MedWest Harris														
		Mission Health System			5	1	3				1			2	12	
		Murphy Medical Center														
		NC Specialty Hospital														
		New Hanover Regional M.C.		1	2		1			1						5
		North Carolina Specialty Hospital			1											1
		Park Ridge Health		1												1
		Person County Mem Hosp														
		Pitt County Memorial Hospital														
		Presb Orthopaedic Hosp	6	31	29	29	23		1	38	47	4	1	22	229	
		Presbyterian Hospital	6	97	94	89	85	2	2	110	133	4	1	62	685	
		Presbyterian Hospital Huntersville		4	2	2					5				13	
		Presbyterian Hospital Matthews	2	62	10	6	18			5	7			6	116	
		Rex Healthcare									1					1
		Rowan Regional Med Center		1		1										2
		Rutherford Hospital								1						1
		Scotland Health Care Sys														
		Stanly Regional Medical Center				1				1						2
		The NC Baptist Hospitals	1	4	1	6	1			8	13			6	40	
		Thomasville Medical Center												1	1	
		Transylvania Reg Hosp			1										1	
		UNC Hospitals	1	6	6	4	3			3	2			3	28	
		WakeMed								1	2				3	
		WakeMed Cary								1					1	
		Watauga Medical Center									1				1	
	NC Total		18	215	176	666	144	6	7	183	243	13	12	224	1,910	

	SC	Aiken Regional Med Center	1								1					2
		Allen Bennett Memorial														
		Bamberg County Memorial								1						1
		Beaufort Memorial													1	1
		Cannon Memorial														
		Carolina Pines			1	1					2				2	6
		Other		1		1			1	2	1					6
		Chester Regional Medical Center	4			1	2		12	16	4	7			11	57
		Chesterfield General			1					1		1				3
		Coastal Carolina Hospital								1						1
		Conway Hospital, Inc.					1				1					2
		East Cooper Regional Med Ctr		3	1	1										5
		Fairfield Memorial			1											1
		Georgetown County Memorial														
		Grand Strand Regional Med Ctr	1	1	1	1	4	1		5	8	1			1	24
		Greenville Memorial Med. Center			1	3	2			4	4				1	15
		Greer Memorial Hospital			1	2										3
		Hilton Head Med Ctr & Clns			1					1						2
		Kershaw County Medical Ctr				3	1				1					5
		Laurens County Healthcare		1						1						2
		Lexington Medical Center				1	4			8	7					20
		Loris Community			1	1				1						3
		M. U. S. C. Medical Center	1	5	5	5	6	3		31	43	1	3	10		113
		Marion County Medical Ctr								1						1
		Mary Black Memorial				1		1		2			1	2		7
		McLeod Medical Center-Dillonn														
		Mcleod Regional								1						1
		Newberry County Memorial Hospital		1												1
		Oconee Memorial								1	2				1	4
		Palmetto Baptist (Columbia) Medical Ctr				1	2			1	6				2	12
		Palmetto Baptist (Easley) Medical Ctr														
		Palmetto Richland Memorial	2			12	10		1	36	20	1			13	95
		Patewood Memorial Hospital													1	1
		Providence Hospital			1	1	1			2	4		1			10
		Providence Northeast			1	1				2	3				1	8
		Regional Med Ctr, Oburg/Cal Cnty		1						3						4
		Self Memorial Hospital			1						4					5
		Spartanburg Regional Med Ctr				5	1	6		4	3	7	11	7		44
		Springs Memorial	19	33	3	5	10			50	16			11		147
		St. Francis-Greenville				1				13	4			1		19
		Trident Medical Center			1		1			1				1		4
		Tuomey Regional Medical Center		1												1
		Upstate Carolina Medical Center						9				1	22	2		34
		Village Hospital														
		Waccamaw Community Hospital			1	1	1			1	2			1		7
		Wallace Thomson Hospital							1			25				26
	SC Total		28	47	22	48	46	20	15	190	138	44	38	89		703
Other Total			45	282	201	714	190	25	22	373	378	57	50	283		2,613
PMC	SC	Piedmont Medical Center	173	85	197	575	441	74	80	3,086	2,276	189	43	1,452		8,625
Grand Total			320	1,066	1,140	2,048	1,575	123	124	4,471	3,513	257	113	2,306		17,166

Market Share by ZIP Code

2011

Facility Grouping	State	Facility	29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	NC	Carolinas HealthCare System Charlotte	0.3%	2.0%	1.8%	1.1%	0.6%	1.8%	0.0%	0.5%	0.7%	0.4%	3.5%	0.7%	0.8%
		Carolinas HealthCare System University	0.0%	0.3%	0.4%	0.2%	0.8%	0.0%	0.0%	0.1%	0.1%	0.4%	0.9%	0.0%	0.2%
		Carolinas Medical Center	15.3%	23.3%	30.5%	17.7%	25.8%	13.0%	13.7%	11.8%	13.9%	9.3%	7.1%	13.2%	15.4%
		Mercy Hospital	15.3%	41.8%	31.8%	15.4%	31.2%	3.3%	3.2%	8.6%	11.3%	4.7%	2.7%	8.7%	15.9%
	NC Total		30.9%	67.0%	64.1%	34.4%	58.4%	17.9%	16.9%	22.0%	26.0%	14.8%	14.2%	22.7%	33.3%
CHS-Charlotte Total			30.9%	67.0%	64.1%	34.4%	58.4%	17.9%	16.9%	22.0%	26.0%	14.8%	14.2%	22.7%	33.3%
CHS-Other	NC	Carolinas HealthCare System Kings Moun	0.0%	0.0%	0.0%	1.5%	0.0%	0.0%	0.0%	0.0%	0.1%	0.4%	0.9%	0.3%	0.3%
		Carolinas Medical Center Northeast	0.0%	0.4%	0.4%	0.1%	0.3%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.0%	0.2%
		Carolinas Specialty Hospital	0.3%	0.2%	0.0%	0.1%	0.2%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.4%	0.2%
		Charles A. Cannon Jr Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cleveland Regional Medical Center	0.0%	0.1%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	2.7%	0.4%	0.1%
		CMC - Lincoln Medical Center	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cone Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grace Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Haywood	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Moses H Cone Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Randolph Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		St. Luke's Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Union Regional Med Center	0.3%	1.5%	0.4%	0.3%	0.8%	0.8%	0.0%	0.0%	0.1%	0.8%	0.0%	0.4%	0.4%
		Wilkes Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		0.6%	2.2%	0.9%	2.6%	1.3%	0.8%	0.0%	0.4%	0.7%	1.2%	3.5%	1.8%	1.1%
	SC	AnMed Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bon Secours St. Francis Xavier	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Roper Hospital	0.0%	0.2%	0.0%	0.0%	0.1%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	SC Total		0.0%	0.2%	0.1%	0.0%	0.3%	0.0%	0.8%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
CHS-Other Total			0.6%	2.3%	1.0%	2.6%	1.5%	0.8%	0.8%	0.4%	0.7%	1.2%	3.5%	1.8%	1.2%

Other	NC	Alamance Regional Med Ctr	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Albemarle Health	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Alleghany Memorial Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Annie Penn Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brunswick Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Brynn Marr Behavioral Hs	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Caldwell Memorial Hospital	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cape Fear Valley Hlth Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarePartners Rehabilitation Hospital	0.0%	0.0%	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CarolinaEast Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		CaroMont Health Inc.	0.0%	0.1%	0.4%	24.6%	0.1%	2.4%	9.2%	0.1%	0.1%	1.9%	8.8%	4.9%	3.8%	
		Catawba Valley Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Craven Regional Med Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Davis Medical Center	0.3%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke Raleigh	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Duke University Med Ctr	0.3%	0.4%	1.6%	0.3%	0.4%	0.0%	0.0%	0.2%	0.4%	0.0%	0.0%	0.3%	0.4%	
		Durham Regional Hospital	0.0%	0.0%	0.0%	0.0%	0.1%	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fellowship Hall	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		First Health Moore Rgnl	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Forsyth Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Frye Regional Med Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		High Point Regional Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Highlands-Cashiers Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hugh Chatham Mem Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Iredell Health System	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Johnston Medical Center-Smithfield	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kindred Hosp Greensboro	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lake Norman Reg Med Ctr	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	
		Lexington Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Margaret R. Pardee Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Medical Park Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		MedWest Harris	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mission Health System	0.0%	0.0%	0.4%	0.0%	0.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.1%	
		Murphy Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		NC Specialty Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		New Hanover Regional M.C.	0.0%	0.1%	0.2%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		North Carolina Specialty Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Park Ridge Health	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Person County Mem Hosp	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Pitt County Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Presb Orthopaedic Hosp	1.9%	2.8%	2.5%	1.4%	1.5%	0.0%	0.8%	0.8%	1.3%	1.8%	0.9%	1.0%	1.3%	
		Presbyterian Hospital	1.9%	9.1%	8.2%	4.3%	5.4%	1.6%	1.6%	2.5%	3.7%	1.8%	0.9%	2.7%	4.0%	
		Presbyterian Hospital Huntersville	0.0%	0.4%	0.2%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	
		Presbyterian Hospital Matthews	0.6%	5.6%	0.9%	0.3%	1.1%	0.0%	0.0%	0.1%	0.2%	0.0%	0.0%	0.3%	0.7%	
		Rex Healthcare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rowan Regional Med Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Rutherford Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Scotland Health Care Sys	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Stanly Regional Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		The NC Baptist Hospitals	0.3%	0.4%	0.1%	0.3%	0.1%	0.0%	0.0%	0.2%	0.4%	0.0%	0.0%	0.3%	0.2%	
		Thomasville Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Transylvania Reg Hosp	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		UNC Hospitals	0.3%	0.6%	0.5%	0.2%	0.2%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.1%	0.2%	
		WakeMed	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		WakeMed Cary	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Watauga Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
	NC Total		5.6%	20.2%	15.7%	32.6%	9.1%	4.8%	5.6%	4.1%	6.7%	5.1%	10.8%	9.7%	11.1%	

	SC	Aiken Regional Med. Center	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Allen Bennett Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Bamberg County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Beaufort Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Cannon Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Carolina Pines	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%
		Other	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Chester Regional Medical Center	1.3%	0.0%	0.0%	0.0%	0.1%	0.0%	8.7%	0.4%	0.1%	2.7%	0.0%	0.5%	0.3%	0.0%
		Chesterfield General	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.4%	0.0%	0.0%	0.0%	0.0%
		Coastal Carolina Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Conway Hospital, Inc.	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		East Cooper Regional Med Ctr	0.0%	0.3%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Fairfield Memorial	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Georgetown County Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Grand Strand Regional Med Ctr	0.3%	0.1%	0.1%	0.0%	0.3%	0.6%	0.0%	0.1%	0.2%	0.4%	0.0%	0.0%	0.0%	0.1%
		Greenville Memorial Med. Center	0.0%	0.0%	0.1%	0.1%	0.1%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.1%
		Greer Memorial Hospital	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Hilton Head Med Ctr & Clns	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Kershaw County Medical Ctr	0.0%	0.0%	0.0%	0.1%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Laurens County Healthcare	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Lexington Medical Center	0.0%	0.0%	0.0%	0.0%	0.3%	0.0%	0.0%	0.2%	0.2%	0.0%	0.0%	0.0%	0.0%	0.1%
		Loris Community	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		M. U. S. C. Medical Center	0.3%	0.5%	0.4%	0.2%	0.4%	2.4%	0.0%	0.7%	1.2%	0.4%	2.7%	0.4%	0.7%	0.0%
		Marion County Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mary Black Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%	0.0%	0.0%	0.0%	0.0%	0.8%	0.1%	0.0%	0.0%
		McLeod Medical Center-Dillonn	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Mcleod Regional	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Newberry County Memorial Hospital	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Oconee Memorial	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Baptist (Columbia) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.2%	0.0%	0.0%	0.1%	0.1%	0.1%
		Palmetto Baptist (Easley) Medical Ctr	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Palmetto Richland Memorial	0.6%	0.0%	0.0%	0.6%	0.6%	0.0%	0.8%	0.8%	0.6%	0.4%	0.0%	0.6%	0.8%	0.0%
		Patewood Memorial Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Providence Hospital	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.8%	0.0%	0.1%	0.0%
		Providence Northeast	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Regional Med Ctr, Oburg/Cal Cnty	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Self Memorial Hospital	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Spartanburg Regional Med Ctr	0.0%	0.0%	0.0%	0.2%	0.1%	4.6%	0.0%	0.1%	0.1%	2.7%	8.7%	0.3%	0.3%	0.0%
		Springs Memorial	5.6%	3.1%	0.3%	0.2%	0.6%	0.0%	0.0%	1.1%	0.4%	0.0%	0.0%	0.5%	0.8%	0.0%
		St. Francis-Greenville	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.3%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%
		Trident Medical Center	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Tuomey Regional Medical Center	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Upstate Carolina Medical Center	0.0%	0.0%	0.0%	0.0%	0.0%	7.3%	0.0%	0.0%	0.0%	0.4%	19.5%	0.1%	0.2%	0.0%
		Village Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
		Waccamaw Community Hospital	0.0%	0.0%	0.1%	0.0%	0.1%	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
		Wallace Thomson Hospital	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.8%	0.0%	0.0%	8.7%	0.0%	0.0%	0.2%	0.0%
	SC Total		8.8%	4.4%	1.8%	2.3%	2.8%	16.3%	12.1%	4.2%	3.8%	17.1%	33.8%	3.0%	4.1%	0.0%
Other Total			14.4%	24.6%	17.8%	34.8%	12.1%	21.1%	17.7%	8.3%	10.8%	22.2%	44.2%	12.7%	15.2%	0.0%
PMC	SC	Piedmont Medical Center	54.1%	8.1%	17.3%	28.1%	28.0%	60.2%	64.8%	68.2%	62.8%	61.8%	38.1%	63.0%	50.3%	0.0%
Grand Total			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%

2005, 2009 and 2011 Discharges and Market Share by Product Line
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Discharges by Product Line

	2005					2009					2011				
Product Line	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total
Burn	1		4	11	16	2	1	3		6	2		9		11
Cardiovascular Medicine	285	28	281	1,120	1,669	294	24	285	750	1,353	455	10	251	836	1,552
Cath/EP	167	1	153	1,228	1,549	194	3	111	474	782	279	3	139	542	963
Dental/Oral	5		2	18	25	8		2	5	15	4		2	12	18
Dermatology	37	1	39	121	198	60	4	31	111	206	119	4	35	142	300
Endocrinology Medicine	87	6	76	554	722	108	4	64	317	493	173	6	69	379	627
Endocrinology Surgery	12		9	28	49	24		6	36	66	18	1	5	31	55
ENT Medicine	14	3	17	97	131	50		11	45	106	51		16	88	155
ENT Surgery	12		6	24	42	17		15	16	48	22		10	12	44
Gastrointestinal Medicine	234	21	199	954	1,408	405	24	250	774	1,453	562	15	265	1,114	1,956
General Medicine	2		4	55	61	22		7	45	74	27	1	18	80	126
General Surgery	243	10	176	768	1,197	440	12	267	649	1,368	509	8	217	637	1,371
Gynecology	129	1	84	299	513	78	2	77	257	414	71	1	68	155	295
Hematology	43		37	157	237	82	5	26	133	246	98	3	37	215	353
HIV Infections	3			16	19	6	1	4	16	27	6		2	10	18
Infectious Diseases	80	1	78	264	423	174	12	124	325	635	277	13	107	453	850
Major Trauma	58	2	21	35	116	102	1	16	15	134	105		16	42	163
Miscellaneous-IP	32	2	23	74	131	2				2					
Neonatal	182	2	69	396	649	244		132	538	914	232	6	138	488	866
Nephrology	44	1	28	96	169	86	5	43	159	293	113	3	49	201	366
Neurological Medicine	180	8	110	602	880	278	6	176	386	846	325	13	138	587	1,063
Neurosurgery	109	1	48	65	223	150	1	37	58	246	123	2	40	31	196
Obstetrics - Delivered	629	6	278	1,550	2,463	864	3	457	1,726	3,050	931	11	384	1,579	2,905
Obstetrics - Non Delivered	55	1	43	168	267	74		55	149	278	83		52	140	275
Oncology Medicine	112	1	113	133	359	127	1	73	107	308	168	2	67	147	384
Oncology Surgery	64		25	74	163	61		42	37	140	70	2	28	45	143
Open Heart	57		55	120	242	80		55	130	265	108		55	106	267
Ophthalmology	6	1	5	13	25	7	1	3	5	16	6		5	7	18
Orthopedic Medicine	51	3	52	161	267	73	6	45	64	188	109	3	47	137	296
Orthopedic Surgery	281	7	299	596	1,163	481	12	312	518	1,323	599	21	283	452	1,355
Plastic Surgery	37	2	22	77	138	40	2	13	26	81	47	1	13	20	81
Poisoning/Drug Tox/Comp. of TX	32	3	27	180	242	50	3	41	163	257	62	1	37	178	278
Psychiatry	33	11	185	327	536	66	20	164	395	645	98	21	212	654	983
Pulmonary Medicine	249	25	252	1,398	1,924	413	34	258	1,153	1,858	592	42	243	1,316	2,193
Rehabilitation	122	8	13		143	125		25		150	152	2	18		172
Spinal Fusion Surgery	96	1	85	91	273	110	1	148	79	338	140	1	129	72	342
Substance Abuse	30	14	72	117	233	49	27	17	57	150	43	37	24	98	202
Thoracic Surgery	27		33	58	118	35	1	30	92	158	59	3	28	65	155
Transplant	14		5		19	21		14		35	15		13		28
Urology Medicine	57	4	43	264	368	96	4	57	207	364	138	2	47	287	472
Urology Surgery	62		41	164	267	54		57	162	273	65		67	124	256
Vascular Surgery	37	1	27	152	217	18	3	27	99	147	53	1	30	73	157
Grand Total	3,970	171	3,118	12,895	19,854	5,670	223	3,560	10,278	19,751	7,103	241	3,411	11,555	22,310

2005, 2009 and 2011 Discharges and Market Share by Product Line
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

Market Share by Product Line

	2005					2009					2011				
Product Line	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total
Burn	6 3%	0.0%	25 0%	68.8%	100.0%	33.3%	16.7%	50.0%	0 0%	100.0%	18.2%	0.0%	81.8%	0.0%	100.0%
Cardiovascular Medicine	15.9%	1.4%	15.6%	67.1%	100.0%	21 7%	1 8%	21.1%	55 4%	100.0%	29 3%	0 6%	16.2%	53 9%	100.0%
Cath/EP	10.6%	0.1%	9.9%	79.3%	100.0%	24.8%	0 4%	14.2%	60.6%	100.0%	29.0%	0.3%	14.4%	56.3%	100.0%
Dental/Oral	20.0%	0.0%	8.0%	72.0%	100.0%	53.3%	0.0%	13.3%	33.3%	100.0%	22.2%	0 0%	11.1%	66.7%	100.0%
Dermatology	18.7%	0.5%	19 7%	61.1%	100.0%	28.1%	1.9%	15.0%	53.9%	100.0%	36.7%	1 3%	11.7%	47.3%	100.0%
Endocrinology Medicine	12.0%	0.8%	10 4%	76.7%	100.0%	21.9%	0.8%	13.0%	64.3%	100.0%	27.6%	1 0%	11.0%	60 4%	100.0%
Endocrinology Surgery	24 6%	0.0%	18 4%	57 1%	100.0%	36.4%	0 0%	9 1%	54 5%	100.0%	32.7%	1 8%	9.1%	56 4%	100.0%
ENT Medicine	10.7%	2.3%	13.0%	74.0%	100.0%	47.2%	0.0%	10.4%	42.5%	100.0%	32.9%	0.0%	10.3%	56.8%	100.0%
ENT Surgery	28.6%	0.0%	14.3%	57 1%	100.0%	35 4%	0 0%	31.3%	33.3%	100.0%	50.0%	0 0%	22.7%	27 3%	100.0%
Gastrointestinal Medicine	16 6%	1.5%	14.1%	67.8%	100.0%	27.9%	1.7%	17.2%	53.3%	100.0%	28.7%	0.8%	13.5%	57.0%	100.0%
General Medicine	3.3%	0.0%	6 6%	90.2%	100.0%	29.7%	0 0%	9.5%	60.8%	100.0%	21.4%	0.8%	14.3%	63.5%	100.0%
General Surgery	20.3%	0.8%	14.7%	64.2%	100.0%	32.2%	0 9%	18.5%	47 4%	100.0%	37.1%	0 6%	15.8%	46.5%	100.0%
Gynecology	25 1%	0.2%	16 4%	58.3%	100.0%	18.8%	0.5%	18 6%	62 1%	100.0%	24 1%	0 3%	23.1%	52 5%	100.0%
Hematology	18 1%	0.0%	15 6%	66.2%	100.0%	33.3%	2.0%	10.6%	54 1%	100.0%	27.6%	0.8%	10.5%	60.9%	100.0%
HIV Infections	15.8%	0.0%	0.0%	84.2%	100.0%	22.2%	3.7%	14.8%	59.3%	100.0%	33.3%	0 0%	11.1%	55.6%	100.0%
Infectious Diseases	18 9%	0.2%	18 4%	62 4%	100.0%	27.4%	1 9%	19 5%	51.2%	100.0%	32.6%	1 5%	12.6%	53 3%	100.0%
Major Trauma	50.0%	1.7%	18.1%	30.2%	100.0%	76 1%	0.7%	11.9%	11.2%	100.0%	64.4%	0 0%	9.8%	25 8%	100.0%
Miscellaneous-IP	24 4%	1.6%	17.8%	56.5%	100.0%	100.0%	0.0%	0.0%	0.0%	100.0%					
Neonatal	29.6%	0.3%	13.7%	56.4%	100.0%	26.7%	0.0%	14.4%	58.9%	100.0%	28.6%	0.9%	15.9%	56.4%	100.0%
Nephrology	26.0%	0.6%	16 8%	56 6%	100.0%	28.4%	1.7%	14.7%	54.3%	100.0%	30.9%	0 8%	13.4%	54 9%	100.0%
Neurological Medicine	18.2%	0.9%	12 5%	68 4%	100.0%	32.9%	0.7%	20.8%	45.6%	100.0%	30.6%	1.2%	13.0%	55.2%	100.0%
Neurosurgery	48.9%	0.4%	21.5%	29.1%	100.0%	61.0%	0.4%	16.0%	23.6%	100.0%	62.8%	1.0%	20.4%	15.8%	100.0%
Obstetrics - Delivered	25.5%	0.2%	11.3%	62.9%	100.0%	28.3%	0 1%	15.0%	56.6%	100.0%	32.0%	0 4%	13.2%	54 4%	100.0%
Obstetrics - Non Delivered	20 6%	0.4%	16 1%	62.9%	100.0%	26.6%	0.0%	19.8%	53.6%	100.0%	30.2%	0 0%	18.9%	50.9%	100.0%
Oncology Medicine	31.2%	0.3%	31 5%	37.0%	100.0%	41.2%	0.3%	23.7%	34.7%	100.0%	43.8%	0 5%	17.4%	38 3%	100.0%
Oncology Surgery	38.3%	0.0%	15.3%	45 4%	100.0%	43.6%	0 0%	30.0%	26.4%	100.0%	49 0%	1.4%	18.2%	31.5%	100.0%
Open Heart	27.7%	0 0%	22.7%	49 6%	100.0%	30.2%	0 0%	20.8%	49.1%	100.0%	39.7%	0.0%	20.6%	39.7%	100.0%
Ophthalmology	24 0%	4.0%	20.0%	52.0%	100.0%	43.8%	6.3%	18.8%	31.3%	100.0%	33.3%	0 0%	27.8%	38.9%	100.0%
Orthopedic Medicine	19 1%	1.1%	19.5%	60.3%	100.0%	38 8%	3 2%	23.9%	34.0%	100.0%	36.8%	1 0%	15.9%	46.3%	100.0%
Orthopedic Surgery	22 4%	0.6%	25.7%	51.2%	100.0%	36.4%	0.9%	23.6%	39.2%	100.0%	44.2%	1.5%	20.9%	33.4%	100.0%
Plastic Surgery	26.8%	1.4%	15.8%	55.8%	100.0%	48.4%	2.5%	16.0%	32.1%	100.0%	58.0%	1.2%	16.0%	24.7%	100.0%
Poisoning/Drug Tox/Comp. of TX	13.2%	1.2%	11.2%	74 4%	100.0%	18.5%	1 2%	16.0%	63 4%	100.0%	22 3%	0 4%	13.3%	64.0%	100.0%
Psychiatry	6.2%	2.1%	30.8%	61.0%	100.0%	10.2%	3.1%	25 4%	61.2%	100.0%	9.8%	2 1%	21.6%	66.5%	100.0%
Pulmonary Medicine	12.8%	1.3%	13.1%	72.7%	100.0%	22.2%	1 8%	13 9%	62 1%	100.0%	27 0%	1.9%	11.1%	60.0%	100.0%
Rehabilitation	85 3%	5.6%	9 1%	0.0%	100.0%	83.3%	0.0%	16.7%	0.0%	100.0%	88.4%	1.2%	10.5%	0.0%	100.0%
Spinal Fusion Surgery	35.2%	0.4%	31.1%	33.3%	100.0%	32.5%	0.3%	43.8%	23.4%	100.0%	40.9%	0 3%	37.7%	21 1%	100.0%
Substance Abuse	12.6%	6.0%	30 8%	50.2%	100.0%	32.7%	16.0%	11.3%	38.0%	100.0%	21 3%	18.3%	11.9%	48.5%	100.0%
Thoracic Surgery	22.9%	0.0%	28.0%	49.2%	100.0%	22.2%	0 6%	19.0%	58.2%	100.0%	38.1%	1.9%	18.1%	41.9%	100.0%
Transplant	73 7%	0.0%	26 3%	0.0%	100.0%	60.0%	0.0%	40.0%	0.0%	100.0%	53.6%	0 0%	46.4%	0 0%	100.0%
Urology Medicine	15.5%	1.1%	11.7%	71.7%	100.0%	26.4%	1.1%	15.7%	56.9%	100.0%	28.8%	0 4%	10.0%	60.8%	100.0%
Urology Surgery	23.2%	0.0%	15.4%	61.4%	100.0%	18.8%	0.0%	20.9%	59.3%	100.0%	25.4%	0.0%	26.2%	48.4%	100.0%
Vascular Surgery	17 1%	0.5%	12.4%	70.0%	100.0%	12.2%	2.0%	18.4%	67.3%	100.0%	33 8%	0 8%	19.1%	46.5%	100.0%
Grand Total	20.0%	0.9%	15.7%	63.4%	100.0%	28.7%	1.1%	18.1%	52.0%	100.0%	31.8%	1 1%	15.3%	51.8%	100.0%

2005, 2009 and 2011 Discharges and Market Share by Product Line for CMI >2
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

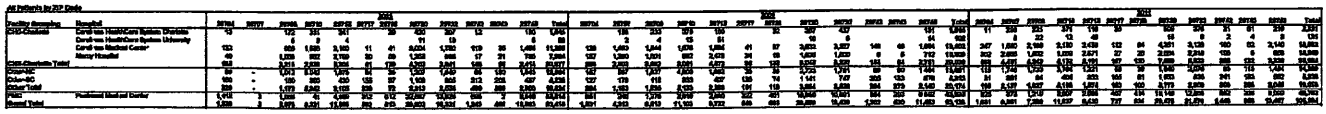
Discharges by Product Line

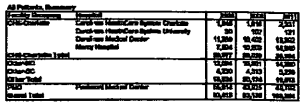
	2005					2009					2011				
PL	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total
Burn			1	1	2		1	2		3			3		3
Cardiovascular Medicine						3		1		4					
Cath/EP	38		22	189	249	68	2	35	125	228	114		53	122	289
Endocrinology Surgery			2	6	8	6		1	7	14	8		1	5	14
ENT Surgery						4		4	2	10	8			4	12
Gastrointestinal Medicine						6	1	2	16	25	7	1	8	23	39
General Surgery	69	2	54	147	272	215	3	111	228	557	248	2	97	241	588
Gynecology	1		1	5	7						1		1	1	3
Hematology	2		9		11	2		2	5	9	4		2	10	16
HIV Infections						3		1	8	12	4		1	4	9
Infectious Diseases						46	1	22	68	137	64	1	18	58	141
Major Trauma	25		5	4	34	48		8	6	62	44		6	7	57
Miscellaneous-IP	25	2	17	71	115										
Neonatal	62		25	72	159	124		64	195	383	125	2	61	180	368
Neurological Medicine				3	3	4		1	3	8	7		1	8	16
Neurosurgery	52	1	22	13	88	107		27	5	139	88	1	26	5	120
Obstetrics - Non Delivered						3			8	11	3			2	5
Oncology Medicine	7		19	4	30	21	1	16	11	49	39	1	11	16	67
Oncology Surgery	14		3	13	30	31		15	12	58	31	2	13	13	59
Open Heart	48		40	66	154	80		55	130	265	108		55	106	267
Orthopedic Medicine						3	4	1	3	11	4	1	1	5	11
Orthopedic Surgery	7	1	12	24	44	292	5	216	289	802	381	11	191	257	840
Plastic Surgery	7		10	27	44	15	2	4	8	29	17		5	5	27
Psychiatry				1	1									2	2
Pulmonary Medicine						44	11	27	133	215	67	19	35	120	241
Spinal Fusion Surgery	61	1	65	59	186	101	1	146	78	328	134	1	126	72	333
Thoracic Surgery	28		32	57	112	30	1	21	78	130	42	2	23	52	119
Transplant	14		5		19	21		8		29	15		12		27
Urology Surgery	16		8	32	56	7		5	15	27	9		6	11	26
Vascular Surgery	12		16	78	106	11	2	15	69	97	29	1	22	55	107
Grand Total	483	7	388	872	1,730	1,293	35	810	1,502	3,640	1,597	45	778	1,384	3,804

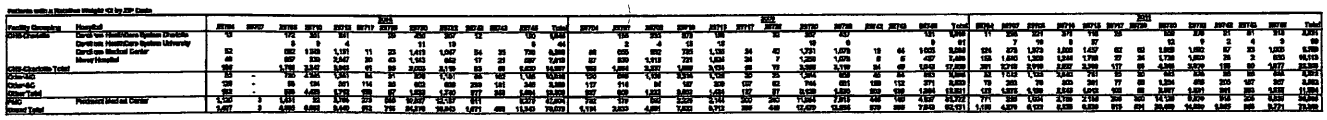
2005, 2009 and 2011 Discharges and Market Share by Product Line for CMI >2
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

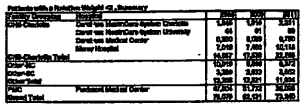
Market Share by Product Line

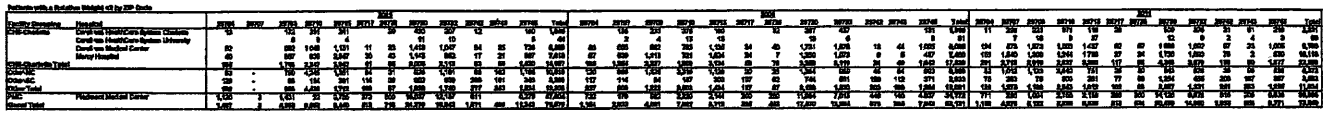
	2005					2009					2011				
Product Line	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total	CHS-Charlotte	CHS-Other	Other	PMC	Total
Burn	0.0%	0.0%	50.0%	50.0%	100.0%	0.0%	33.3%	66.7%	0.0%	100.0%	0.0%	0.0%	100.0%	0.0%	100.0%
Cardiovascular Medicine						75.0%	0.0%	25.0%	0.0%	100.0%					
Cath/EP	15.3%	0.0%	8.8%	75.9%	100.0%	28.9%	0.9%	15.4%	54.8%	100.0%	38.4%	0.0%	16.3%	42.2%	100.0%
Endocrinology Surgery	0.0%	0.0%	25.0%	75.0%	100.0%	42.9%	0.0%	7.1%	50.0%	100.0%	57.1%	0.0%	7.1%	35.7%	100.0%
ENT Surgery						40.0%	0.0%	40.0%	20.0%	100.0%	66.7%	0.0%	0.0%	33.3%	100.0%
Gastrointestinal Medicine						24.0%	4.0%	8.0%	64.0%	100.0%	17.9%	2.6%	20.5%	59.0%	100.0%
General Surgery	25.4%	0.7%	19.9%	54.0%	100.0%	38.6%	0.5%	19.9%	40.9%	100.0%	42.0%	0.3%	16.6%	41.1%	100.0%
Gynecology	14.3%	0.0%	14.3%	71.4%	100.0%						33.3%	0.0%	33.3%	33.3%	100.0%
Hematology	18.2%	0.0%	81.8%	0.0%	100.0%	22.2%	0.0%	22.2%	55.6%	100.0%	25.0%	0.0%	12.5%	62.5%	100.0%
HIV Infections						25.0%	0.0%	8.3%	66.7%	100.0%	44.4%	0.0%	11.1%	44.4%	100.0%
Infectious Diseases						33.6%	0.7%	16.1%	49.6%	100.0%	45.4%	0.7%	12.8%	41.1%	100.0%
Major Trauma	73.5%	0.0%	14.7%	11.8%	100.0%	77.4%	0.0%	12.9%	9.7%	100.0%	77.2%	0.0%	10.5%	12.3%	100.0%
Miscellaneous-IP	21.7%	1.7%	14.8%	61.7%	100.0%										
Neonatal	39.0%	0.0%	15.7%	45.3%	100.0%	32.4%	0.0%	16.7%	50.9%	100.0%	34.0%	0.5%	16.6%	48.9%	100.0%
Neurological Medicine	0.0%	0.0%	0.0%	100.0%	100.0%	50.0%	0.0%	12.5%	37.5%	100.0%	43.8%	0.0%	6.3%	50.0%	100.0%
Neurosurgery	59.1%	1.1%	25.0%	14.8%	100.0%	77.0%	0.0%	19.4%	3.6%	100.0%	73.3%	0.8%	21.7%	4.2%	100.0%
Obstetrics - Non Delivered						27.3%	0.0%	0.0%	72.7%	100.0%	60.0%	0.0%	0.0%	40.0%	100.0%
Oncology Medicine	23.3%	0.0%	63.3%	13.3%	100.0%	42.9%	2.0%	32.7%	22.4%	100.0%					
Oncology Surgery	46.7%	0.0%	10.0%	43.3%	100.0%	53.4%	0.0%	25.9%	20.7%	100.0%	52.5%	3.4%	22.0%	22.0%	100.0%
Open Heart	31.2%	0.0%	26.0%	42.9%	100.0%	30.2%	0.0%	20.8%	49.1%	100.0%	39.7%	0.0%	20.6%	39.7%	100.0%
Orthopedic Medicine						27.3%	36.4%	9.1%	27.3%	100.0%	36.4%	9.1%	9.1%	45.5%	100.0%
Orthopedic Surgery	15.9%	2.3%	27.3%	54.5%	100.0%	36.4%	0.8%	28.9%	36.0%	100.0%	45.4%	1.3%	22.7%	30.6%	100.0%
Plastic Surgery	15.9%	0.0%	22.7%	61.4%	100.0%	51.7%	6.9%	13.8%	27.6%	100.0%	63.0%	0.0%	18.5%	18.5%	100.0%
Psychiatry	0.0%	0.0%	0.0%	100.0%	100.0%						0.0%	0.0%	0.0%	100.0%	100.0%
Pulmonary Medicine						20.5%	5.1%	12.8%	61.5%	100.0%	27.8%	7.9%	14.5%	49.8%	100.0%
Spinal Fusion Surgery	32.8%	0.5%	34.9%	31.7%	100.0%	31.0%	0.3%	44.8%	23.9%	100.0%	40.2%	0.3%	37.8%	21.6%	100.0%
Thoracic Surgery	20.5%	0.0%	28.8%	50.9%	100.0%	23.1%	0.8%	16.2%	60.0%	100.0%	35.3%	1.7%	19.3%	43.7%	100.0%
Transplant	73.7%	0.0%	26.3%	0.0%	100.0%	72.4%	0.0%	27.6%	0.0%	100.0%	55.6%	0.0%	44.4%	0.0%	100.0%
Urology Surgery	28.6%	0.0%	14.3%	57.1%	100.0%	25.9%	0.0%	18.5%	55.6%	100.0%	34.6%	0.0%	23.1%	42.3%	100.0%
Vascular Surgery	11.3%	0.0%	15.1%	73.6%	100.0%	11.3%	2.1%	15.5%	71.1%	100.0%	27.1%	0.9%	20.6%	51.4%	100.0%
Grand Total	27.9%	0.4%	21.3%	50.4%	100.0%	35.5%	1.0%	22.3%	41.3%	100.0%	42.0%	1.2%	20.5%	36.4%	100.0%

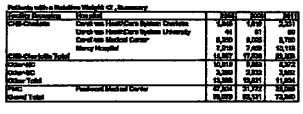


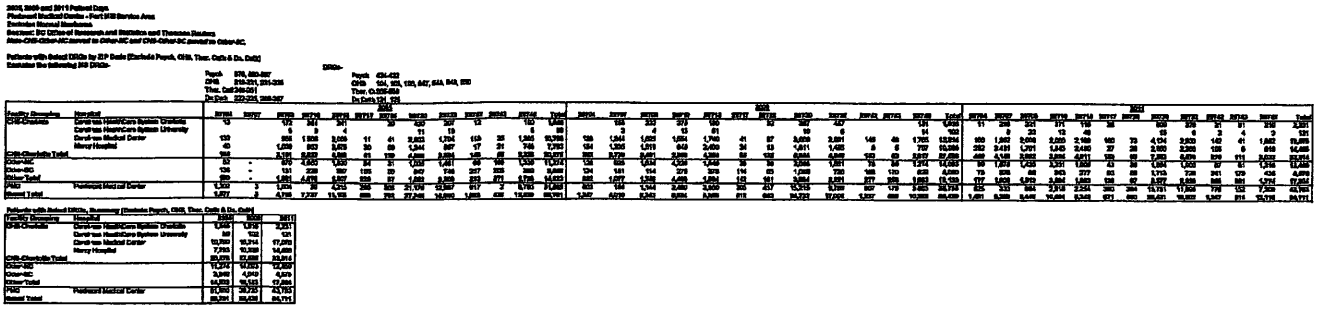












2005, 2009 and 2011 Discharges, Patient Days and ALOS for Patients from the Fort Mill Service Area that went to CHS-Charlotte Facilities
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

All Patients

	Discharges			Patient Days			ALOS		
CHS-Charlotte Facility	**2005**	**2009**	**2011**	**2005**	**2009**	**2011**	**2005**	**2009**	**2011**
Carolinas HealthCare System Charlotte	93	119	144	1,645	1,916	2,231	17.7	16.1	15.5
Carolinas HealthCare System University	16	25	45	50	102	121	3.1	4.1	2.7
Carolinas Medical Center	1,888	2,881	3,240	11,288	16,402	18,692	6.0	5.7	5.8
Mercy Hospital	1,973	2,645	3,674	7,994	10,609	14,940	4 1	4.0	4 1
Total	**3,970**	**5,670**	**7,103**	**20,977**	**29,029**	**35,984**	**5.3**	**5.1**	**5.1**

Patients with a Relative Weight <2

	Discharges			Patient Days			ALOS		
CHS-Charlotte Facility	**2005**	**2009**	**2011**	**2005**	**2009**	**2011**	**2005**	**2009**	**2011**
Carolinas HealthCare System Charlotte	93	119	144	1,645	1,916	2,231	17.7	16.1	15.5
Carolinas HealthCare System University	15	22	37	44	61	99	2.9	2.8	2 7
Carolinas Medical Center	1,505	2,078	2,422	6,260	8,095	9,760	4.2	3.9	4.0
Mercy Hospital	1,874	2,158	2,902	7,018	7,466	10,118	3.7	3.5	3.5
Total	**3,487**	**4,377**	**5,505**	**14,967**	**17,538**	**22,208**	**4.3**	**4.0**	**4.0**

2005, 2009 and 2011 Discharges and Market Share for CHS-Charlotte Facilities by ZIP Code
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

	2005											
CHS-Charlotte Facility	29704	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare System Charlotte	1	11	17	14		2	18	13	2		15	93
Carolinas HealthCare System University		1	2	2			5	4			2	16
Carolinas Medical Center	26	235	299	363	3	9	375	347	13	3	215	1,888
Mercy Hospital	13	289	219	657	3	11	338	270	7	2	164	1,973
Total	40	536	537	1,036	6	22	736	634	22	5	396	3,970

	2005											
CHS-Charlotte Facility	29704	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare System Charlotte	2.5%	2.1%	3.2%	1.4%	0.0%	9.1%	2.4%	2.1%	9.1%	0.0%	3.8%	2.3%
Carolinas HealthCare System University	0.0%	0.2%	0.4%	0.2%	0.0%	0.0%	0.7%	0.6%	0.0%	0.0%	0.5%	0.4%
Carolinas Medical Center	65.0%	43.8%	55.7%	35.0%	50.0%	40.9%	51.0%	54.7%	59.1%	60.0%	54.3%	47.6%
Mercy Hospital	32.5%	53.9%	40.8%	63.4%	50.0%	50.0%	45.9%	42.6%	31.8%	40.0%	41.4%	49.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

CHS-Charlotte Facility	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare System Charlotte		12	12	26	13		1	23	24			8	119
Carolinas HealthCare System University		1	2	6	7			4	2			3	25
Carolinas Medical Center	30	248	351	342	383	10	19	585	564	17	10	322	2,881
Mercy Hospital	39	309	401	256	601	6	6	428	408	4	2	185	2,645
Total	69	570	766	630	1,004	16	26	1,040	998	21	12	518	5,570

CHS-Charlotte Facility	2009 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare System Charlotte	0.0%	2.1%	1.6%	4.1%	1.3%	0.0%	3.8%	2.2%	2.4%	0.0%	0.0%	1.5%	2.1%
Carolinas HealthCare System University	0.0%	0.2%	0.3%	1.0%	0.7%	0.0%	0.0%	0.4%	0.2%	0.0%	0.0%	0.6%	0.4%
Carolinas Medical Center	43.5%	43.5%	45.8%	54.3%	38.1%	62.5%	73.1%	56.3%	56.5%	81.0%	83.3%	62.2%	50.8%
Mercy Hospital	56.5%	54.2%	52.3%	40.6%	59.9%	37.5%	23.1%	41.2%	40.9%	19.0%	16.7%	35.7%	46.6%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

	2011												
CHS-Charlotte Facility	29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare System Charlotte	1	21	18	23	10	2		23	25	1	4	18	144
Carolinas HealthCare System University		3	8	4	17			5	5	1	1	1	45
Carolinas Medical Center	57	302	427	397	480	17	19	591	563	26	9	352	3,240
Mercy Hospital	59	543	506	408	621	7	6	606	627	18	3	270	3,674
Total	117	869	959	832	1,128	26	25	1,225	1,220	46	17	639	7,103

	2011												
CHS-Charlotte Facility	29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare System Charlotte	0.9%	2.4%	1.9%	2.8%	0.9%	7.7%	0.0%	1.9%	2.0%	2.2%	23.5%	2.5%	2.0%
Carolinas HealthCare System University	0.0%	0.3%	0.8%	0.5%	1.5%	0.0%	0.0%	0.4%	0.4%	2.2%	5.9%	0.2%	0.6%
Carolinas Medical Center	48.7%	34.8%	44.5%	47.7%	42.6%	65.4%	76.0%	48.2%	46.1%	56.5%	52.9%	55.1%	45.6%
Mercy Hospital	50.4%	62.5%	52.8%	49.0%	55.1%	26.9%	24.0%	49.5%	51.4%	39.1%	17.6%	42.3%	51.7%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

2005, 2009 and 2011 Discharges by Payor and ZIP Code
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thomson Reuters

CHS Detail or Other	Payor Group	2005 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	Managed/Commercial	14		331	206	439	2	4	332	333	7	2	181	1,851
	Medicaid	2		4	25	64		2	93	39	1	1	35	266
	Medicare	16		139	233	370	2	11	193	181	9	2	111	1,267
	Other	4		62	47	87	2	2	69	55	5		35	368
	Self Pay/Charity	4		10	26	66		3	48	26			34	218
CHS-Charlotte Total		40		536	537	1,036	6	22	736	634	22	5	396	3,970
CHS-Other	Managed/Commercial	1		3	20	8			8	4	3		10	57
	Medicaid				7	2			1	2			2	14
	Medicare				31	12	2		4	4	1	2	6	62
	Other			1	12	1			1	3			2	20
	Self Pay/Charity			1	14				1			1	1	18
CHS-Other Total		1		5	84	23	2		15	13	4	3	21	171
Other	Managed/Commercial	14		173	427	226	12	9	148	230	21	12	161	1,433
	Medicaid	11		2	117	40	2	6	69	29	7	16	42	341
	Medicare	13		32	427	126	23	6	145	122	24	31	132	1,081
	Other	3		6	19	14		1	22	19	1	3	13	103
	Self Pay/Charity	2		8	40	17	2	4	35	23	5	5	19	160
Other Total		43		223	1,030	423	39	26	419	423	58	67	367	3,118
PMC	Managed/Commercial	119		185	4	335	42	62	1,711	1,405	78	1	840	4,782
	Medicaid	49		21	5	172	18	23	851	393	35		353	1,860
	Medicare	141		144		448	19	57	2,105	1,472	78		920	5,382
	Other	2	1	4	1	6		1	42	42	2		21	122
	Self Pay/Charity	12		19	1	32	3	4	185	106	6		81	449
PMC Total		323	1	373	11	991	82	147	4,894	3,358	199	1	2,215	12,595
Grand Total		407	1	1,137	1,662	2,473	129	195	6,064	4,428	283	76	2,999	19,854

CHS Charlotte Detail

Hospital	Payor Group	2005 29704		29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare Syst	Managed/Commercial			4	3	2			7	8			6	30
	Medicaid				2				3				1	6
	Medicare	1		7	9	9		2	7	4	1		6	46
	Other				2				1		1		1	5
	Self Pay/Charity				1	3				1			1	6
Carolinas HealthCare System Charlotte Total		1		11	17	14		2	18	13	2		15	93
Carolinas HealthCare Syst	Managed/Commercial								1	3			2	6
	Medicaid													
	Medicare			1					1					2
	Other				1	1			1	1				4
	Self Pay/Charity				1	1			2					4
Carolinas HealthCare System University Total				1	2	2			5	4			2	16
Carolinas Medical Center	Managed/Commercial	9		145	116	177	1	1	147	175	5	1	84	861
	Medicaid	2		2	18	33		1	72	32		1	32	193
	Medicare	9		58	126	102		4	111	95	6	1	58	571
	Other	3		24	22	32	2	2	19	26	2		16	148
	Self Pay/Charity	3		5	17	19		1	26	19			25	115
Carolinas Medical Center Total		26		235	299	383	3	9	375	347	13	3	215	1,888
Mercy Hospital	Managed/Commercial	5		182	87	280	1	3	177	147	2	1	89	954
	Medicaid			2	5	31		1	18	7	1		2	67
	Medicare	6		72	98	259	2	5	74	82	2	1	47	648
	Other	1		29	22	64			48	28	2		16	211
	Self Pay/Charity	1		5	7	43		2	21	6			6	93
Mercy Hospital Total		13		289	219	657	3	11	338	270	7	2	164	1,973
Grand Total		40	-	536	537	1,036	6	22	736	634	22	5	396	3,970

2005, 2009 and 2011 Discharges by Payor and ZIP Code
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thon

CHS Detail or Other	Payor Group	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	Managed/Commercial	27	291	495	284	480	10	8	442	554	8	5	251	2,855
	Medicaid	8	14	27	41	80	3	4	197	105	2	2	83	566
	Medicare	27	235	209	252	345	2	7	279	242	7	4	132	1,741
	Other	6	9	8	13	27		2	38	32	2		15	152
	Self Pay/Charity	1	21	27	40	72	1	5	84	65	2	1	37	356
CHS-Charlotte Total		69	570	766	630	1,004	16	26	1,040	998	21	12	518	5,670
CHS-Other	Managed/Commercial	4	5	5	15	14	1	1	8	8	1	2	12	76
	Medicaid				5	3				1		1	1	11
	Medicare		10	6	31	10			15	14		2	14	102
	Other								1	1			1	3
	Self Pay/Charity	1	1		24				1	2			2	31
CHS-Other Total		5	16	11	75	27	1	1	25	26	1	5	30	223
Other	Managed/Commercial	21	140	256	463	221	16	10	207	190	35	22	194	1,775
	Medicaid	6	12	14	58	39	1	3	69	24	8	9	27	270
	Medicare	24	102	106	403	116	17	14	145	128	31	30	134	1,252
	Other	1	2	6	21	3			8	20	1	1	13	76
	Self Pay/Charity	3	8	5	78	13	7	4	38	19	1	5	26	207
Other Total		55	264	387	1,023	394	41	31	467	381	76	67	394	3,580
PMC	Managed/Commercial	85	34	168	243	235	27	29	1,238	950	54	28	571	3,662
	Medicaid	19	22	22	164	115	8	21	841	333	22	14	285	1,664
	Medicare	94	15	113	243	278	29	51	1,277	1,077	58	13	606	3,849
	Other	2		4	12	10	1		41	48	1		24	143
	Self Pay/Charity	17	8	35	67	56	8	6	424	152	12	8	169	960
PMC Total		217	79	342	729	692	68	107	3,821	2,560	147	61	1,655	10,278
Grand Total		346	929	1,506	2,457	2,117	126	165	5,153	3,965	245	145	2,597	19,751

CHS Charlotte Detail

Hospital	Payor Group	29704	29707	29708	29710	29715	29717	2009 29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare Syst	Managed/Commercial		3	6	7	5			9	6			3	39
	Medicaid			2										2
	Medicare		9	4	18	8			14	12			5	70
	Other				1			1		4				6
	Self Pay/Charity			1						2				3
Carolinas HealthCare System Charlotte Total			12	12	26	13		1	23	24			8	119
Carolinas HealthCare Syst	Managed/Commercial			2	4	3			1	2			3	15
	Medicaid					2								2
	Medicare				2	1			2					5
	Other													
	Self Pay/Charity		1			1			1					3
Carolinas HealthCare System University Total			1	2	6	7			4	2			3	25
Carolinas Medical Center	Managed/Commercial	9	132	259	135	204	5	4	223	274	6	3	136	1,390
	Medicaid	4	9	13	29	52	2	4	143	81	2	2	73	414
	Medicare	12	67	70	141	66	2	6	133	141	7	4	76	785
	Other	5	2	3	10	11			28	26	2		11	98
	Self Pay/Charity		8	6	27	20	1	5	58	42		1	26	194
Carolinas Medical Center Total		30	248	351	342	353	10	19	585	564	17	10	322	2,881
Mercy Hospital	Managed/Commercial	18	156	228	136	268	5	4	209	272	2	2	109	1,412
	Medicaid	4	5	12	12	28	1		54	24			10	148
	Medicare	15	129	135	91	240		1	130	89			51	881
	Other	1	7	5	2	16		1	10	2			4	48
	Self Pay/Charity	1	12	20	13	51			25	21	2		11	156
Mercy Hospital Total		39	309	401	256	601	6	6	428	408	4	2	185	2,645
Grand Total		69	570	766	630	1,004	16	26	1,040	998	21	12	518	5,670

2005, 2009 and 2011 Discharges by Payor and ZIP Code
Piedmont Medical Center - Fort Mill Service Area
Excludes Normal Newborns
Sources: SC Office of Research and Statistics and Thon

CHS Detail or Other	Payor Group	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
CHS-Charlotte	Managed/Commercial	53	309	523	340	480	14	12	497	569	22	4	258	3,089
	Medicaid	11	61	39	91	98	4	3	231	132	8	2	113	781
	Medicare	40	455	344	315	448	8	7	390	424	9	10	191	2,641
	Other	2	16	22	17	33			16	36	1		20	168
	Self Pay/Charity	11	38	31	69	61		3	88	59	6	1	59	426
CHS-Charlotte Total		**117**	**869**	**959**	**832**	**1,128**	**26**	**25**	**1,225**	**1,220**	**46**	**17**	**639**	**7,103**
CHS-Other	Managed/Commercial	1	7	11	25	11			5	12			13	85
	Medicaid				12	2			1	3		1	3	22
	Medicare	1	19	3	16	13	1		16	11	1	4	20	105
	Other				1			1			1			3
	Self Pay/Charity		2	1	13	2				1	1		6	26
CHS-Other Total		**2**	**28**	**15**	**67**	**28**	**1**	**1**	**22**	**27**	**3**	**5**	**42**	**241**
Other	Managed/Commercial	21	172	226	349	132	18	4	205	198	25	22	167	1,539
	Medicaid	3	20	9	52	29	5	12	106	55		12	40	343
	Medicare	19	147	75	397	95	7	6	125	161	35	19	119	1,205
	Other	1	11	9	29	5	1		10	16			10	92
	Self Pay/Charity	9	9	11	67	11		4	46	27	1	11	36	232
Other Total		**53**	**369**	**330**	**894**	**272**	**31**	**25**	**492**	**457**	**61**	**64**	**372**	**3,411**
PMC	Managed/Commercial	77	30	136	291	165	29	35	1,302	825	56	18	685	3,659
	Medicaid	26	27	28	158	98	18	17	824	499	26	7	389	2,091
	Medicare	88	37	100	294	245	45	40	1,415	1,326	89	27	759	4,465
	Other	2	3	4	10	6	1	1	27	33	1	2	17	107
	Self Pay/Charity	29	11	25	97	75	5	11	526	244	22	13	175	1,238
PMC Total		**222**	**108**	**291**	**850**	**617**	**98**	**104**	**4,094**	**3,027**	**194**	**67**	**1,885**	**11,555**
Grand Total		**394**	**1,364**	**1,595**	**2,643**	**2,045**	**154**	**156**	**5,833**	**4,731**	**304**	**153**	**2,938**	**22,310**

CHS Charlotte Detail

Hospital	Payor Group	2011 29704	29707	29708	29710	29715	29717	29726	29730	29732	29742	29743	29745	Total
Carolinas HealthCare Syst	Managed/Commercial	1	4	4	6	2			13	7		1	4	42
	Medicaid													
	Medicare		17	13	17	8	2		9	17		3	11	97
	Other			1						1			1	3
	Self Pay/Charity								1		1			2
Carolinas HealthCare System Charlotte Total		**1**	**21**	**18**	**23**	**10**	**2**		**23**	**25**	**1**	**4**	**16**	**144**
Carolinas HealthCare Syst	Managed/Commercial			6	1	9			3	4				23
	Medicaid												1	1
	Medicare		2	2	3	8			2	1	1	1		20
	Other													
	Self Pay/Charity		1											1
Carolinas HealthCare System University Total			**3**	**8**	**4**	**17**			**5**	**5**	**1**	**1**	**1**	**45**
Carolinas Medical Center	Managed/Commercial	30	120	267	142	231	9	9	208	245	8	2	134	1,405
	Medicaid	10	28	15	85	59	3	3	153	81	6	2	80	515
	Medicare	14	136	113	142	144	5	4	181	186	6	4	94	1,009
	Other	1	6	13	11	19			16	22	1		10	99
	Self Pay/Charity	2	12	19	37	27		3	43	29	5	1	34	212
Carolinas Medical Center Total		**57**	**302**	**427**	**397**	**480**	**17**	**19**	**581**	**563**	**26**	**9**	**352**	**3,240**
Mercy Hospital	Managed/Commercial	22	185	248	191	248	5	3	273	313	14	1	118	1,619
	Medicaid	1	23	24	26	37	1		68	51	2		32	285
	Medicare	26	300	216	153	288	1	3	216	220	2	2	86	1,515
	Other	1	10	8	6	14			3	13			9	64
	Self Pay/Charity	9	25	12	32	34			44	30			25	211
Mercy Hospital Total		**59**	**543**	**506**	**408**	**621**	**7**	**6**	**606**	**627**	**18**	**3**	**270**	**3,674**
Grand Total		**117**	**869**	**959**	**832**	**1,128**	**25**	**25**	**1,225**	**1,220**	**46**	**17**	**639**	**7,103**

2010 Number and Percent of Persons Hospitalized Outside Their County of Residence By County Where Service Occurred, Excluding Newborns South Carolina Hospital Discharge Data System

**** Includes Inpatient Discharges From All Non-federal Acute Care Hospitals and Hospitals In Georgia and North Carolina ****

For Residents of Aiken County

County Residents Served			Number and Percent of Residents Served Outside of Their County of Residence, By County Where Service Occurred					
Number Served		Pct. OOC	County	No.	Pct.	County	No.	Pct.
In County	Out							
TOTAL								
7,989	16,984	68%	Anderson	1	0%	Bamberg	3	0%
			Beaufort	7	0%	Charleston	127	0.50%
			Chester	1	0%	Clarendon	1	0%
			Colleton	4	0%	Darlington	1	0%
			Edgefield	22	0.10%	Florence	4	0%
			Georgetown	2	0%	Greenville	20	0.10%
			Greenwood	16	0.10%	Horry	2	0%
			Lancaster	1	0%	Laurens	1	0%
			Lexington	275	1.10%	Newberry	3	0%
			Orangeburg	52	0.20%	Pickens	1	0%
			Richland	320	1.30%	Spartanburg	8	0%
			Sumter	1	0%	York	2	0%
			Georgia	16,050	64.30%	N.Carolina	59	0.20%

Petitioner's Trial Exhibit 015

Source: South Carolina Office of Research and Statistics

PET-EX015.0001

2010 Number and Percent of Persons Hospitalized Outside Their County of Residence By County Where Service Occurred, Excluding Newborns South Carolina Hospital Discharge Data System

**** Includes Inpatient Discharges From All Non-federal Acute Care Hospitals and Hospitals In Georgia and North Carolina ****

For Residents of Anderson County

County Residents Served			Number and Percent of Residents Served Outside of Their County of Residence, By County Where Service Occurred					
Number Served		Pct. OOC	County	No.	Pct.	County	No.	Pct.
In County	Out							
TOTAL								
16,622	5,220	23.90%	Abbeville	46	0.20%	Aiken	45	0.20%
			Allendale	1	0%	Beaufort	2	0%
			Charleston	211	1%	Cherokee	1	0%
			Florence	7	0%	Georgetown	8	0%
			Greenville	3,807	17.40%	Greenwood	234	1.10%
			Horry	15	0.10%	Laurens	9	0%
			Lexington	6	0%	Oconee	202	0.90%
			Pickens	177	0.80%	Richland	34	0.20%
			Spartanburg	48	0.20%	Sumter	2	0%
			Union	1	0%	York	4	0%
			Georgia	285	1.30%	N.Carolina	75	0.30%

Source: South Carolina Office of Research and Statistics

2010 Number and Percent of Persons Hospitalized Outside Their County of Residence By County Where Service Occurred, Excluding Newborns South Carolina Hospital Discharge Data System

**** Includes Inpatient Discharges From All Non-federal Acute Care Hospitals and Hospitals In Georgia and North Carolina ****

For Residents of Lexington County

County Residents Served			Number and Percent of Residents Served Outside of Their County of Residence, By County Where Service Occurred					
Number Served		Pct. OOC	County	No.	Pct.	County	No.	Pct.
In County	Out							
TOTAL								
12,643	11,279	47.10%	Aiken	126	0.50%	Allendale	2	0%
			Anderson	4	0%	Bamberg	3	0%
			Beaufort	14	0.10%	Charleston	414	1.70%
			Chesterfield	1	0%	Clarendon	3	0%
			Colleton	4	0%	Darlington	3	0%
			Dillon	1	0%	Edgefield	5	0%
			Florence	22	0.10%	Georgetown	11	0%
			Greenville	40	0.20%	Greenwood	34	0.10%
			Hampton	1	0%	Horry	23	0.10%
			Kershaw	8	0%	Lancaster	5	0%
			Laurens	1	0%	Newberry	29	0.10%
			Oconee	2	0%	Orangeburg	103	0.40%
			Pickens	1	0%	Richland	9,867	41.20%
			Spartanburg	10	0%	Sumter	6	0%
			York	5	0%	Georgia	354	1.50%
			N.Carolina	177	0.70%			

Source: South Carolina Office of Research and Statistics

PET-EX015.0003

2010 Number and Percent of Persons Hospitalized Outside Their County of Residence By County Where Service Occurred, Excluding Newborns South Carolina Hospital Discharge Data System

**** Includes Inpatient Discharges From All Non-federal Acute Care Hospitals and Hospitals In Georgia and North Carolina ****

For Residents of York County

County Residents Served			Number and Percent of Residents Served Outside of Their County of Residence, By County Where Service Occurred					
Number Served		Pct. OOC	County	No.	Pct.	County	No.	Pct.
In County	Out							
TOTAL								
10,423	8,954	46.20%	Abbeville	1	0%	Aiken	6	0%
			Anderson	2	0%	Bamberg	2	0%
			Beaufort	1	0%	Charleston	115	0.60%
			Cherokee	24	0.10%	Chester	55	0.30%
			Chesterfield	1	0%	Fairfield	1	0%
			Florence	9	0%	Georgetown	6	0%
			Greenville	25	0.10%	Greenwood	3	0%
			Horry	21	0.10%	Kershaw	3	0%
			Lancaster	183	0.90%	Lexington	23	0.10%
			Marion	1	0%	Oconee	2	0%
			Orangeburg	1	0%	Pickens	1	0%
			Richland	180	0.90%	Spartanburg	66	0.30%
			Sumter	3	0%	Union	30	0.20%
			Georgia	54	0.30%	N.Carolina	8,135	42%

Source: South Carolina Office of Research and Statistics

AGREEMENT

dated as of

December 8th, 1980

among

AMERICAN MEDICAL INTERNATIONAL, INC.,

AMISUB OF SOUTH CAROLINA, INC.,

TRUSTEES OF YORK GENERAL HOSPITAL

AND

YORK COUNTY, SOUTH CAROLINA

Petitioner's Trial Exhibit 016

TABLE OF CONTENTS

		Page
AGREEMENT		1
WITNESSETH:		1
Section 1.	Lease of Hospital Building, Fixtures and Land	2
Section 2.	Replacement Hospital	3
Section 3.	Operation of Existing Hospital and Construction and Operation of the Replacement Hospital	5
	3.1 Hospital Services	5
	3.2 Ambulance Service	5
	3.3 Emergency Room Service	7
	3.4 Hospital Advisory Board	7
	3.5 Annual Report to the York County Council	8
	3.6 AMI Scholarship Program	8
	3.7 Continuing Education	9
	3.8 Physician Recruitment	10
	3.9 Medical Staff	10
Section 4.	Indigent Care	10
Section 5.	Purchase of Assets and Assumption of Liabilities	14
	5.1 Transfer of Assets	14
	5.2 Assets Excluded from Purchase	15
	5.3 Assumption of Liabilities	15
	(a) Liabilities	15
	(b) Excluded Liabilities	17
	(c) Proration	19
	5.4 Purchase Price	19
Section 6.	Actions to be Taken by AMI, York County and the Trustees	22
	6.1 Action by AMI	23
	6.2 Action by York County and the Trustees	24
Section 7.	Instruments of Transfer	24
	7.1 Transfer of Assets	24
	7.2 Assumption of Obligations	24
	7.3 Further Assurances	25
Section 8.	Representations and Warranties of the Sellers	25
	8.1 Due Organization	25
	8.2 County Council	25
	8.3 Approval of Agreement	25
	8.4 Board of Trustees	26
	8.5 Approval of Sale	26

PET-EX016.0002

RECORD 004450

			Page
	8.6	Accuracy of Financial Statements	26
	8.7	Properties of the Hospital	28
	8.8	Taxes and Tax Returns	30
	8.9	Inventory	31
	8.10	Post Date Occurrences	31
	8.11	Major Contracts	32
	8.12	Litigation; Claims	35
	8.13	Compliance with Law	35
	8.14	Brokers' and Finders' Fee	36
	8.15	Material Misstatements or Omissions	36
	8.16	Medicare Cost Reports	36
	8.17	Employee Benefit Plans	36
	8.18	Quiet Enjoyment	37
Section 9.		Representations and Warranties of AMI and AMI Parent	37
	9.1	Due Organization	38
	9.2	Board of Directors	38
	9.3	Approval of Purchase	38
	9.4	Brokers' or Finders' Fees	38
Section 10.		Conduct of Business Prior to Closing Date	38
	10.1	Access to Business	38
	10.2	Conduct of Business in Ordinary Course	39
Section 11.		Effectiveness of Agreement; Closing Date; and Conditions to Closing	40
	11.1	Effectiveness of Agreement	40
	11.2	Closing Date	41
	11.3	Maximum Time Period	41
	11.4	Condition to Obligations of the Sellers	42
		(a) Representations and Warranties of AMI and AMI Parent to be True	42
	11.5	Conditions to Obligation of AMI	42
		(a) Representations and Warranties of the Sellers to be True	43
		(b) Opinion of Counsel of York County	43
		(c) No Material Adverse Change	44
		(d) State Hospital License	45
		(e) Other Governmental Approvals	45
		(f) Approval of New Hospital Construction	45
		(g) Medicare/Medicaid	46
		(h) Blue Cross/Blue Shield	46
		(i) Title Insurance for Hospital	46
		(j) Title Insurance for Replacement Hospital	46
		(k) Appropriate Zoning	47
Section 12.		Claims	47
	12.1	Claims Against AMI and AMI Parent	47
	12.2	Claims Against York County and the Trustees	48

			Page
	12.3	Notice	48
	12.4	False Representation	48
Section 13.		Right of Set-off	49
Section 14.		Option to Purchase	49
	14.1	Grant of Option	49
	14.2	Term of Option	49
	14.3	Exercise Price	49
	14.4	Manner of Exercise	51
	14.5	Nontransferability	52
Section 15.		Employment	52
	15.1	Retention of Employees	52
	15.2	Transfer of Hospital Service	52
	15.3	Retained Sick Leave and Vacation Time	53
	15.4	AMI Benefits	54
	15.5	Eligibility for Participation in AMI Benefit Plans	54
	15.6	Availability of Certain Group Disability and Life Insurance Plans	56
Section 16.		Miscellaneous	58
	16.1	Binding Effect	58
	16.2	Governing Law	58
	16.3	Headings	58
	16.4	Notices	58
	16.5	Survival of Representations	59
	16.6	Limitation of Sellers' Warranties	59
	16.7	Guaranty by AMI Parent	60
	16.8	Taxes	60
	16.9	Exhibits	60
	16.10	Expenses	61
	16.11	Counterparts	61
	16.12	Laws	61
	16.13	Severability	61
	16.14	Cumulative Rights and Remedies	61
	16.15	Third Party Beneficiaries	62
	16.16	Prohibition Against Assignment	62
	16.17	Entire Agreement	62

PET-EX016.0004

RECORD 004452

AGREEMENT

THIS AGREEMENT, made and entered into this ____ day of December, 1980, by and among AMERICAN MEDICAL INTERNATIONAL, INC., a corporation organized and existing under the laws of the State of Delaware (herein referred to as "AMI Parent"), AMISUB OF SOUTH CAROLINA, INC., a corporation organized and existing under the laws of the State of South Carolina (hereinafter referred to as "AMI"), THE TRUSTEES OF YORK GENERAL HOSPITAL (hereinafter referred to as the "Trustees"), and YORK COUNTY, SOUTH CAROLINA, a political subdivision of the State of South Carolina (hereinafter referred to as "York County").

W I T N E S S E T H:

WHEREAS, "York General Hospital" is the name of a hospital (said institution being hereinafter referred to as the "Hospital") located in York County, South Carolina; and

WHEREAS, the Trustees presently hold title to the real and personal property of the Hospital for the benefit of York County, and operate the Hospital; and

WHEREAS, York County and the Trustees (hereinafter collectively referred to as the "Sellers") desire that AMI take over the operation of the Hospital and to that end that AMI lease the Hospital building and certain land on which the Hospital is located from Sellers and purchase certain assets owned by the Sellers and assume certain liabilities of the Sellers in

connection therewith, pending the completion and licensing of a new hospital to be located in York County, and to be constructed, owned and operated by AMI (hereinafter referred to as the "Replacement Hospital"); and

WHEREAS, subject to the terms and conditions set forth herein, AMI is willing to take over the operation of the Hospital and to lease the Hospital building and certain land on which the Hospital is located from the Sellers pending the completion and licensing of a Replacement Hospital and to purchase certain assets from the Sellers and to assume certain liabilities of the Sellers; and

WHEREAS, AMI is the wholly-owned subsidiary of AMI Parent;

NOW, THEREFORE, for and in consideration of the premises and of TEN AND NO/100 Dollars ($10.00) paid by each party to the other, and of other good and valuable consideration, the receipt and sufficiency of which is acknowledged by each party hereto, the parties hereto, intending to be legally bound, hereby agree as follows:

Section 1. Lease of Hospital Building, Fixtures and Certain Land.

AMI shall lease the Hospital building, fixtures and certain land on which the Hospital is located (exclusive of the premises devoted to Alcoholic Rehabilitation and Detoxification and Mental Health Programs, and exclusive of the Brice Office Building) from the Sellers for a term of thirty-six months at

a monthly rental of ONE HUNDRED FIFTY THOUSAND DOLLARS ($150,000) per month on the terms and conditions and subject to the limitations set forth in the Lease Agreement of even date herewith (hereinafter referred to as the "Lease"), a copy of which is attached as Exhibit 1.0 hereto. The Lease Agreement shall be executed by AMI and the Sellers, and guaranteed by AMI Parent, by the execution and delivery by AMI Parent of the written guaranty agreement substantially in the form attached hereto as Exhibit 1.1. The term of the Lease shall commence on and as of the "Closing Date" (as hereinafter defined) and the Lease Agreement shall continue in force and effect for the full term of thirty-six months, in accordance with its terms.

Section 2. Replacement Hospital.

AMI shall construct and operate upon the site previously selected by York County an acute-care hospital containing approximately 273 beds and approximately 215,000 square feet to replace the present Hospital. AMI shall commence construction of the Replacement Hospital within twelve months following the granting to AMI of a certificate of need by the South Carolina Department of Health and Environmental Control. AMI shall make application for a certificate of need and other appropriate permits, licenses or certificates for the construction and operation of a Replacement Hospital, pursuant to the "State Hospital Construction and Franchising Act", Section 44-7-110, et seq., South Carolina Code of Laws, 1976, within ninety (90) days after execution of this Agreement. AMI shall commence

construction of the Replacement Hospital within the period set forth above and carry the work forward continuously and expeditiously, with adequate work forces, materials and financial resources until completion. It is contemplated that construction shall be completed within twenty-four months of commencement. If AMI shall be delayed at any time in the progress of the work by an act or omission of York County or by labor disputes, fire, unusual delay in transportation, adverse weather conditions not reasonably anticipatable, unavoidable casualties, or any cause beyond the control of AMI, including the discovery of concealed sub-surface conditions encountered in the construction of the Replacement Hospital which, through no fault of AMI, cause a delay in construction, then such delays shall not constitute a breach of this provision. If AMI shall not have received a Certificate of Need or other governmental authorization required for the commencement of construction of the Replacement Hospital within eighteen months of the date of this Agreement, this Agreement shall, pursuant to Section 11.3 hereof, terminate automatically.

The parties acknowledge that the Sellers have obtained approval for a Certificate of Need to build the Replacement Hospital and that Sellers have obtained a site location. AMI agrees to construct the Replacement Hospital on the site selected by York County substantially in accordance with the preliminary architectural plans. AMI shall have the right to modify such plans to improve the delivery of health care to the citizens of

PET-EX016.0008

RECORD 004456

York County; provided, however, that any such modifications shall not materially change the square footage, the number of beds, or medical services which such architectural plans contemplate. Upon the lease by AMI of the existing hospital, AMI shall establish a Facilities Planning Committee which shall include appropriate representation from the county government, the medical staff of the existing Hospital and the community. The Facilities Planning Committee shall review and provide advice to AMI concerning any proposed changes in the Replacement Hospital plans.

Section 3. Operation of the existing Hospital and Construction and Operation of Replacement Hospital.

AMI shall undertake the following commitments in connection with the operation of the present Hospital and the construction and operation of the Replacement Hospital:

3.1. Hospital Services. During the term of the lease referred to in Section 1 of this Agreement, and after construction of the Replacement Hospital, AMI shall provide in York County at a minimum (i) all health care services currently provided by the present York General Hospital; and (ii) all health care services which have been authorized in the Certificate of Need granted to the Trustees for the Replacement Hospital.

3.2. Ambulance Service. AMI shall provide at no expense to York County ambulance service which shall respond to calls within the geographical limits of York County on a twenty-four hour basis, and which shall furnish transportation by

PET-EX016.0009

RECORD 004457

ambulance to any hospital operating within the geographic limits of York County and all counties contiguous to York County. The skill levels of the staff and the equipment of the ambulance service shall be maintained in such a manner as to enable the service to provide "advanced life support" as defined by the S. C. Midlands EMS Region II Plan which was established pursuant to the EMS Act of 1973, Public Law 93-154, and amended by Public Law 94-573 of 1976. The principal objective of such service shall be to meet the needs of all citizens of York County rather than the sole needs of the hospital. AMI shall operate the service in such a manner so as not to diminish the level of services presently available within York County. Such operation shall include keeping an ambulance at Divine Saviour Hospital in York so long as space for the ambulance shall be free of charge. The parties hereto understand that York County, in executing this Agreement, does not grant unto AMI an exclusive franchise to operate an ambulance service in York County.

During the first year following the closing, AMI shall undertake a study to determine whether the program in place at the closing is the most effective and economical way to provide high quality ambulance service. During this period, the number of ambulances in service shall not be decreased. Thereafter, AMI may implement changes to improve the effectiveness and cost economy of the operation of the ambulance service, provided that no such changes shall diminish the quality of service, the skill levels of the staff, the response time to emergency ambulance calls,

PET-EX016.0010

RECORD 004458

or the quality of ambulance service equipment. AMI shall not discontinue, abolish, diminish or subcontract for ambulance service without the express written approval and consent of the York County Council.

3.3. Emergency Room Service. AMI shall provide at no expense to York County an emergency room sufficiently staffed on a twenty-four hour basis by qualified physicians who will administer emergency medical care. Emergency medical care will be furnished to all parties regardless of their ability to pay or place of residence. AMI will continue the Hospital's current program of providing emergency room services to Winthrop College students. Emergency room physicians and ambulance service staff shall coordinate their respective functions in order to insure the highest quality life-saving skills.

3.4. Hospital Advisory Board. AMI shall establish a board of hospital advisors consisting of twelve members. Four members of the hospital advisory boards shall be representatives of the medical staff, four members of the hospital board shall be representatives of the community and four members of the hospital board shall be representatives of AMI. The medical staff shall select its representatives. The four AMI representatives shall be selected by AMI and shall include the hospital administrator. The four community representatives shall be selected in the following manner: The York County Council shall select the first four community representatives to serve staggered terms as provided

PET-EX016.0011

RECORD 004459

hereinbelow. Thereafter, the York County Council shall appoint each successor to the original four community representatives on the board. All members of the board shall serve staggered terms of four year. Therefore, the first board members shall serve terms as follows:

Term	Medical Staff	AMI	Community
1 year	1 member	1 member	1 member
2 years	1 member	1 member	1 member
3 years	1 member	1 member	1 member
4 years	1 member	1 member	1 member

Successors to the first board members shall serve four year terms and shall be selected in the manner as provided hereinabove. The board shall establish its own rules or operation and procedure. The purpose of the advisory board shall be to insure that AMI is continuously apprised of community interest and to provide the appropriate interface between the Hospital and the York County community.

3.5. Annual Report to the York County Council. On September 30 of each year, commencing in 1981, AMI shall present to the County Council of York County an annual report on the status of the Hospital, the state of its operations, and its plans for the future.

3.6. AMI Scholarship Program. During the first year of the lease of the Hospital by AMI and during each of the following ten years, so long as AMI shall continue to operate the Hospital or to own and operate the Replacement Hospital, there shall be awarded by AMI one or more medical scholarship totalling Ten Thousand

PET-EX016.0012

RECORD 004460

Dollars ($10,000) for York County residents which shall be used for the pursuit of education in a field which shall be related to medical care. The scholarship program shall be established and administered by the hospital advisory board.

3.7. Continuing Education. AMI shall continue and further the health care educational opportunities and programs of the existing York General Hospital, which programs shall include, but not be limited to the following:

(a) York Technical College Programs. AMI will participate in the following medically-related programs currently offered by York Technical College:

(i) Medical Lab Technology;

(ii) Nursing (Associate Degree);

(iii) Operating Room Technician;

(iv) Radiologic Technology;

(v) Respiratory Therapy;

(vi) Dental Assistant.

(b) Winthrop College Programs. AMI will continue to support and participate in the current B. S. Degree in Nursing Program offered by the Medical University of South Carolina satellite program at Winthrop College.

(c) AMI Programs. AMI will provide programs for the continued improvement in educational and skill levels of its employees. To this end, AMI will offer a variety of activities ranging from in-house seminars to programs of formal education presented by major universities.

AMI will also provide programs of management training for hospital personnel, including administrators, directors of nursing, business office managers, and other hospital department heads.

3.8. Physician Recruitment. AMI shall implement an intensive recruitment effort to bring to the York County community the medical specialties required to insure that the citizens of York County receive the highest quality of medical care.

3.9. Medical Staff. No present member of the existing Hospital medical staff shall lose any staff membership and/or clinical privileges at the present Hospital, while leased, or at the Replacement Hospital as a result of the sale and lease contemplated by this Agreement so long as the staff member continues to satisfy the qualifications for staff membership set forth in the corporate and medical staff bylaws of Hospital. AMI shall operate the existing Hospital when leased and the Replacement Hospital after constructed in such manner that, except as otherwise provided in physician agreements entered into by Hospital, the Hospital's medical staff shall be an open staff at all times.

Section 4. Indigent Care.

On and after the Closing Date, and for so long as AMI (or AMI Parent) operates a hospital in York County, South Carolina, AMI (or AMI Parent) shall provide hospital care to York County "indigent persons" as defined and redefined from time to time by York County. York County may, during the

PET-EX016.0014

RECORD 004462

term of this agreement and thereafter, define and classify those persons designated as "indigent persons" for purposes of implementation of this agreement; provided, however, that the persons designated and classified by York County as "indigent persons" for purposes of this agreement shall, at a minimum, be persons who (i) are classified by York County as being "indigent", (ii) do not have the financial ability to pay his or her hospital bill, (iii) will not have any part of his or her hospital bill otherwise paid by medicare, medicaid or some other governmental program or by some other outside source, such as insurance, an employee hospital benefit plan or some other person required by law to provide medical care for such person, and (v) shall be a resident of York County. AMI shall charge York County for hospital care provided to indigent persons pursuant to this Section 4 of this agreement during any fiscal year of York County at a rate which represents a ten percent discount from AMI's standard charges for such care, as provided to its other patients in the same hospital, as in effect on the date on which services are rendered. For purposes of this Section 4, the term "hospital care" shall mean any type of service or product rendered or provided by AMI to a patient including, without limitation, room and bed use, drugs, supplies and laboratory services, emergency room care and ambulance service.

Commencing with the Closing Date, AMI and York County shall maintain records which will provide accurate information regarding the amount of monies expended by York County for the

PET-EX016.0015

RECORD 004463

care of indigent persons.

The total annual amount to be reimbursed by the county to AMI for providing hospital care to indigent persons pursuant to this Section 4 ("total county obligation") shall not exceed an agreed upon limit as set forth hereinbelow. In regard to the total county obligation, the county shall have the right and option at its election, to select one of the following alternatives:

(i) During the twelve months following the Closing Date, the total county obligation shall not exceed Four Hundred Seventy-Five Thousand Dollars ($475,000) ("limit I"). AMI shall provide services to indigent persons until the total sum of Four Hundred Seventy-Five Thousand Dollars ($475,000) shall have been exhausted. After such sum is exhausted, AMI shall continue to be obligated to provide, at its own expense, emergency care to indigent persons; however, AMI shall not be obligated to provide all other hospital services to indigent persons, although it may do so at its own expense. Following the twelve-month period referred to above, York County shall review the records of the treatment of indigent persons to determine whether limit I has been sufficient to meet the needs of indigent persons. Limit I for the next twelve-month period shall be adjusted on the basis of such review.

OR

(ii) During the twelve months following the Closing Date, the total county obligation shall not exceed the sum of Seven Hundred Fifty Thousand Dollars ($750,000) ("limit II"). Thereafter, adjustments to limit II shall be made at the end of the initial twelve-month period and each subsequent twelve-month period (the "Adjustment Date(s)") as follows:

(a) The index used for computing the adjustment is the Consumer Price Index, All Urban Consumers for the Metropolitian Area - All Items, 1967 Equaling 100, published by the U. S. Department of Labor, Bureau of Labor Statistics (the "Index").

(b) The percentage for the adjustment at the end of the initial twelve-month period shall be determined by dividing the Index for the date nearest the initial Adjustment Date by the Index for the Closing Date. The percentage for the Adjustment at the end of each subsequent twelve-month period shall be determined by dividing the Index for the date nearest the current Adjustment Date by the Index for the immediately preceding Adjustment Date.

(c) The initial adjustment shall be computed by multiplying the sum of Seven Hundred Fifty Thousand Dollars ($750,000) by the percentage determined

pursuant to (b) above. This adjustment and each subsequent adjustment shall produce an adjusted limit ("Adjusted Limit II") which shall continue until the next Adjustment Date. Each subsequent adjustment shall be computed by multiplying the Adjusted Limit II for the immediately preceding twelve-month period by the percentage determined pursuant to (b) above for the current Adjustment Date.

AMI shall be obligated to continue to provide medical services to indigent persons in any one twelve-month period, even if its reimbursable costs pursuant to this Section 4 exceed the Adjusted Limit II for that twelve-month period.

York County shall elect one of the above alternatives and notify AMI in writing of its election within ninety (90) days following the Closing Date. Thereafter, within thirty (30) days after final billing for indigent care services for any twelve-month period, York County may elect to implement the alternate total county obligation provided by this Section of this Agreement, by giving notice of such election in writing.

Section 5. Purchase of Assets and Assumption of Liabilities.

5.1. Transfer of Assets. On the terms and subject to the conditions set forth in this Agreement, the Sellers agree to sell, assign, transfer and deliver to AMI on and as of the Closing Date, and AMI agrees to purchase from the

PET-EX016.0018

RECORD 004466

Sellers on and as of the Closing Date, all of the Sellers' right, title and interest in and to the following described assets (said assets being hereinafter referred to as the "assets"):

(i) All inventory, supplies, movable equipment, described on Exhibit 5.1(i) hereto, minor equipment, automotive equipment, furniture, machinery and equipment warranty rights, prepaid expenses, medical records, medical charts, business records and accounts receivable owned by York General Hospital;

(ii) The land described in Exhibit 5.1(ii) comprising approximately 20.7 acres which shall be the site of the Replacement Hospital;

(iii) The land described on Exhibit 5.1(iii) comprising approximately 19.3 acres which is adjacent to the land described in Exhibit 5.1(ii); and

(iv) All contracts and agreements listed on Exhibit 5.1(iv) hereto.

5.2. Assets Excluded from Purchase. York County shall retain all cash, investments, annuity contracts, other receivables, and existing hospital land, building and improvements and all other assets of York General Hospital not specifically enumerated in 5.1 of this agreement.

5.3. Assumption of Liabilities.

(a) Liabilities. On and as of the Closing Date, AMI shall assume and agree to pay, perform and discharge the "Liabilities" (as hereinafter defined). Subject

PET-EX016.0019

RECORD 004467

to Section 5.3(b), for purposes of this agreement, the term "Liabilities" shall include, and be limited solely to:

(i) Any and all liabilities of the Sellers for funds which have been advanced to the Hospital by the United States Federal Government under the Hill-Burton program. Exhibit 5.3(a)(i) sets forth the claim of the United States Federal Government against the Hospital in the form of a letter stating the claim at One Million Five Hundred Thousand Dollars ($1,500,000);

(ii) Any and all claims of the United States Federal Government under the medicare program for recapture of depreciation generated by the sale or lease of Hospital assets;

(iii) Any and all obligations of the Hospital accruing from and after the closing date under those contracts and agreements listed on Exhibit 5.1(iv) hereto; and

(iv) All sums necessary to maintain the present Hospital, and all liabilities or sums required for correction of deficiencies cited after commencement of the lease to bring the present Hospital into compliance with any federal, state or local laws, ordinances, rules or regulations, necessary to permit the continued operation of the Hospital as a hospital, during the term of the lease referred to in Section 1

of this Agreement.

(b) Excluded Liabilities. Notwithstanding anything in Section 5.3(a) to the contrary, the term "liabilities" shall not include any of the following debts, obligations and liabilities of the Sellers, and, therefore, AMI does not assume under this Agreement, and Sellers shall continue to be obligated to pay, perform and discharge such debts, obligations and liabilities:

(i) Federal and state income taxes, if any, payable with respect to any activities of the Hospital;

(ii) Franchise taxes payable by the Hospital;

(iii) Sales and other taxes (including, without limitation, use taxes) payable with respect to the business operations of the Hospital;

(iv) Federal and state payroll taxes payable with respect to any person employed by the Hospital;

(v) Accrued salaries, wages and vacations as of the date of closing shall be assumed and paid when due by AMI. The amount of such accrued salaries, wages and vacation assumed by AMI shall be deducted from the purchase price to be paid to the county at the closing.

Liability for accrued sick leave as of the date of closing shall be apportioned between the County and AMI on the basis of the following formula: after the

date of closing, sick leave taken by Hospital employees shall first be credited against sick leave accrued after the date of closing. In the event that sick leave accrued by an employee after the closing is exhausted, and the employee takes sick leave earned prior to the closing, AMI shall pay such sick leave and shall deduct the amount of such payment from the monthly lease payment to the county in the month such payment is made; provided, however, that after the third anniversary of closing, all unexpired sick leave accrued prior to closing shall then be assumed by AMI at no further expense to the county;

(vi) Any liability to the extent the Sellers are insured or otherwise indemnified therefor;

(vii) All accounts payable of the Hospital and adjustments due Medicare and Medicaid by the Hospital except those provided for in 5.3(a)(ii), above; and

(viii) Any other debt, obligation or liability of the Sellers (other than those debts, obligations and liabilities of the Sellers specifically listed in Section 5.3(a) hereof), including retirement, deferred compensation, pension plans, other plans described in Section 8.11(d) hereof and any other compensation or benefits (including, without limitation, any obligation of the Sellers to fund the Hospital's

Pension Plan) payable by the Sellers to or for any person employed by the Hospital, whether or not such debt, obligation or liability is disclosed on the audited balance sheet of the Hospital dated September, 1979, and all notes thereto (said balance sheet and notes being hereinafter referred to as the "1979 Balance Sheet") which have been delivered to AMI.

(c) Proration. After the Closing Date, the Sellers and AMI shall prorate as of the Closing Date any payments which become due and payable after the Closing Date with respect to (i) the contracts and agreements listed on Exhibit 5.1(iv) hereto, (ii) ad valorem taxes on the assets, (iii) ad valorem taxes on the property leased by AMI from the Sellers under the lease and (iv) all utilities including, without limitation, water, sewer, telephone, electricity, heating oil and gas service. The adjustment shall be made when the payments become due and payable.

5.4. Purchase Price.

AMI shall pay the consideration computed in the manner set forth below (such consideration being hereinafter referred to as the "Purchase Price") on the dates set forth below, in

PET-EX016.0023

RECORD 004471

exchange for the assets:

(a) On the Closing Date, AMI shall pay the Sellers the following sums, constituting the current estimated value of the assets described in Section 5.1(i), (ii), (iii) and (iv), subject to the provisions of this Agreement, including Sections 5.3(b)(v), (viii) and (c), plus an amount equal to the net receivables of the Hospital at the Closing Date, if the accounting and collection policies of the Hospital to reserve for and collect such accounts receivable as evidenced by the financial statement referred to in Section 8.6 below shall not have changed:

Inventory	$ 631,000.00
Movable Equipment	1,391,678.00
Minor Equipment	79,683.00
Automotive Equipment	42,184.00
Prepaid Expenses	67,582.00
Accounts Receivable	1,348,929.00
Land	421,590.00
TOTAL	$3,982,646.00

(b) The allocation of the Purchase Price to be paid hereunder by AMI is set forth on Exhibit 5.4(b) hereto, and both AMI and the Sellers agree that such allocation is fair and reasonable. It is expressly acknowledged and agreed that the allocation of the Purchase Price

for the items listed as "Current Assets" in Exhibit 5.4(b) is based on the most recent balance sheet available, and that the Purchase Price of such current assets is subject to adjustment pursuant to Section 5.4(c) hereof. Any change in the value of the current assets pursuant to the Section 5.4(c) audit shall result in corresponding changes to the allocation made in Exhibit 5.4(b). On the "Post Closing Date" (as hereinafter defined) AMI shall prepare, and AMI and the Sellers shall initial a revised Exhibit 5.4(b) which reflect all such changes, and such Exhibit 5.4(b), as revised, shall be deemed substituted in lieu of Exhibit 5.4(b) attached hereto.

(c) Within thirty days following the Closing Date (such date to be hereinafter referred to as the "Post Closing Date"), AMI shall conduct and complete an audit of the items listed as Current Assets on the 1979 Balance Sheet as adjusted to reflect any additions or deletions to such Current Assets through the Closing Date, in accordance with generally accepted auditing standards, as of the Closing Date, and shall notify the Sellers in writing (i) whether or not there has been a change in the value of the Current Assets as adjusted from the amount shown therefor on the 19 79 Balance Sheet to the Closing Date, and (ii) the amount

PET-EX016.0025

RECORD 004473

of such change, if any. If Sellers disagree with the results of the audit conducted by AMI, the Sellers may cause a complete audit or a separate audit of any item to be conduted by an accounting firm selected by Sellers. If at the conclusion of the audit conducted for Sellers AMI and Sellers shall be unable to resolve any differences between Sellers' audit and the audit conducted by AMI, AMI shall designate one arbitrator and Sellers shall jointly designate one arbitrator, and the two arbitrators so selected shall designate a third arbitrator. The three arbitrators so selected shall resolve any differences in the audits. The remedy provided in this section shall be cummulative to all other remedies available to the parties to this Agreement. The Purchase Price paid for the Current Assets shall be adjusted depending upon whether there has been an increase or decrease in the aggregate of the Current Assets as of the Closing Date. If the aggregate dollar value of the Current Assets has increased, then the dollar amount of such increase shall be paid by AMI to the Sellers within seven days after the Closing Date. If the aggregate dollar value of the Current Assets has decreased, then the dollar amount of such decrease shall be paid by the Sellers to AMI within seven days after the Post Closing Date.

Section 6. Actions to be Taken by AMI, York County and the Trustees.

PET-EX016.0026

RECORD 004474

6.1. Action by AMI.

AMI shall, as soon as practicable after the date hereof, use its best efforts to obtain:

(i) the transfer to AMI of the license presently issued to the Trustees pursuant to the applicable South Carolina laws (hereinafter referred to as the "Hospital Licensing Act") or the issuance of a new license under the Hospital Licensing Act for AMI to lease and operate the Hospital, on terms and conditions no less restrictive than the terms and conditions imposed under the Trustees' present license;

(ii) the approval of this Agreement and the transfer of the operations of the Hospital to AMI effected hereunder by any necessary federal, state and local authority or agency whose approval is necessary under applicable South Carolina Law (hereinafter referred to as the "South Carolina Certification of Need Laws"), Section 1122 of the Social Security Act, the National Health Planning and Resources Development Act of 1974 (P.L. 93-641) and any other state, federal or local laws governing the operations of a general hospital; and

(iii) the necessary approvals, certificates or permits required under the South Carolina Certification of Need laws, Section 1122 of the Social Security Act, the National Health Planning and Resources Development Act of 1974 (P.L. 94-641) and any other federal, state or local laws governing the operations of a general hospital,

PET-EX016.0027

RECORD 004475

for AMI to construct, own and operate a new hospital facility to be located in York County (1) having approximately 273 beds, (2) having approximately 215,000 square feet, and (3) offering no fewer services than the services offered by the Hospital on the date of this Agreement or approved in the Certification of Need which was issued to Sellers for the construction of a new hospital.

6.2. Action by York County and the Trustees. The Sellers shall use their best efforts to assist AMI in obtaining the requisite approvals, licenses, Certifications of Need, permits, utilities and the like as set forth in Section 6.1 hereof and shall cooperate fully with AMI in this regard.

Section 7. Instruments of Transfer.

7.1. Transfer of Assets. On the Closing Date, the Sellers shall execute and deliver to AMI a bill of sale in the form of Exhibit 7.1 hereto (hereinafter referred to as the "Bill of Sale"), pursuant to which the Sellers will sell, assign, transfer and deliver to AMI all of their title and interests in and to the Assets.

7.2. Assumption of Obligations. On the Closing Date, AMI shall execute and deliver to the Sellers an assumption agreement in the form of Exhibit 7.2 hereto (hereinafter referred to as the

PET-EX016.0028

RECORD 004476

"Assumption Agreement"), pursuant to which AMI will agree to pay, perform and discharge the Liabilities.

7.3. Further Assurances. The Sellers shall from time to time at AMI's request and without further consideration execute and deliver to AMI such instruments of transfer, conveyance and assignment, in addition to the Bill of Sale, as AMI may reasonably request to evidence further the transfer, conveyance and assignment of the Assets to AMI. Similarly, AMI shall from time to time at the Sellers' request and without further consideration execute and deliver to the Sellers such instruments of assumption, in addition to the Assumption Agreement, as the Sellers may reasonably request to evidence further AMI's assumption of the Liabilities.

Section 8. Representations and Warranties of the Sellers. The Sellers hereby represent, warrant, covenant and agree to and with AMI and AMI Parent, as follows:

8.1. Due Organization. York County is a duly created and validly existing political subdivision of the State of South Carolina.

8.2. County Council. The County Council of York County has been duly elected in accordance with the laws of the State of South Carolina.

8.3. Approval of Agreement. The execution, delivery and performance of this Agreement and the Lease (i) have been duly approved by all necessary governmental action of York County,

PET-EX016.0029

RECORD 004477

including, without limitation, appropriate action by the County Council of York County, (ii) are within the powers of York County, and (iii) will not violate any law or governmental restriction and will not constitute a breach or default of any agreement to which York County is a party.

8.4. Board of Trustees. The Board of Trustees of Hospital has been duly appointed in accordance with the laws of the State of South Carolina.

8.5. Approval of Sale. The execution, delivery and performance of this Agreement and the Bill of Sale have been duly approved by all necessary action of the Hospital, including, without limitation, appropriate action by Hospital's Board of Trustees.

8.6. Accuracy of Financial Statements. The 19 79 Balance Sheet and the audited balance sheet of the Hospital as of September, 19 79 (hereinafter referred as the "1979 Balance Sheet") and the audited income statement for the 12-month period ending on September, 1979, and the audited income statement for the period ending on September, 1979, and the notes thereto, are attached as Exhibit 8.6 hereto. All of the aforesaid financial statements were prepared in accordance with generally accepted accounting principles consistently applied. To the knowledge of the Sellers, each of said balance sheets, together with the notes thereto, fairly, completely and accurately presents the financial condition of the Hospital as of its respective date, and the said income statements fairly, completely

PET-EX016.0030

RECORD 004478

and accurately present the results of the operations of the Hospital for the periods indicated. To the knowledge of the Sellers, on September, 1979, the Hospital had no liability, either accrued, absolute, contingent, or otherwise, whether or not then due and payable (including, without limitation, any liabilities for federal, state or local taxes, penalties, assessments and fees of the Hospital for all periods ending on or prior to the said date or any transaction or state of affairs entered into or existing on or before said date), which was not fully reflected on the 1979 Balance Sheet, the notes thereto or any Exhibit hereto, but which, in accordance with generally accepted accounting principles, should have been reflected on the 1979 Balance Sheet, or in the notes thereto. To the knowledge of the Sellers, on September, 1979, the Hospital had no liability whatsoever not required by generally accepted accounting principles to have been disclosed on said balance sheet or in the notes thereto as of such date which is not clearly described in this Agreement or an Exhibit hereto. To the knowledge of the Sellers, since September, 1979, the Hospital has incurred no liability whatsoever except in the ordinary course of its business, and no such liability incurred by it in the ordinary course of its business has been or will prove to be materially adverse to the business or financial condition of the Hospital.

The representations and warranties made by the Sellers to AMI in this Section 8.6 shall terminate on the 90th day following

PET-EX016.0031

RECORD 004479

the signing of this Agreement. During such 90 day period, the Sellers shall provide AMI access to the premises and the books and records of the Hospital and cause the officers or administrators of the Hospital to furnish AMI or its agents such financial and operating data and other information with respect to the business and properties of the Hospital as AMI shall reasonably request. If during the 90 day period AMI shall discover that the 19 79 financial statements include material inaccuracies or omissions, it may within five business days following the expiration of the 90 day period advise Sellers that this Agreement is terminated. If such notice of termination shall be given, neither AMI nor the Sellers shall have any further obligation or liabilities hereunder.

8.7. Properties of the Hospital. To the knowledge of the Sellers, the 1979 Balance Sheet reflect all of the properties presently used by the Hospital in its business, except for (a) inventory acquired or disposed of by the Hospital in the ordinary and usual course of its business since September, 1979, (b) properties that have been fully depreciated or the cost of which have been appropriately expensed by the Hospital and (c) properties leased by the Hospital. Exhibit 8.7 attached hereto sets forth a list and brief description of all the real and personal properties leased by the Hospital and all of the parcels of real property owned by the Hospital. Except for inventory disposed of in the ordinary and usual course of the Hospital's business since September, 1979, the Hospital presently has good and marketable title, free and clear of any lien, claim,

PET-EX016.0032

RECORD 004480

encumbrance or charge to all of the real and personal property reflected in the 1979 Balance Sheet, to all the non-leased properties presently used by the Hospital that has been fully depreciated or the cost of which has been appropriately expensed by the Hospital and to all of the inventory acquired by the Hospital since September, 1979, and not yet disposed of by the Hospital in the ordinary course of its business,

(i) except for liens, charges or encumbrances reflected in the 1979 Balance Sheet or any schedule attached to Exhibit 8.7 for the purpose of disclosing any liens, encumbrances or charges not reflected on the 1979 Balance sheet; and

(ii) except for statutory liens arising involuntarily in the ordinary course of the Hospital's business and securing liabilities not now due or payable (such as property tax and mechanic's liens and the like).

With exception of the liens, charges and encumbrances referred to in subparagraphs (i) and (ii) above, on the Closing Date, the Sellers will convey to AMI good and marketable title to all of the Assets, free and clear of any lien, claim, encumbrance or charge.

All buildings and improvements located on real property owned or leased by the Hospital are in compliance with all applicable South Carolina (state or local) and, to its knowledge, all federal ordinances, regulations, zoning, environmental and land use laws and all such government regulations, except as

PET-EX016.0033

RECORD 004481

otherwise set forth in Exhibit 8.13 hereto. None of the buildings or improvements located on real property owned or leased by the Hospital, and no other building or improvement encroaches on the real property owned or leased by the Hospital.

8.8. Taxes and Tax Returns. The Hospital has filed all federal, state and local tax returns and reports for the Hospital which have become due to be filed (including, without limitation, those due in respect of its properties, franchises, licenses, sales, and payrolls) and have paid all taxes, assessments, fees, interests, penalties (if any) and other governmental charges payable for all periods covered thereby. The Hospital is not delinquent in the payment of any taxes, assessments or governmental charges, and there are no assessments of additional taxes threatened against the Hospital or any of its owned or leased properties. No waiver of any statute of limitations or agreement for extension of time for assessment in respect of any tax liability of the Hospital has been given by the Hospital which is presently in effect. Without limiting the foregoing, (a) the Hospital has promptly filed when due all FICA, FUTA and similar state and local tax returns and withholding of employee income tax returns and reports of the Hospital which have become due to be filed and has paid all amounts required to be paid thereunder, and (b) the Hospital has paid over to the appropriate taxing authorities all amounts required to have been withheld by the Hospital from employee compensation, except such withheld amounts not yet due to have been paid over.

PET-EX016.0034

RECORD 004482

8.9. Inventory. The inventory of Hospital as recorded on Exhibit 8.9 shall not be depleted except in the ordinary course of business, and it shall be maintained through the Closing at a level which does not differ materially from the inventory indicated on Exhibit 8.9.

8.10. Post Date Occurrences. Except as otherwise disclosed on Exhibit 8.10 hereto, since September, 1979, the Hospital has not:

(a) incurred any obligation or liability (absolute or contingent), except obligations or liabilities incurred in the ordinary course of its business, which, in the aggregate, neither have had nor will have a materially adverse effect on the financial condition or business of the Hospital;

(b) discharged or satisfied any lien or encumbrance or paid any obligation or liability (absolute or contingent) other than in the ordinary course of its business;

(c) mortgaged, pledged or subjected to lien or any other encumbrance any of its assets, tangible or intangible (except for statutory tax liens arising involuntarily in the ordinary course of its business and securing liabilities not yet due and payable);

(d) purchased, sold or transferred any asset except for inventory sold in the ordinary and usual course of its business;

(e) suffered any extraordinary losses or waived any rights of substantial value;

(f) Made any increase in, or written or oral agreement with respect to, the compensation payable to any of its Trustees,

PET-EX016.0035

RECORD 004483

officers, key employees or agents, including, but not limited to, bonuses and pensions or other arrangements except as herein specifically provided;

(g) made any gift or any reimbursement for expenses not ordinary and necessary to the business of the Hospital, to any Trustee, officer, employee or agent;

(h) suffered any material damage to, or loss of, any of its business assets or properties (including leased properties), whether or not covered by insurance, as a result of any strike, fire, explosion, civil disturbance, accident, theft or casualty of any nature;

(i) suffered or experienced any change in the condition (financial or otherwise), assets or business of the Hospital, other than changes in the ordinary course of its business, none of which have been or will be materially adverse;

(j) been the subject of or experienced any strike or other work stoppage or concerted slowdown or threat thereof, union election or attempted collective bargaining of employees; or

(k) entered into any transaction other than in the ordinary and usual course of its business.

8.11. Major Contracts. Except as set forth on Exhibit 8.11 hereto, the Hospital has no:

(a) contract or agreement involving amounts payable to the Hospital that will aggregate $ 25,000.00 or more;

(b) contract or agreement for the purchase, sale or lease

of goods, materials, equipment, supplies or capital assets or for the rendering of services involving payments by the Hospital that will aggregate $ 25,000.00 or more or which will require more than 30 days' notice in order for such commitments to be terminated without liability to the Hospital or its assigns;

(c) management or employment contract or collective bargaining or other labor union agreements;

(d) employee benefit plan, fund or program, whether or not legally binding, including, without limitation, (1) any plan, fund or program which provides to employees retirement income or deferred compensation of any kind, or (2) any plan, fund or program which provides to employees, through the purchase of insurance or otherwise, (i) medical, surgical, or hospital care or benefits, (ii) benefits in the event of sickness, accident, disability, death or unemployment, or (iii) day care centers, scholarship funds or prepaid legal services;

(e) contract or agreement with any Trustee, officer or employee or any unpaid loans or advances due or to become due to or from any Trustee, officer or employee;

(f) real estate, building or equipment lease calling for rental payments in excess of $ 10,000.00 per month;

(g) loan, factoring, credit line, subordination or guaranty agreement;

(h) contract preventing the Hospital or its assigns from carrying on its business anywhere in the world;

(i) joint venture or other agreement involving sharing of profits;

(j) outstanding power of attorney empowering any person, firm or corporation to act on behalf of the Hospital;

(k) outstanding offer or bid that, if accepted, would result in (i) a contract requiring the Hospital to pay, or that there be paid to the Hospital, in the aggregate, $ 25,000.00 or more, or (ii) any material contract or commitment;

(l) material contract or commitment of any type whatsoever not covered by any other item of this Section 8.11; or

(m) contract or agreement requiring the consent of any party other than York County or the Trustees to an assignment thereof.

Except as otherwise noted in Exhibit 8.11, true copies of all such contracts and other documents noted in such Exhibit have been furnished to AMI. The Hospital has duly complied with all provisions of every contract, lease and other agreement (whether written or oral) to which it is a party and is not in default with respect to any such contract, lease or agreement. No condition or state of facts exists that, with notice or the passage of time or both, would constitute a default under any contract, lease or other agreement to which the Hospital is a party. All contracts and leases to which the Hospital is a party are in full force and effect and are enforceable by the Hospital against all other parties thereto in all material

respects. No loan payable by the Hospital provides for any prepayment penalty or premium. The execution, delivery and performance of this Agreement will not cause any default in or breach of any provision of Hospital's Articles of Incorporation or Bylaws or any contract, lease or other agreement to which it is a party or by which it is bound, and none of such actions will result in termination or in acceleration or any similar right of any other party under any loan or other agreement to which the Hospital is a party or by which it is bound.

8.12. Litigation; Claims. There is no litigation, action, suit or proceeding or governmental investigation pending or threatened against the Hospital or affecting the Hospital or its business or any of its assets at law or in equity or before any federal, state, municipal, local or other governmental authority, nor does the Hospital know or have reason to know of any ground for any such litigation, action, suit, proceeding or investigation, except as set forth in Exhibit 8.12 hereto. The Hospital is not subject to any order, writ or decree of any court or other governmental authority, and is not involved in any material controversy with any of its employees or any organization representing any of its employees.

8.13. Compliance with Law. The Hospital to its knowledge is in compliance and has complied in every material respect with all South Carolina (state and local) and, to its knowledge, all federal laws, regulations, rules and decrees of authorities whatsoever relating to the conduct of its business and/or the

ownership of its assets, except as set forth in Exhibit 8.13 hereto.

8.14. Brokers' and Finders' Fee. No agent, broker, person or firm acting on behalf or under authority of either or both of the Sellers is or will be entitled to any commission or brokers' or finders' fee from any of the parties hereto in connection with any of the transactions contemplated herein.

8.15. Material Misstatements or Omissions. No representation or warranty made by the Sellers in this Agreement or in any document, statement, certificate, exhibit or schedule furnished to AMI pursuant hereto or in connection with the transactions contemplated hereby contains, to the knowledge of the Sellers, any untrue statement of a material fact or omits to state a material fact required to make any such representation or warranty not misleading.

8.16. Medicare Cost Reports. The Medicare cost reports furnished to AMI by the Sellers are complete, true and accurate.

8.17. Employee Benefit Plans.

(a) The Sellers have furnished AMI with copies of all reports regarding each employee benefit plan of the Hospital, as described in Section 8.11 and listed on Exhibit 8.11 hereof, which were filed on or after December 8, 1980, with the Internal Revenue Service, the Department of Labor, the Pension Benefit Guaranty Corporation ("PBGC"), any agency or department established under any state or federal securities laws and any other agency or department established under any

PET-EX016.0040

RECORD 004488

other state or federal law, which copies of all such reports are true and accruate. All such employee benefit plans at all times, to Sellers' knowledge, have satisfied, and will continue to satisfy up to the Closing Date, all applicable requirements, including all reporting and disclosure requirements, under the Internal Revenue Code of 1954, as amended (the "Code"), and the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

(b) The Sellers agree that AMI is not and will not be assuming continuing or maintaining any employee benefit plan (or accepting any assets or assuming any liabilities of any such plan) maintained by the Hospital for its employees, except as provided in 5.2 (b) (v) hereof. Sellers shall be solely responsible for satisfying all applicable requirements discussed in (a) above with respect to such plans up to and after the Closing Date.

(c) The Pension Plan (as defined in Exhibit 8.11 hereof) is a "governmental plan" within the meaning of Section 414(d) of the Code and is a plan described in Section 4021(b)(2) of ERISA.. In the event that the Pension Plan shall be, or be deemed to be, wholly or partially terminated, for whatever reason, the Sellers shall be solely responsible for all obligations and liabilities resulting from such termination or partial termination, and in no event shall AMI be responsible for any such obligations or liabilities.

8.18. Quiet Enjoyment. AMI shall at all times during the term of the Lease have peaceable and quiet enjoyment and possession of the properties leased thereunder.

Section 9. Representations and Warranties of AMI and AMI Paren

PET-EX016.0041

RECORD 004489

AMI and AMI Parent hereby represent, warrant, covenant and agree to and with the Sellers as follows:

9.1. Due Organization. AMI and AMI Parent each is a corporation duly organized and validly existing, and AMI is in good standing under the laws of the State of South Carolina and AMI Parent is in good standing under the laws of the State of Delaware.

9.2. Board of Directors. The Board of Directors of AMI and of AMI Parent have been duly elected in accordance with the laws of the State of South Carolina and of Delaware, respectively, and the Articles of Incorporation and Bylaws of each respective corporati

9.3. Approval of Purchase. The execution, delivery and performance of this Agreement, the Assumption Agreement and the Lease have been duly approved by all necessary corporate action on the part of AMI and AMI parent, and such actions are within the powers of AMI and AMI Parent.

9.4. Brokers' or Finders' Fees. No agent, broker, person or firm acting on behalf of AMI or AMI Parent or under authority of AMI or AMI Parent is or will be entitled to any commission or brokers' or finders' fee from any of the parties hereto in connection with any of the transactions contemplated herein.

Section 10. Conduct of Business Prior to Closing Date.

10.1. Access to Business. Except as prohibited by law, the Sellers shall give AMI and its agents access to all the premises and books and records of the Hospital, and cause the Hospital's officers and employees to furnish AMI and its agents such financial and operating data and other information with respect to the business

PET-EX016.0042

RECORD 004490

and properties of the Hospital as AMI shall from time to time request. In the event of the termination of this Agreement, AMI shall return to the Hospital all documents, work papers, and other materials obtained from the Hospital in connection with the transactions contemplated hereby.

10.2. Conduct of Business in Ordinary Course. Prior to the Closing Date, the Hospital shall conduct its business only in the ordinary course and shall not, without prior written advice to AMI (except as provided below):

(a) Make any change:

(i) which exceeds 7% in the compensation payable or to become payable by the Hospital to any employee of the Hospital whose 1980 annual remuneration exceeded $5,000.00;

(ii) in any bonus, insurance, pension, or other benefit plan, payment, or arrangement made to, for, or with any Trustee, officer, or employee of the Hospital, including, without limitation, all plans, funds or programs described in Section 8.11 hereof;

(b) pay or prepay any outstanding indebtedness of the Hospital other than at its stated maturity;

(c) waive any rights of substantial value; or

(d) enter into any contract for the purchase or sale or lease of any property or goods or the obtaining of any

PET-EX016.0043

RECORD 004491

services involving payments to be made by or to the Hospital aggregating in excess of $25,000.00.

(e) Notwithstanding anything hereinabove to the contrary in this Section 10.2, the Hospital may, from time to time, whether before, on or after the Closing Date, and without advice to AMI, take any action with respect to the Pension Plan, the Deferred Compensation Plan, the Deferred Compensation Agreements or the Special Pensions (all as defined on Exhibit 8.11 hereof) as the Hospital in its discretion may determine, including without limitation (i) changing any of the terms and provisions of the Pension Plan, the Deferred Compensation Plan, the Deferred Compensation Agreements or the Special Pensions, (ii) increasing benefits or terminating benefits under any of them, (iii) funding or otherwise providing for the payment of any benefits thereunder and (iv) changing any funding or investment media that from time to time fund or provide any benefits thereunder.

Section 11. Effectiveness of Agreement, Closing Date; and Conditions to Closing.

11.1. Effectiveness of Agreement. This Agreement shall become effective on and as of the date hereof, subject to Section 11.3 hereof.

PET-EX016.0044

RECORD 004492

11.2. Closing Date. The delivery of the Purchase Price pursuant to Section 5.4(a), the sale, transfer, assignment and delivery of the Assets pursuant to Section 5.1, the delivery of the Bill of Sale pursuant to Section 7.1, the assumption of the Liabilities pursuant to Section 5.3(a), the delivery of the Assumption Agreement pursuant to Section 7.2, and the delivery of the other instruments, certificates and legal opinions required under this Section 11, shall take place at York, S. C., at 2:30 o'clock P.M., local time, five (5) business days after AMI shall have executed and delivered to York County and the Trustees a Notice of Closing in the form of Exhibit 11.2 hereto (hereinafter referred to as the "Notice of Closing"), or on such other date or at such other time or place as the parties hereto shall agree to in writing (the date and time of the closing hereunder being referred to herein as the "Closing Date"). AMI shall execute and deliver the Notice of Closing within seven days after the conditions described in subsections (e), (f), (g), (h), (i) and (j) of Section 11.5 shall have been satisfied (or waived by AMI).

11.3. Maximum Time Period. If AMI has not, through no fault of AMI, executed and delivered a Notice of Closing in the manner specified in Section 11.2 on or before July 1, 1982, and if the closing contemplated in Section 11.2 hereunder is not

PET-EX016.0045

RECORD 004493

otherwise closed on or before said date, then this Agreement shall automatically terminate as of said date.

11.4. Condition to Obligations of the Sellers. The obligations of the Sellers to effect the transactions contemplated hereunder to be performed on the Closing Date by the Sellers shall be subject to the satisfaction (or waiver by the Sellers) on or before the Closing Date of the following condition:

(a) Representations and Warranties of AMI and AMI Parent to be True. The representations and warranties of AMI and AMI Parent herein contained shall be true in all material respects on and as of the Closing Date with the same effect as though made at such time, except to the extent any such representations or warranties are waived in writing by the Sellers; and AMI and AMI Parent shall have delivered to the Trustees and York County, a certificate to such effect, dated the Closing Date and signed by the Chairman of the Board, the President or any Vice President of AMI and of AMI Parent.

11.5. Conditions to Obligation of AMI. The obligation of AMI to effect the transactions contemplated hereunder to be performed by AMI on the Closing Date shall be subject to the satisfaction (or waiver by AMI) on or before the Closing Date of the following conditions:

(a) Representations and Warranties of the Sellers To Be True. The representations and warranties of the Sellers herein contained shall be true in all material respects on and as of the Closing Date with the same effect as though made at such time, except to the extent that any such representations and warranties are waived in writing by AMI; and York County and the Trustees shall each have delivered to AMI a Certificate to such effect, dated the Closing Date and signed by the Chairman of the Board of the Trustees of the Hospital, in the case of the Trustees, and by the Chairman of the County Council of York County, in the Case of York County.

(b) Opinion of Counsel of York County. AMI shall have received from Spratt, McKeown & Spratt, counsel for York County, an opinion, dated the Closing Date and in form and substance reasonably satisfactory to AMI's counsel to the effect that:

(i) York County is a duly created and validly existing political subdivision of the State of South Carolina;

(ii) York County has the governmental power to execute and deliver this Agreement and Lease and to perform the respective terms and conditions thereof which are to be performed by York County; which such opinion may be qualified by noting that the act of the legislature of South Carolina ratifying the action of the Sellers would eliminate any possibility that the Sellers did not have authority to carry out this Agreement;

PET-EX016.0047

RECORD 004495

(iii) The County Council of York County has the power to lease the Hospital property and within that authority its actions are binding upon future County Councils, and the Lease executed is within the authority of the County Council under the said South Carolina General Statute;

(iv) The County Council of York County has the authority to sell the Assets and within that authority its actions are binding upon future County Councils; and

(v) This Agreement and the Lease have each been duly authorized, executed and delivered by York County and are each the valid and binding obligations of York County, enforceable against York County in accordance with their respective terms (subject to bankruptcy and other laws affecting the rights of creditors generally).

(c) No Material Adverse Change. There shall not have occurred since September, 1979, (i) any material or adverse change in the business, properties, results of operations or business or financial condition of the Hospital, or (ii) any loss or damage to any of the properties or assets (whether owned or leased), whether or not covered by insurance, of the Hospital which would materially and adversely affect or impair the ability of AMI to conduct after the Closing Date the business now being conducted by the Hospital; and the Trustees shall have delivered to AMI a certificate, dated the Closing Date, and signed by the Chairman of the Board of Trustees of the Hospital, to all such effects.

PET-EX016.0048

RECORD 004496

(d) State Hospital License. AMI shall have been issued a new license under the Hospital Licensing Act or the present license under the Hospital Licensing Act for the Hospital shall have been transferred to the name of AMI (or a binding commitment to issue such license or transfer such license shall have been received from the State of South Carolina).

(e) Other Governmental Approvals. This Agreement and the transfer of the operation of the Hospital to AMI effected hereby shall have been approved by all necessary federal, state and local agencies whose approval is necessary under the Hospital Licensing Act, South Carolina Certification of Need laws, Section 1122 of the Social Security Act, The National Health Planning and Resources Development Act of 1974 (P.L. 93-641), and any other federal, state or local laws governing the operations of a general hospital, including, without limitation, the local Health Systems Agency, the South Carolina State Health Planning and Development Agency and the United States Department of Health, Education and Welfare ("HEW").

(f) Approval of New Hospital Construction. The application by AMI to construct, own and operate the Replacement Hospital shall have been approved by (or a binding commitment to approve such application shall have been received from) all necessary federal, state and local agencies under the South Carolina Certification of Need laws, Section 1122 of the Social Security Act, the National Health Planning and Resources Development Act of 1974 (P.L. 93-641), and any other federal, state or local laws governing the operations

of general hospitals, including, without limitation, the local Health Systems Agency, the South Carolina State Health Planning and Development Agency and the United States Department of Health, Education and Welfare.

(g) Medicare/Medicaid. AMI shall have obtained (or a binding commitment shall have been obtained in favor of AMI) (i) from the appropriate authority of the State of South Carolina or any political subdivision thereof, as applicable, a certification for participation in the South Carolina Medicaid program and (ii) from the appropriate authority of the federal government, a certification for participation under the federal Medicare program.

(h) Blue Cross/Blue Shield. AMI shall have obtained (or a binding commitment shall have been obtained in favor of AMI for) a Blue Cross/Blue Shield reimbursement contract.

(i) Title Insurance for Hospital. York County or the Trustees, at the expense of AMI, shall have provided AMI with a survey of the "Land" (as defined in the Lease) and AMI shall have obtained, at its expense, from Lawyers Title Insurance Company, a commitment to issue as of the Closing Date a leasehold title insurance policy guaranteeing and insuring the leasehold title of AMI in the amount of $5,400,000, such policy to be subject to no exceptions or encumbrances other than the terms of the Lease, statutory tax liens for taxes not yet due and payable, certain Indian claims exceptions described in Exhibit 11.5 and such other encumbrances as AMI may approve.

(j) Title Insurance for Replacement Hospital. York County or the Trustees, at the expense of AMI, shall have provided AMI with a survey of the land described in Exhibits 5.1(ii) and 5.1(iii) and AMI shall have obtained, at its expense, from Lawyers Title

PET-EX016.0050

RECORD 004498

Insurance Company, a commitment to issue as of the Closing Date an ALTA standard form policy of owner's title insurance guaranteeing and insuring the title of AMI in the amount of $ 20,000,000 , such policy to be subject to no exceptions or encumbrances other than statutory tax liens for taxes not yet due and payable, certain Indian claims exceptions described in Exhibit 11.5, and such other encumbrances as AMI may approve.

(k) Appropriate Zoning. The parcels of land described in Exhibits 5.1(ii) and (iii), respectively, shall be classified under any applicable zoning ordinance "RGO" and, in any event, so as to permit use of each such parcel for purposes of a general acute care hospital, professional offices and related parking, and the time to appeal any such classification shall have expired with no such appeal pending.

Section 12. Claims.

12.1. Claims Against AMI and AMI Parent. The Trustees and York County shall jointly and severally defend AMI and AMI Parent from and against any claims made against AMI or AMI Parent as a result of, or with respect to:

(i) any and all debts, obligations or liabilities of Sellers that are not assumed by AMI pursuant to the terms of this Agreement as Liabilities;

(ii) any inaccuracy in or breach of any representation, warranty, covenant or agreement of the Trustee and/or of York County contained in this Agreement;

(iii) any claim, cause of action, liability or obligation (actual or alleged) of any nature whatsoever arising out of, or relating to, the use or operation of the Hospital, or the

PET-EX016.0051

RECORD 004499

conduct of the business relating thereto, on or prior to the Closing Date; and

(v) any claim, cause of action, liability or obligation (actual or alleged) of any nature whatsoever of the Hospital arising out of or relating to any act or omission of the Hospital, or any of its agents, employees, Trustees or officers, occurring on or prior to the Closing Date, including, without limitation, any claim or cause of action arising out of or relating to any act of medical malpractice or battery, occurring on or prior to the Closing Date.

12.2. Claims Against York County and the Trustees. AMI and AMI Parent shall defend York County and the Trustees from and against any and all claims made against York County or the Trustees as a result of, or with respect to, any inaccuracy in or breach of any representation, warranty, covenant or agreement of AMI or AMI Parent contained in this Agreement.

12.3. Notice. In the event that any party hereunder shall receive any notice of any claim or proceeding against said party that, if successful, might result in a claim under Section 12 by said party, said party shall give the party upon whom a claim could be made under this Section 12 written notice of such claim or proceeding.

12.4. False Representation. No party hereto may bring any claim, cause of action or claim any liability or obligation against or from another party hereto arising out of a matter in which the moving party made a false representation or warranty hereunder whether by omission or commission.

Section 13. Right of Set-Off.

AMI shall have the right to set off against any and all rental payments of AMI under the Lease any amount for which the Trustees and/or York County shall be liable to AMI and/or AMI Parent due to Section 12.1 hereof.

Section 14. Option to Purchase.

14.1. Grant of Option. Subject to the terms and conditions of this Section 14, AMI hereby grants to York County the right and option (the "Option") to purchase the land, buildings and all movable and fixed equipment (including, without limitation, all additions, expansions and renovations thereto) comprising at the time of the exercise of the Option, the Replacement Hospital, plus the land described in Exhibit 5.1(iii).

14.2. Term of Option. The Option shall be exercisable for two years commencing on the date which follows by five years the date on which the Replacement Hospital is opened to the public (the "Opening Date").

14.3. Exercise Price. The price at which the Option shall be exercised (the "Option Price") shall be determined as follows: from an amount equal to (x) the amount of Purchase Price plus the sum of all rental payments made under the Lease and Liabilities assumed and discharged by AMI pursuant to Section 5.3(a), plus (y) the aggregate amount of AMI's Investment in the Hospital (as defined in the next sentence) and AMI's Investment in the Replacement Hospital (as defined in the next sentence), adjusted as provided in the next paragraph, subtract an amount

equal to (z) the aggregate amount of the depreciation claimed by AMI and AMI Parent in their audited financial statements with respect to the Hospital and the Replacement Hospital and any movable and fixed equipment subject to the Option on the date of its exercise. The terms "AMI's Investment in the Hospital" and "AMI's Investment in the Replacement Hospital" shall mean the total cost of constructing and equipping the Hospital or the Replacement Hospital, as the case may be (and the total cost of all additions, expansions and renovations thereto), including, with respect to the said Hospitals, without limitation: (i) land acquisition costs (including, without limitation, brokerage fees and land carrying costs through completion, such as taxes and insurance), (ii) cost of providing necessary and appropriate utility service, (iii) costs of materials and fixed and movable equipment placed in service, (iv) grading, site preparation, paving and parking lot costs, (v) landscaping costs, (vi) labor costs, (vii) costs of surveys, (viii) costs of engineering, achitectural and other studies, (ix) architectural, engineering, legal, land appraisal and contractors' fees and charges, (x) financing costs (including, without limitation, construction and permanent financing costs and mortgage brokerage commissions) and (xi) all other costs and expenses reasonably attributable to construction. AMI shall give York County written notice as to the amount of its Investment in the Hospital and Investment in the Replacement Hospital within 90 days after the Opening Date.

PET-EX016.0054

RECORD 004502

The adjustment referred to in the immediately preceding paragraph shall be effected as follows: multiply the sum of the amounts referred to in clauses (x) and (y) by an amount equal to 75% of the quotient obtained by dividing a dividend consisting of the Consumer Price Index (as defined in the next sentence), expressed as a whole number, for the month immediately preceding the date of exercise by a divisor equal to the most recent Consumer Price Index published prior to the date of this Agreement, expressed as a whole number, for 1980 . For purposes of this Section 14.3 the term "Consumer Price Index" shall mean the Consumer Price Index (U.S. City Average) compiled by the United States Department of Labor, Bureau of Labor Statistics (or any successor to said Index which tracks substantially the same data). In the event the base year for purposes of said Index is changed, the aforementioned dividend and divisor shall be changed accordingly.

14.4. Manner of Exercise. To exercise the Option, York County shall give written notice to AMI and AMI Parent of its intention to do and specify the date of closing, which date shall be not less than 180 nor more than 360 days from the date such notice is mailed or delivered personally. Upon delivery of the Option Price, in cash or in the form of an official bank check drawn upon a bank having at least $100 millon in capital and assets, upon the date specified for the closing, AMI shall execute and deliver to York County a statutory warranty deed in the form attached hereto as Exhibit 14.4, which will convey to York County

PET-EX016.0055

RECORD 004503

an estate consisting of a fee simple in the Replacement Hospital building and the land on which it is located, subject to a covenant running with the land that neither such land nor such building shall for five years following such conveyance be sold, leased or otherwise disposed of to any person, firm, partnership or corporation organized for profit.

14.5. Nontransferability. The option hereby granted to York County is nontransferable and nonassignable. Any attempted assignment, transfer or other disposition of the Option by York County shall be void and of no effect whatsoever.

Section 15. Employment.

15.1. Retention of Employees. On and as of the Closing Date, all employees who were on such date employed at the Hospital shall become employees of AMI. There will be no loss in status (i.e., job description, job classification, etc.) or seniority of York General Hospital employees when they become AMI employees. In addition, all York General Hospital employees will be transferred to AMI at the existing salary/pay scale.

15.2. Transfer of Hospital Service. From the Closing Date, the seniority of York General Hospital employees will be based upon their original date of hire at York General Hospital and those years of service will be carried forward and count toward years of service with AMI.

15.3. Retained Sick Leave and Vacation Time. On and as of the Closing Date, sick leave accumulated by York General Hospital employees will be transferred and honored by AMI. Employees will immediately begin accruing AMI sick leave in accordance with the formula set forth in Exhibit 15.4. In the event any sick leave time is needed, the AMI days will be utilized first. When the AMI days have been exhausted, the days earned through prior employment at York General Hospital will be available as a reserve. With respect to each employee who shall have at least one year's accrued vacation time (that is, 2 or 3 weeks) on the Closing Date, (i) the Hospital shall pay to such employee immediately prior to the Closing Date an amount (computed by York General Hospital utilizing usual formulas for that purpose) equal to the excess (if any) of such employee's accrued vacation time as of the Closing Date over one year's accrued vacation time, and (ii) AMI shall pay and/or credit (as applicable) such employee's one year's accrued vacation time on the Closing Date as follows:

(a) Such employee may use all or any portion of such accrued vacation time during the first year (365 days) after the Closing Date;

(b) If such employee's employment with AMI terminates during the first year after the Closing Date, then AMI shall pay to such employee immediately following such termination of employment the portion (if any) of such

PET-EX016.0057

RECORD 004505

accrued vacation time that has not been used prior to such termination of employment; and

(c) If such employee's employment with AMI does not terminate during the first year after the Closing Date, then AMI shall pay to such employee immediately after the first anniversary of the Closing Date the portion (if any) of such accrued vacation time that has not been used prior to said anniversary.

With respect to each employee whose accrued vacation time on the Closing Date is less than one year's accrual, AMI shall pay and/or credit (as applicable) such employee's accrued vacation time in accordance with the provisions of subparagraphs (a), (b) and (c) above.

15.4. AMI Benefits. On and as of the Closing Date, AMI will offer the following benefit plans to all York General Hospital employees based on their total length of service as set forth in Section 15.5 below: Medical Plan, Hospital Discount, Dental Plan, Life Insurance, Business Travel Accident Insurance, Pension Plans, Stock Purchase Plan, Holidays, Vacation, and Sick Leave. A detailed description of each of the AMI benefit plans is set forth in Exhibit 15.4. After closing AMI will provide to the York General Hospital employees and Replacement Hospital employees employee benefits which do not vary materially from those available generally in its hospitals in the United States.

15.5. Eligibility for Participation in AMI Benefit Plans. From and after the Closing Date, each York General Hospital employee

PET-EX016.0058

RECORD 004506

shall be eligible for participation in AMI benefit plans, as enumerated and described in Exhibit 15.4, based upon the total of his York General Hospital and AMI lengths of service as follows:

(a) Such employee will be covered by, and will be eligible for participation in, all AMI benefit plans set forth in Exhibit 15.4, other than the AMI Pension Plan and the AMI Income Protection Plan, on the Closing Date.

(b) If such employee has at least one year of service with York General Hospital as of the Closing Date, he will be eligible for participation in the AMI Pension Plan on the Closing Date. If such employee has less than one year of service with York General Hospital as of the Closing Date, he will be eligible for participation in the AMI Pension Plan on the date that the total of his service with York General Hospital and AMI equals one year.

(c) For purposes of determining such employee's benefits under each AMI benefit plan and (if such AMI benefit plan is the AMI Pension Plan or other plan requiring vesting) his vesting in such benefits, his employment with York General Hospital since his original date of hire by York General Hospital will be taken into account as if such employment with York General Hospital had been employment with AMI; provided, however, that his accrual of benefits under the AMI Pension Plan will be based upon his AMI length of service

commencing on or after the Closing Date.

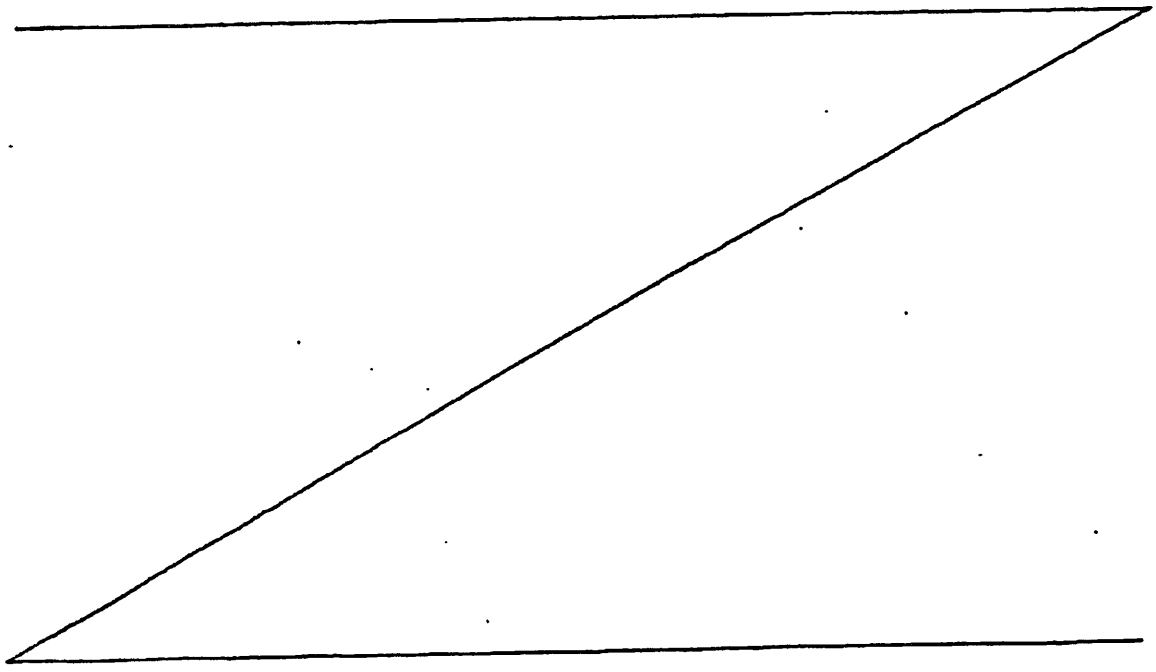
(d) Such employee shall be provided with long term disability and dependent life insurance benefits from and after the Closing Date as provided in Section 15.6.

15.6. Availability of Certain Group Disability and Life Insurance Plans. AMI shall use its best efforts to make available to all of its employees a plan providing long-term disability benefits for such employees and a plan providing life insurance benefits on the lives of their dependents. Each such plan's benefits shall be provided through an insurance policy issued by an insurance company qualified to do business in South Carolina and whose premiums are determined on a group basis. Each such plan may provide that the premiums on the insurance policy providing the benefits thereunder shall be paid by participating employees through payroll deductions, except to the extent that AMI shall elect to pay some or all of such premiums itself. AMI shall make such plans available to its employees on the Closing Date. AMI shall use its best efforts to (i) make available plans having contribution and benefit levels, conversion options and other elections and features that are competitive with industry standards and are suitable to the needs of AMI's employees and their dependents, as such standards and needs may change from time to time, and (ii) otherwise administer such plans in the best interests of its employees and their dependents and without charge (except as hereinabove provided with respect to premiums paid by employees). Insofar as is practicable, the plan

PET-EX016.0060

RECORD 004508

providing long-term disability benefits shall provide at least the benefits currently being provided under the "AMI Income Protection Plan" currently offered by AMI Parent and affiliated companies to certain non-hospital and hospital employees, except that participation shall not be so limited and shall be available to all AMI employees. Nothing in this Section 15.6 shall relieve AMI of the obligation of providing its employees with any employee benefit plan to be provided by AMI from time to time to its employees pursuant to Section 15.4 even though such employee benefit plan shall provide benefits similar or identical to the benefits under the long-term disability plan or the dependent life insurance plan provided for in this Section 15.6.



Section 16. Miscellaneous.

16.1. Binding Effect. This Agreement shall inure to the benefit of and shall be binding upon York County, the Trustees, AMI and AMI Parent and their respective successors and assigns including, without limitation, any future County Council of York County.

16.2. Governing Law. This Agreement shall be deemed to be made in, and in all respects shall be interpreted, construed and governed by and in accordance with, the laws of the State of South Carolina.

16.3. Headings. The section and paragraph headings contained in this Agreement are for reference purposes only and shall not affect in any way the meaning or interpretation of this Agreement.

16.4. Notices. All communications provided for hereunder shall be in writing and shall be deemed to be given when delivered in person or deposited in the United States mail, first class, registered or certified, return receipt requested, with proper postage prepaid and

(a) If to AMI or AMI Parent, addressed to:

American Medical
6400 Powers Ferry Road
Atlanta, Georgia 30339
Attention: Mr. Robert Bolhman

(b) If to York County, addressed to:

County Manager
P. O. Box 66
York, South Carolina 29745
Attention: J. E. Klugh

PET-EX016.0062

RECORD 004510

(c) If to the Trustees of the Hospital, addressed to:

Chairman, Board of Trustees, York General Hospital
101 Sedgewood Drive
Rock Hill, South Carolina 29730
Attention: Dwight Thomas

or at such other place or places or to such other person or persons as shall be designated in writing by the parties hereto.

16.5. Survival of Representations. All the representations, warranties, covenants and agreements contained in this Agreement shall survive the Closing Date, except for those representations and warranties contained in Section 8.6, which shall survive the signing of this Agreement for the 90 day period provided therein. No performance or execution of this Agreement in whole or in part by any party hereto, no course of dealing between or among the parties hereto or any delay or failure on the part of any part in exercising any rights hereunder or at law or in equity, shall operate as a waiver of any rights of such party, except to the extent expressly waived in writing by such party hereto.

16.6. Limitation of Sellers' Warranties. The representations, warranties, covenants and agreements of the Sellers contained in this Agreement are expressly in lieu of all representations, warranties, covenants, and agreements, whether implied, express or otherwise, of the Sellers outside this Agreement, and the Sellers make no warranties and representations which extend beyond those expressly contained in this Agreement. The Sellers specifically make no warranties of merchantability or fitness as to particular use.

PET-EX016.0063

RECORD 004511

16.7. Guaranty by AMI Parent. AMI Parent hereby jointly and severally guarantees all representations, warranties, agreements, covenants and obligations of AMI contained in this Agreement. AMI Parent specifically guarantees the performance by AMI of all covenants and obligations contained in the Lease which is attached hereto as Exhibit 1.0. AMI Parent further agrees to execute and deliver to Sellers a written guaranty agreement substantially in the form attached hereto as Exhibit 1.1.

16.8. Taxes. The Sellers shall pay all taxes, including without limitation, any sales, use, transfer, excise or property taxes, that are levied as a result of the sale, conveyance, assignment, transfer or delivery of the Assets or as a result of the Lease, pursuant to this Agreement; said taxes, if any, to be paid out of the proceeds of the Purchase Price.

16.9. Exhibits. The following exhibits are attached hereto and are hereby made a part of this Agreement by this reference:

Exhibit 1.0	Lease
Exhibit 1.1	Guaranty Agreement
Exhibit 5.1(i)	Schedule of Movable Equipment
Exhibit 5.1(ii)	Land Description of Replacement Hospital
Exhibit 5.1(iii)	Land Description of Land Adjacent to Exhibit 5.1(ii)
Exhibit 5.1(iv)	Schedule of Certain Contracts
Exhibit 5.3(a)(i)	Hill-Burton Claim
Exhibit 5.4(b)	Allocation of Purchase Price
Exhibit 7.1	Bill of Sale
Exhibit 7.2	Assumption Agreement
Exhibit 8.6	Financial Statements
Exhibit 8.7	Schedule of Leased and Owned Property
Exhibit 8.9	Schedule of Inventory
Exhibit 8.10	Schedule of Post Date Occurrences
Exhibit 8.11	Schedule of Certain Major Contracts
Exhibit 8.12	Litigation
Exhibit 8.13	Compliance with Laws
Exhibit 11.2	Notice of Closing

PET-EX016.0064

RECORD 004512

Exhibit 11.5	Indian Claims Exceptions
Exhibit 14.4	Form of Deed
Exhibit 15.4	Schedule of AMI Benefits Plans and Classification of Employees

Exhibits required to be provided to the Buyer shall be provided within thirty (30) days after the execution of this Agreement, and the Buyer must advise the Sellers within ten (10) days thereafter as to their acceptability.

16.10. Expenses. Each of the parties hereto shall bear such party's own expenses in connection with the preparation and execution of this Agreement and in connection with the transactions contemplated hereby.

16.11. Counterparts. This Agreement may be executed in two or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

16.12. Laws. Any act or statute specifically referred to herein by name shall be deemed to include any regulations thereunder, as well as any amendments thereto.

16.13. Severability. Each and every provision of this Agreement is severable and the invalidity of one or more such provisions shall not, in any way, affect the validity of this Agreement or any other provision hereof.

16.14. Cumulative Rights and Remedies. Any right, power or remedy provided under this Agreement to any party hereto shall be cumulative and in addition to any other right, power or remedy provided under this Agreement or existing in law or in equity (including, without limitation, the remedies of injunctive

PET-EX016.0065

RECORD 004513

relief and specific performance).

16.15. Third Party Beneficiaries. There are no third party beneficiaries of this Agreement.

16.16. Prohibition Against Assignment. Neither AMI nor AMI Parent may assign or transfer any of its rights and obligations under this Agreement without the express written consent of the County. Any attempt at such an assignment or transfer by AMI or AMI Parent shall be utterly void and of no effect whatsoever.

16.17. Entire Agreement. This Agreement (including all Exhibits hereto) is intended by the parties hereto to be the final expression of their agreement and is the complete and exclusive statement of the terms thereof notwithstanding any representation or statement to the contrary heretofore made. The parties understand that there are no representations and warranties given one to the other except as so stated herein and that warranties of merchantability are not intended to be given. This Agreement may be modified only by a written instument signed by authorized representatives of each of the parties hereto.

IN WITNESS WHEREOF, the parties hereto have caused this

Agreement to be executed under seal as of the date first above written.

AMERICAN MEDICAL INTERNATIONAL, INC.

(CORPORATE SEAL)

BY Robert L Ballinger

ATTEST: Thomas C. Dunlap Jr
Secretary

Title: Vice-Pres

AMISUB OF SOUTH CAROLINA, INC.

(CORPORATE SEAL)

BY Robert L Ballinger

ATTEST: Thomas C. Dunlap Jr
Secretary

Title: Pres.

TRUSTEES OF YORK GENERAL HOSPITAL

(CORPORATE SEAL)

BY Dwight L Thomas

ATTEST:
Mary Branche
Secretary

Title: Chairman

YORK COUNTY, SOUTH CAROLINA

(CORPORATE SEAL)

BY J. Gary Williams
Chairman of the County Council
of York County, South Carolina

ATTEST:

J. E. Klugh
J. E. Klugh, County Manager

SIXTH ADDENDUM TO AGREEMENT
BY AND AMONG
AMERICAN MEDICAL INTERNATIONAL, INC.,
AMISUB OF SOUTH CAROLINA, INC., AND
YORK COUNTY, SOUTH CAROLINA

August 25, 1995

TABLE OF CONTENTS

Section		Page
1	Amendments to Sections 3 and 4	3
	Section 3. Operation of the Hospital; Ambulance Service, Indigent Care and Related Matters	3
	3.1 Hospital Services	3
	(a) General	3
	(b) New Services and Facilities	3
	(c) Emergency Room Service	6
	(d) Medical/Surgical Beds	7
	(e) Pricing	8
	(f) Trauma Center	10
	3.2 Ambulance Service	10
	3.3 Indigent Care/Indigent Assistance Program	14
	3.4 Medical Care for County Prisoners and Inmates	20
	3.5 Rural Healthcare Clinics	20
	3.6 Integrated Health Care Delivery System	21
	3.7 Reinvestment in York County Medical Services	22
	3.8 Physician Recruitment and Retention; Medical Staff; Staff Privileges	23
	3.9 Local Hospital Board	24
	3.10 Hospital Advisory Board	26
	3.11 AMI Scholarship Program	27
	3.12 Continuing Education	28
	(a) York Technical College Programs . .	28
	(b) Winthrop University Programs . . .	28
	(c) AMI Programs	28

PET-EX016.0069

RECORD 004517

TABLE OF CONTENTS (Continued)

Section		Page
	3.13 Annual Report; Other Information . . .	29
	3.14 Right of First Refusal; Assumption of Agreement by Successors	32
	3.15 Licensure; Permits	35
	3.16 Complaint Resolution	35
	3.17 Review and Modification	37
	Section 4. Default; Remedies; Term of Agreement	38
	4.1 Events of Default Defined	38
	4.2 Remedies on Default	42
	4.3 Purchase of Hospital on Certain Defaults	42
	(a) Notice	42
	(b) Purchase Price	43
	(c) Conveyance of Hospital	43
	(d) Failure to Close	44
	(e) Non-Transferability	45
	(f) Adjusted Investment	45
	(g) Fair Market Value	48
	4.4 Term of Agreement	51
2	Amendment to Address in Section 16.4	51
3	Amendments to Options in Section 14	51
4	AMI Parent Guaranty	52
5	Ratification of Agreement	52
6	Definition of Terms	52

PET-EX016.0070

RECORD 004518

SIXTH ADDENDUM TO AGREEMENT
BY AND AMONG AMERICAN MEDICAL INTERNATIONAL, INC.,
AMISUB OF SOUTH CAROLINA, INC., AND
YORK COUNTY, SOUTH CAROLINA

THIS SIXTH ADDENDUM TO AGREEMENT made and entered into this 25th day of August, 1995, by and among AMERICAN MEDICAL INTERNATIONAL, INC., a corporation organized under the laws of the State of Delaware (herein referred to as "AMI Parent"), AMISUB OF SOUTH CAROLINA, INC., a corporation organized under the laws of the State of South Carolina (herein referred to as "AMI"), and YORK COUNTY, SOUTH CAROLINA, a political subdivision of the State of South Carolina (herein referred to as "York County"),

W I T N E S S E T H:

WHEREAS, AMI Parent, AMI, the Trustees of York General Hospital and York County entered into an agreement on or about December 8, 1980 (herein referred to as the "Prior Agreement"), pursuant to which the Trustees of York General Hospital and York County leased and sold certain property and assets to AMI Parent and its subsidiary corporation, AMI, for the operation of a hospital in York County, South Carolina; and

WHEREAS, York County has succeeded to all rights and interests and assumed all liabilities of the Trustees of York General Hospital under the Prior Agreement; and

WHEREAS, AMI Parent and AMI constructed and operate a hospital in York County, South Carolina, known as Piedmont

Medical Center (the "Hospital"), pursuant to the terms and conditions of the Prior Agreement; and

WHEREAS, the Prior Agreement has been amended and modified by a First Addendum thereto dated June 16, 1989, a Second Addendum thereto dated April, 1992, a Third Addendum thereto dated April, 1995, a Fourth Addendum thereto dated June, 1995, and a Fifth Addendum thereto dated as of July 1, 1995 (the Prior Agreement, as amended and modified, being referred to herein as the "Agreement"); and

WHEREAS, York County has performed its obligations under the Agreement; and

WHEREAS, in order to induce York County to waive the purchase option granted in the Prior Agreement, as modified by the five prior Addenda thereto, and in order to ensure the continuing provision of high quality, cost effective health care to the citizens of York County without cost to York County, AMI and AMI Parent have proposed to undertake various obligations expanding upon, or in addition to, those contained in Sections 3 and 4 of the Prior Agreement; and

WHEREAS, certain of the provisions of Sections 3 and 4 of the Prior Agreement are no longer applicable, having been satisfied by performance or superseded by the passage of time and changing circumstances;

NOW, THEREFORE, for and in consideration of the premises, the mutual promises contained herein, the sum of ten dollars ($10.00) paid by each party to the other, and of other good and valuable consideration, the receipt, adequacy and sufficiency of which is hereby acknowledged by each party

PET-EX016.0072

RECORD 004520

hereto, the undersigned parties, intending to be legally bound, hereby agree as follows:

Section 1. Sections 3 and 4 of the Agreement are hereby amended to read as follows:

"Section 3. Operation of the Hospital; Ambulance Service, Indigent Care and Related Matters. The parties hereto agree that it is their objective under and through this Agreement to establish and make available to the citizens of York County a secondary/tertiary medical facility serving as a regional medical center for upstate South Carolina. In order to achieve this objective, AMI undertakes the following commitments in connection with the operation of the Hospital and the provision of health care services in York County:

3.1. Hospital Services. (a) General. During the term of this Agreement, AMI shall provide in York County at a minimum (i) all health care services previously provided by the former York General Hospital, (ii) all health care services authorized in the Certificate of Need for the Replacement Hospital and (iii) all other services required to be provided by this Agreement.

(b) New Services and Facilities. In addition to the services and related facilities set forth in 3.1(a), above, and subject to required regulatory approval, the granting of which will be pursued expeditiously in good faith by AMI, AMI agrees to provide the following services and/or complete the following facilities on or before the respective dates set forth below:

(i) Expansion of cardiac services and installation of cardiovascular surgical services including the

construction of two operating suites, perfusion space, anesthesia space, expanded recovery room space, and adequate support and office space at a cost of approximately $3,900,000, to be completed on or about December 31, 1997, or within twenty-four (24) months of receipt of a Certificate of Need therefor.

(ii) A second heart catheterization laboratory at a cost of approximately $1,450,000, to be completed on or about December 31, 1997, or within twenty-four (24) months of receipt of a Certificate of Need therefor.

(iii) Neurosurgical services facilities including adequate operating room(s) and related equipment at a cost of approximately $3,500,000, to be completed on or about July 31, 1998, or within thirty-two (32) months of receipt of a Certificate of Need therefor.

(iv) Intensive care and monitored bed capacity (rooms) adequate to support the development of cardiovascular and neurosurgical services at a cost of approximately $3,800,000, to be completed on or about December 31, 1997, or within twenty-four (24) months of receipt of a Certificate of Need therefor.

(v) A new hospital emergency room with adequate treatment bays to allow for ambulance cases, emergent walk-ins, non-emergent "fast track", and private physician exam space at a cost of

approximately $3,000,000, to be completed on or about April 30, 1997, or within sixteen (16) months of receipt of a Certificate of Need therefor.

(vi) A free-standing psychiatry pavilion for up to twenty-six (26) patients to improve clinical services and provide for outpatient psychiatric programming at a cost of approximately $2,400,000, to be completed on or about April 30, 1997, or within sixteen (16) months of receipt of a Certificate of Need therefor.

(vii) Expansion of the clinical laboratory at a cost of approximately $200,000, to be completed on or about December 31, 1996.

(viii) Complete facility renovations (decor) on 4B nursing unit (39 beds) at a cost of approximately $160,000, to be completed on or about December 31, 1996.

(ix) Equipment (technology) upgrades:

(A) Purchase or lease of a CT scanner at a cost of approximately $860,000, to be acquired on or about February 28, 1996.

(B) Purchase or lease of nurse call system at a cost of approximately $350,000, to be acquired on or about January 31, 1997.

(C) Purchase laboratory hematology analyzer at a cost of approximately $150,000, to be acquired on or about February 28, 1996.

(D) Purchase vascular laboratory ultrasound at a cost of approximately $222,200, to be acquired on or about February 28, 1996.

(c) Emergency Room Service. AMI shall provide at no expense to York County an emergency room sufficiently staffed on a twenty-four hour basis by qualified physicians who will administer emergency medical care. Care to persons with emergency medical conditions will be furnished at Piedmont Medical Center to all parties regardless of their ability to pay or place of residence. AMI will continue the Hospital's current program of providing emergency room services to Winthrop University students. Emergency room physicians and ambulance service staff shall coordinate their respective functions in order to insure the highest quality life-saving skills. For purposes of this Section 3.1(c), the term "emergency medical condition" shall have the meaning ascribed thereto by the Federal Emergency Medical Treatment and Active Labor Act, 42 U.S.C. Section 1395dd and the corresponding regulations thereunder, 42 C.F.R. Section 489.24(b), or any successor statutory and/or regulation provisions, such definition currently being as follows:

Emergency medical condition means-

(i) A medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain, psychiatric disturbances and/or symptoms of substance abuse) such that the absence of immediate medical attention could reasonably be expected to result in-

(A) Placing the health of the individual(or, with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy;

(B) Serious impairment to bodily functions; or

(C) Serious dysfunction of any bodily organ or part; or

(ii) With respect to a pregnant woman who is having contractions-

(A) That there is inadequate time to effect a safe transfer to another hospital before delivery; or

(ii) That transfer may pose a threat to the health or safety of the woman or the unborn child.

Such term shall include, at a minimum, those conditions listed in Classes I, II and III of the current Triage Criteria of Piedmont Medical Center attached hereto as Schedule 3.1(c). Each person who comes to the emergency room at the Hospital seeking care shall be afforded an appropriate medical screening to determine whether that person has an emergency medical condition, and each such person shall be classified as to the level of severity of condition in accordance with the Hospital's triage criteria. AMI's agreement to provide emergency care at no cost to York County and without regard to a patient's ability to pay shall not preclude AMI's seeking or obtaining payment or reimbursement from any other source which may be available therefor.

(d) Medical/Surgical Beds. AMI shall maintain at least two hundred forty-eight (248) medical/surgical beds and twenty (20) psychiatric beds at the Hospital. On or before May 31, 1999, all medical/surgical beds in the Hospital shall be in

private rooms. For purposes of this Section 3.1(d), the term "medical/surgical beds" means all licensed beds at the Hospital other than psychiatric, rehabilitation, sub-acute, intensive care or general observation beds. Within one hundred eighty (180) days following any date on which the daily census at the Hospital has averaged eighty-five percent (85%) of the then available bed capacity at the Hospital for a period of twelve (12) months, AMI shall prepare and present to York County an estimate of future medical/surgical bed requirements at the Hospital necessary to comply with the terms of this Agreement. In the event such estimate indicates that patient demand will exceed available bed capacity, such estimate shall be accompanied by a proposal, including a schedule, for the filing of a request for a certificate of need and/or such other action as shall be necessary to provide such bed capacity as shall be shown to be required in such estimate, at the time such estimate shall project such capacity shall be needed.

(e) Pricing. AMI acknowledges that, in addition to the securing of the highest quality health care for the citizens of York County, a major objective of York County in entering into this Agreement is that such care be provided on a cost-effective basis at prices favorably comparable to those paid for similar services provided by comparable acute-care hospitals in the same general geographical area. York County acknowledges that the pricing of, and charging and reimbursement for, health care services and the market therefor and other factors relating thereto, including the reporting thereof, is a complex process and but one of a

PET-EX016.0078

RECORD 004526

number of related major management responsibilities of the governing body of AMI and the administration of the Hospital. Both parties understand that cost-effective, competitive pricing for services provided at the Hospital is essential to the provision of quality health care services to the citizens of York County, to the continuing economic well being of the Hospital and to the ability of AMI to meet its obligations hereunder. AMI agrees to exert every effort to so conduct its operations and finances to maintain prices for services at the Hospital at reasonable, competitive levels vis a vis other hospitals in the "peer group" (as defined in Section 3.13(a)(xii) hereof) for which Medpar pricing information is provided pursuant to such Section 3.13(a)(xii). In the event such pricing information shall show that the average charge per case by the Hospital for "All Product Lines" is the highest in the peer group, AMI shall, within twelve (12) months following the delivery of such information to York County, present to York County, and implement a plan reasonably expected to fix or reduce its costs and/or charges for services such that the average charge per case for All Product Lines at the Hospital will be less than the highest in such peer group. If such average charge remains the highest in the peer group at the end of the second Medpar reporting period following the reporting period which first showed the Hospital's having the highest average charge, AMI shall not increase any charges for services at the Hospital until such time as there have been delivered to York County reports provided pursuant to Section 3.13(a)(xii) hereto which show

the Hospital's average charge per case for All Product Lines being less than the highest of the peer group.

(f) Trauma Center. AMI agrees to obtain level 3 trauma center designation by July 31, 1996, subject to regulatory approval.

3.2. Ambulance Service. (a) AMI shall provide ambulance service at no expense to York County, which ambulance service shall respond to calls within the geographical limits of York County on a twenty-four hour basis, and which shall furnish transportation by ambulance to any hospital operating within the geographic limits of York County and all counties contiguous to York County. The skill levels of the staff and the equipment of the ambulance service shall be maintained in such a manner as to enable the service to provide "advanced life support" as defined in South Carolina Department of Health and Environmental Control Regulation Number 61-7, Section 306, as amended from time to time, or any successor provision of law or regulation. The principal objective of such service shall be to meet the needs of all citizens of York County rather than the sole needs of AMI or the Hospital. AMI shall operate the service in such a manner so as not to diminish the level of services presently available within York County or as required by this Agreement. The parties hereto understand that York County, in executing this Agreement, does not grant unto AMI an exclusive franchise to operate an ambulance service in York County; York County agrees that it will not grant an exclusive franchise to operate ambulance service in York County to any other person or entity. AMI shall not discontinue, abolish, diminish or

subcontract for ambulance service without the express written approval and consent of the York County Council.

(b) On or before April 1, 1996, AMI shall provide a second ambulance, with appropriate support facilities and staff, in western York County, such ambulance to be based in the City of York. Thereafter, AMI agrees to maintain at least two (2) ambulances based in western York County, staffed to provide advanced life support, twenty-four (24) hours a day, seven (7) days a week. When the population of western York County exceeds 47,500, AMI shall provide an additional quick response vehicle to serve western York County; when such population exceeds 57,500, AMI shall replace such quick response vehicle with an additional ambulance. Thereafter, AMI shall continue to provide an additional quick response vehicle with each population increase of 15,000 persons following the provision of an ambulance, and shall replace such quick response vehicle with an ambulance with each population increase of 10,000 persons following the provision of such quick response vehicle.

(c) AMI agrees to maintain at least four (4) ambulances and one (1) quick response vehicle based in eastern York County (with at least one (1) of such ambulances being based in the Fort Mill area) staffed to provide advanced life support, twenty-four (24) hours a day, seven (7) days a week. When the population of eastern York County exceeds 131,500, AMI shall provide an additional quick response vehicle to serve eastern York County; when such population exceeds 146,500, AMI shall replace such quick response vehicle with an additional ambulance. Thereafter, AMI shall continue to

provide an additional quick response vehicle with each population increase of 20,000 persons following the provision of an ambulance, and shall replace such quick response vehicle with an ambulance with each population increase of 15,000 persons following the provision of such quick response vehicle.

(d) AMI agrees to cooperate and coordinate with York County and the rescue squads operating in York County to determine the most cost effective, response oriented network of emergency medical care in York County to the end of maintaining response times for emergency care as low as possible. AMI agrees to so provide ambulance service such that average annual response times for ambulance service shall not be more than twelve (12) minutes for eastern York County, which shall, for purposes of this response provision include Newport, Bethesda, Oakdale, Tega Cay, Riverview, Flint Hill, Fort Mill and Lesslie Fire Districts and the City of Rock Hill, and not more than twelve (12) minutes for the City of York; not more than eighteen (18) minutes for the Clover/Lake Wylie area, which for purposes of this response provision shall include the Clover and Bethel Fire Districts; and not more than twenty (20) minutes for the western York County area, which for purposes of this response provision shall include the Bethany, Smyrna, Hickory Grove, Bullock Creek, Sharon, and McConnells Fire Districts and that portion of the York Fire District not encompassed within the corporate limits of the City of York, and the remainder of the western York County area. For purposes of this paragraph (d), "response time" means the period of time from receipt of a call by an

AMI operated unit to the arrival on the scene of the emergency by an AMI operated ambulance. Response times shall be established by the records maintained by York County for emergency medical service in the County. In the event any report delivered to York County pursuant to the provisions of Section 3.14(b)(ix) hereof, or other information available to York County, shall show noncompliance with any of the maximum average response times imposed by this paragraph (d), AMI shall, within six (6) months of the delivery of such report, provide York County an action plan to reduce such response time or times to comply with this paragraph (d). AMI shall implement such plan and shall so modify and/or operate its emergency response system such that monthly average response times shall meet the time limitations of this paragraph (d) not later than the end of the sixth (6th) month following delivery of such plan.

(e) For purposes of establishing population levels pursuant to this Section 3.2, the term "eastern York County" shall mean the geographical areas of York County so designated on the map appearing as Schedule 3.2(e)(1) attached hereto as lying on the eastern side of a line passing through York County at 81 degrees, 10 minutes west longitude, and the term "western York County" shall mean the geographical areas of York County so designated on the map appearing as Schedule 3.2(e)(1) attached hereto as lying on the western side of a line passing through York County at 81 degrees, 10 minutes west longitude. Response times for ambulance service pursuant to this Section 3.2 shall be as defined in Section 3.2(d) above and the respective geographical areas of York County for

which response times are designated under this Section 3.2 shall mean the geographical areas of York County so designated on the map appearing as Schedule 3.2(e)(2) attached hereto.

3.3. Indigent Care; Indigent Assistance Program. (a) During the twelve-month period ending May 31, 1996, AMI shall provide, at no cost to York County, medical care at Piedmont Medical Center to indigent residents of York County in an amount (based on AMI's schedule of rates and charges in effect from time to time) not less than Four Hundred Seventy-Five Thousand Dollars ($475,000). Thereafter, adjustments to such amount shall be made at the end of the initial twelve-month period and each subsequent twelve-month period (the "Adjustment Date(s)") as follows:

(i) The index used for computing the adjustment is the "Market Basket Index" as defined in Section 44-6-5, Code of Laws of South Carolina, 1976, as from time to time amended, or any successor or replacement provision of law, currently defined as the index used by the federal government on January 1, 1986, to measure the inflation in hospital inpatient prices for Medicare reimbursement. If the Market Basket Index ceases to be calculated in substantially the same manner, a similar Market Basket Index or some similar index must be developed by the parties using substantially the same methodology as used by the federal government in calculating the Market Basket Index to measure inflation in hospital inpatient prices for Medicare reimbursement, and such substantially similar index shall be used by the

parties thereafter in the administration of this Agreement.

(ii) The percentage for the adjustment at the end of the initial twelve-month period shall be determined by dividing the Market Basket Index for the date nearest the initial Adjustment Date by the Market Basket Index for July 1, 1995. The percentage for the Adjustment at the end of each subsequent twelve-month period shall be determined by dividing the Market Basket Index for the date nearest the current Adjustment Date by the Market Basket Index for the immediately preceding Adjustment Date.

(iii) The initial adjustment shall be computed by multiplying the sum of Four Hundred Seventy-Five Thousand Dollars ($475,000) by the percentage determined pursuant to (ii), above. This adjustment and each subsequent adjustment shall produce an adjusted amount which shall continue until the next Adjustment Date. Each subsequent adjustment shall be computed by multiplying the adjusted amount for the immediately preceding twelve-month period by the percentage determined pursuant to (ii), above, for the current Adjustment Date.

The calculations required by this paragraph (a) shall be made by AMI and, absent manifest error, shall be binding on the parties hereto. York County may audit such information for compliance with the terms and provisions of this Agreement. The provisions of this paragraph (a) shall not limit AMI's obligation to provide emergency care to indigent persons at Piedmont Medical Center, notwithstanding that the minimum

dollar amount of indigent care services required by this paragraph (a) shall, at any time, have been equaled or exceeded by AMI.

(b) AMI agrees to assume responsibility for payment of any amounts otherwise payable by York County to, or with respect to, the South Carolina Health and Human Services Finance Commission Medically Indigent Assistance Program, or any successor agency or program. AMI agrees, subject to any necessary governmental or regulatory approval, to serve, without cost to York County, as the designee of York County in connection with the administration of, and the making of payments to, such Program. In the administration of such Program, AMI shall comply with all applicable statutes and regulations relating thereto. AMI's obligation to fund and administer such Program shall continue only for so long as York County, absent the provisions of this paragraph (b), would otherwise be required to participate in, or make payments to, such Program. York County agrees to cooperate with AMI in order to ensure that payments by AMI under this paragraph (b) shall be no greater than payments otherwise required to be made by York County absent the provisions hereof.

(c) For purposes of this Agreement, the term "indigent" shall have the same meaning as the term "medically indigent" in Section 44-6-5(5), Code of Laws of South Carolina, 1976, as from time to time amended and the regulations relating to financial eligibility for the South Carolina Medically Indigent Assistance Program, including, particularly, Regulation Section 126-520,and any replacement or successor

provisions of the law or regulations, currently defined as meaning that such persons must meet all requirements for eligibility for assistance under the South Carolina Medically Indigent Assistance Program under regulations promulgated by the State Health and Human Services Finance Commission, Article 5, Subarticle 1, Regulations 126-500 through 126-520, and such persons must, at a minimum be:

(i) persons whose gross family income and size falls at or below the Federal Community Service Administration Guidelines and who meet certain qualifying criteria regarding real property allowance, qualifying services, residency requirements, and other sponsorship, and migrant or seasonal farmworkers who have no established domicile in any state for purposes of the State Medically Indigent Assistance Program; and

(ii) persons whose gross family income and size falls between one hundred (100) percent and two hundred (200) percent of the Community Service Administration Guidelines who meet certain other qualifying criteria regarding real property allowance, qualifying services, residency requirements and other sponsorship and whose medical bill is sufficiently large in relation to their income and resource to preclude full payment, so as to qualify for assistance under the South Carolina Medically Indigent Assistance Program. For purposes of this definition, the qualifying criteria for real property allowance shall permit ownership of up to fifty acres of farmland upon which the family has resided for at least twenty-five (25) years; and

(iii) persons who qualify for assistance through the South Carolina Medically Indigent Assistance Program under the non-financial eligibility requirements of Regulation 126-515 promulgated by the South Carolina Health and Human Services finance Commission; and

(iv) persons who qualify for assistance through the South Carolina Medically Indigent Assistance Program under the financial eligibility requirements of Regulation 126-520 promulgated by the South Carolina Health and Human Services Finance Commission.

(d) Any resident of York County who believes that he or she has been charged for medical services by AMI based upon an incorrect determination that such person is not indigent shall be entitled to have such determination reviewed by AMI and, following such review, shall be provided by AMI a written determination as to such person's qualification, or not, as "indigent", which determination shall advise the recipient thereof of his or her rights of appeal hereunder. Any person wishing to dispute any such written determination as to indigence with respect to the services required to be provided by AMI pursuant to subsection (a) of this Section 3.3, may, within thirty (30) days of the receipt thereof, but not after, seek further review of such determination by written request to the York County Community Health Board (or if such Board has been dissolved or merged into any other entity, to the Advisory Board established pursuant to Section 3.10 hereof) (the "Board"). Such request for review shall be accompanied by the written determination provided such person and by a written summary of the reasons why the person seeking review

believes that AMI's determination is incorrect. The Board shall provide AMI a copy of any request for review within five (5) business days of receipt thereof by the Board. AMI shall be entitled to provide the Board, in writing, with a response to any such request for review, including therewith such additional information or rebuttal as AMI feels appropriate. Not less than thirty (30) days following the receipt of a request for review hereunder, the Board shall provide AMI and the person seeking review a written determination as to such matter, either confirming or reversing the prior AMI determination as to indigence. A copy of such determination shall also be provided to York County. In connection with its review, the Board may, but shall not be required to, seek additional information, interview persons or conduct hearings in order to assist it in reaching a fair and accurate determination. AMI agrees to cooperate in any such fact finding efforts, and agrees to be bound by the determination of the Board. Pending the outcome of any review and/or appeal process hereunder, AMI shall suspend any and all actions with respect to the billing or collection of any amounts charged with respect to services provided to, or for the account of, the person seeking such review and/or appeal.

(e) Appeals with respect to determinations as to financial eligibility under the Medically Indigent Assistance Program shall be processed by AMI in accordance with South Carolina Code Regulation Section 126-510, as amended, or any replacement or successor provision of law or regulations. Copies of determinations by AMI as to the ineligibility of any person for such Program shall be provided to York County.

3.4. Medical Care for County Prisoners and Inmates.

(a) To the extent requested by York County, AMI shall provide inpatient and outpatient medical services to prisoners and inmates of the York County Prison and Detention Center (the "Detention Center") at a cost equal to the lesser of

(i) the least amount charged by AMI for services under any contract for managed care to which AMI is, at the time of the provision of such services, a party, or

(ii) AMI's cost of providing such services plus ten percent (10%) of such cost.

For purposes of this paragraph (a), "cost" shall be determined by utilizing the latest state-reported Medicaid cost-to-charge ratio as published by the South Carolina Health and Human Services Finance Commission.

(b) In order to assist York County in reducing its costs of operating the Detention Center, AMI agrees that it will, at the written request of York County, from time to time, sell to York County medical supplies for use at the Detention Center at AMI's cost if and to the extent permitted by law.

(c) AMI shall provide supervisory support to the staff of the Detention Center through the medical director of AMI's western York County urgent care center at no cost to York County.

3.5. Rural Healthcare Clinics. On or before December 31, 1996, AMI shall establish an urgent care/occupational medicine facility in western York County, subject to regulatory approval. Such facility shall provide urgent care for minor emergencies, occupational medicine, including physical examinations, occupational testing/screenings, care

PET-EX016.0090

RECORD 004538

for on-the-job injuries and other similar health care services. Such facility shall be open and staffed between the hours of 8:00 a.m. and 8:00 p.m., seven (7) days a week, with staffing being provided by not less than two (2) licensed physicians (at least one (1) of whom shall be at the facility during all operating hours) and adequate support staff. In order to ensure responsiveness to community needs by this facility, there shall be established an advisory committee comprised of one (1) member of York County Council, three (3) residents of York County Council Districts 2 and/or 3 (as constituted on the date of delivery of this Sixth Addendum) appointed by AMI from a list of not less than five (5) nominees named by York County Council and one (1) representative of AMI. Such committee shall meet no less often than quarterly to discuss the need for services in western York County, the manner in which the western York County urgent care facility is meeting such needs and any changes which might be necessary or advisable with respect to the types of services provided or the manner in which services are provided in order to better meet the needs of the residents of western York County. AMI agrees to take into consideration any recommendations or requests made by the advisory committee in connection with its operation of the urgent care facility and its planning with respect thereto and provide a timely written response to any such recommendation or request.

3.6. Integrated Health Care Delivery System. In order to better provide for the health care needs of the citizens of York County and to maintain competitiveness in a managed care

environment, AMI shall continue to expand the vertical integration of services into its health care delivery system, including such possible services as primary care, home care, ambulatory diagnostics, pain management, rehabilitation and occupational medicine, and the expansion of York Family Medicine in the Town of York to enable the rotation of specialists and sub-specialists in western York County.

3.7. Reinvestment in York County Medical Services. AMI agrees that in the period beginning June 1, 1995, and ending May 31, 1998, it will make investments in land or depreciable or amortizable property located in York County, South Carolina, in an aggregate amount not less than Twenty-Three Million ($23,000,000) Dollars, provided that in the event AMI shall be relieved from the obligation to provide any facility or service described in Section 3.1(b) hereof as a result of the inability to obtain any regulatory approval required therefor, such amount shall be reduced by the estimated cost of such facility or service as set forth in said Section 3.1(b). Thereafter, in each period of twelve (12) months beginning June 1 of a year and ending on May 31 of the next succeeding year, beginning with the twelve-month period starting June 1, 1998, it will invest in land or depreciable or amortizable property located in York County, South Carolina, used for the purpose of providing the services required by this Agreement, an amount which, when added to the amount so invested by AMI in the preceding two (2) such twelve (12) month periods, would make the average thereof equal to or greater than the greater of (i) $4,000,000 or, (ii) one hundred eight percent (108%) of the average of the amounts

PET-EX016.0092

RECORD 004540

shown on the financial statements of AMI as depreciation or amortization for property, plant and equipment located in York County for the preceding three (3) such twelve (12) month periods, provided that in no such twelve (12) month period shall the amount actually so invested be less than $1,500,000. Notwithstanding the foregoing, in the event AMI's earnings before depreciation and amortization, as shown in the financial statements of AMI for the twelve (12) month period in question, are less than $4,000,000, the amount required to be reinvested as herein provided during such period shall not exceed an amount equal to fifty percent (50%) of such earnings before depreciation and amortization. Accounting terms used in this Section 3.7 shall be given meaning and applied in accordance with generally accepted accounting principals; depreciation and amortization shall be determined in accordance with American Hospital Association or some other nationally recognized standard therefor.

3.8. Physician Recruitment and Retention; Medical Staff; Staff Privileges. (a) AMI recognizes that, in order to effectively perform its obligations hereunder, the recruitment and retention of qualified physicians is critical. In order to ensure the provision of the highest quality services and the range of services necessary to establish the Hospital as a regional medical center for upstate South Carolina, AMI will diligently pursue the identification and recruitment of qualified physicians and in connection with such recruitment and the relocation and retention of such physicians will provide such economic and other incentives and support as is

consistent with federal and state regulations relating to such matters.

(b) AMI shall at all times establish and maintain policies with respect to medical staff privileges at the Hospital encouraging and enabling any and all qualified, appropriately licensed physicians (i.e. individuals with an M.D. or D.O. degree), dentists and podiatrists to join the active or courtesy medical staff of the Hospital without restriction; provided that AMI may enter into exclusive contracts for Hospital-based services for radiology, anesthesiology, pathology, neonatology, cardiovascular surgery, neurosurgery and emergency medicine.

3.9. Local Hospital Board. (a) AMI covenants and agrees that on or before December 31, 1995, the Rules and Regulations of the Governing Board of Piedmont Medical Center (the "Rules and Regulations") shall be amended in the following respects:

(i) The first paragraph of Article II thereof relating to the Roles and Responsibilities of the Governing Board of the Hospital (the "Governing Board") shall be amended to read as follows:

> "The governing board has the authority and responsibility for ensuring proper organization of the institution's Medical Staff and for monitoring the quality of care provided under the auspices of the institution. The governing board is responsible for the assurance of quality patient care provided by the institution (including the provision of adequate and appropriate staffing, monitoring and reviewing replacement hospital

PET-EX016.0094

RECORD 004542

equipment, and recommendations for changing services, procedures, and product lines to take into account medical and technological developments and advancements; establishing mechanisms to assure and achieve and maintain high quality medical practice and patient care; and periodic review and recommendations concerning pricing for institution services, procedures, and product lines)."

(ii) Section 1 of Article III of the Rules and Regulations relating to the composition of the governing Board shall be amended to provide that, of the voting membership of the Governing Board, one of such members shall be a resident of western York County and another of such members shall be selected from a list of not less than three (3) nominees submitted by York County Council.

(b) AMI and AMI Parent covenant and agree that no changes (whether initiated by AMI, AMI Parent, the Governing Board or any other person) shall be made to the Rules and Regulations which have the effect of diluting or eroding the role, powers, authority, responsibilities, functions or duties of the Governing Board from those in existence as of July 31, 1995, as modified as hereinabove provided, without the prior written approval of York County, which approval, York County agrees, will not be unreasonably withheld.

(c) AMI and AMI Parent further covenant and agree in connection with the Governing Board that no removal of fifty percent (50%) or more of the members of the Governing Board within a six (6) month period shall be effected, unless prior thereto any such proposed removal shall have been discussed

directly between the President and Chief Operating Officer of Tenet and the Chairman of York County Council. The Chairman and Vice Chairman of York County Council shall be invited to attend any meeting of the Board of Directors of AMI at which any such removal was to be considered or acted upon. Any such meeting shall be held at a location in York County, South Carolina, with sufficient notice so as to provide reasonable opportunity for the Chairman and Vice Chairman at York County Council to be in attendance at such meetings. In the event of any such removal, the positions of any Governing Board members removed pursuant to any such action shall be filled within three (3) months following the date of any such removal.

3.10. Hospital Advisory Board. AMI shall maintain a board of hospital advisors (the "Advisory Board") consisting of twelve members. Four members of the Advisory Board shall be representatives of the medical staff of Piedmont Medical Center, four members of the Advisory Board shall be representatives of the community and four members of the Advisory Board shall be representatives of AMI. The medical staff representatives shall be the Chief of Staff, the Vice Chief of Staff, the Immediate Past Chief of Staff and the Secretary-Treasurer of the medical staff of the Hospital. The four AMI representatives shall be selected by AMI and shall include the chief executive officer of Piedmont Medical Center. The four community representatives shall be selected by York County Council. All members of the Advisory Board shall serve staggered terms of four years. The Advisory Board shall establish its own rules of operation and procedure. The purpose of the Advisory Board shall be to insure that AMI is

continuously apprised of community interest and to provide the appropriate interface between the Hospital and the York County community.

3.11. AMI Scholarship Program. In each year during the term of this Agreement, there shall be awarded by AMI contributions for medical scholarships for York County residents which shall be used for the pursuit of education in a field which shall be related to medical care. For the fiscal year ending May 31, 1996, the amount to be awarded shall be Twenty Thousand Dollars ($20,000). Thereafter, adjustments to such amount shall be made at the end of the initial twelve-month period and each subsequent twelve-month period (the "Adjustment Date(s)") as follows:

(i) The index used for computing the adjustment is the Consumer Price Index for All Urban Consumers published by the U.S. Department of Labor, Bureau of Labor Statistics (the "CPI").

(ii) The percentage for the adjustment at the end of the initial twelve-month period shall be determined by dividing the CPI for the date nearest the initial Adjustment Date by the CPI for June 1, 1996. The percentage for the Adjustment at the end of each subsequent twelve-month period shall be determined by dividing the CPI for the date nearest the current Adjustment Date by the CPI for the immediately preceding Adjustment Date.

(iii) The initial adjustment shall be computed by multiplying the sum of Twenty Thousand Dollars ($20,000) by the percentage determined pursuant to (ii), above.

This adjustment and each subsequent adjustment shall produce an adjusted amount which shall continue until the next Adjustment Date. Each subsequent adjustment shall be computed by multiplying the adjusted amount for the immediately preceding twelve-month period by the percentage determined pursuant to (ii), above, for the current Adjustment Date.

The calculations required by this Section 3.11 shall be made by AMI and, absent manifest error, shall be binding on the parties hereto.

3.12. Continuing Education. AMI shall continue and further the health care educational opportunities and programs of York General Hospital, which programs shall include, but not be limited to the following:

(a) York Technical College Programs. AMI will participate in the following medically-related programs currently offered by York Technical College:

(i) Medical Lab Technology;

(ii) Nursing (Associate Degree);

(iii) Operating Room Technician;

(iv) Radiologic Technology.

(b) Winthrop University Programs. AMI will continue to support and participate in the dietician and medical social services programs offered by Winthrop University.

(c) AMI Programs. AMI will provide programs for the continued improvement in educational and skill levels of its employees. To this end, AMI will

PET-EX016.0098

RECORD 004546

offer a variety of activities ranging from in-house seminars to programs of formal education presented by major universities. AMI will also provide programs of management training for hospital personnel, including administrators, directors of nursing, business office managers, and other hospital department heads.

3.13. Annual Report; Other Information. (a) On or before October 1 of each year beginning October 1, 1996, AMI shall provide to York County an annual report on the status of the Hospital, the state of its operations, its plans for the future, and its activities and progress in relation to its various undertakings pursuant to this Agreement. Such report shall include the following information:

(i) Annual financial statements of AMI for the fiscal year ending the preceding May 31, with a certificate as to the accuracy thereof by an officer of AMI Parent;

(ii) Actual depreciation on Hospital assets as reported to the Federal government in Medicare cost reports;

(iii) Calculations showing the amount required to be invested pursuant to Section 3.7 hereof and identified investments equalling or exceeding such amount;

(iv) Information concerning the number and nature of services provided to York County indigents and the cost of such services, and the amount of any payment to the Medically Indigent Care Program pursuant to Section 3.3 hereof;

(v) Services, administrative assistance and supplies provided in connection with the Detention Center pursuant to Section 3.4 hereof;

(vi) In addition to the information provided pursuant to (iii), above, a descriptive list of all equipment purchases for items having a cost basis in excess of $250,000;

(vii) Information relating to the number of patients served and the nature, level and scope of services provided in the Hospital emergency room;

(viii) Information as to physician recruitment activity;

(ix) Detailed information with respect to ambulance response times showing annual averages for each location;

(x) Information concerning the number of full-time employees at the Hospital for the preceding fiscal year;

(xi) Medicaid in-patient cost-charge ratios and Medicaid out-patient cost-charge ratios as reported to the South Carolina State Health and Human Services Finance Commission, division of Acute Care Reimbursement, annually;

(xii) The most recently reported Medpar information, summarized and shown on a comparative basis, on gross charges for cardiology, gynecology, medicine, neurology, oncology, orthopedics, psychiatry, pulmonary, surgery, urology, vascular surgery and all product lines, from the Medpar national data base with respect to a "peer group" comprising the Hospital and the following hospitals: Richland Memorial Hospital-Columbia, S.C., Carolinas

Medical Center-Charlotte, N.C., Providence Hospital-Columbia, S.C., Baptist Medical Center-Columbia, S.C., Spartanburg Regional Medical Center-Spartanburg, S. C., Mercy Hospital-Charlotte, N.C., Gaston Memorial Hospital-Gastonia, N.C., Presbyterian Hospital-Charlotte, N.C., and Mary Black Memorial Hospital-Spartanburg, S. C.;

(xiv) Information concerning number and type of beds at the Hospital for the preceding fiscal year;

(xv) Information as to contributions for medical scholarships and activities with respect to medical education during the prior fiscal year;

(xvi) The summary results of any community or physician surveys conducted by AMI with respect to the Hospital or any services provided by AMI hereunder;

(xvii) A copy of the most recently issued Medically Indigent Assistance Fund Annual Guidelines and Annual Report;

(xviii) The status of any matter required to be addressed hereunder by way of an action plan or remedial action to achieve compliance with any of the terms hereof;

(xix) The filing by or against AMI, AMI Parent or Tenet of any bankruptcy, insolvency or similar or related action under any state or federal bankruptcy law; and

(xx) The loss of any license permit or other regulatory or other approval relating to the operation of the Hospital or the provision of any services hereunder or the filing or pendency of any action by any health

care regulatory agency with respect to AMI, the Hospital or any service provided by AMI hereunder.

(b) AMI agrees to provide such other information as York County or the Advisory Board may from time to time reasonably request in order to verify information provided by AMI in order to determine compliance hereunder by AMI and enable them to meet their respective obligations hereunder or in connection herewith. York County agrees to notify AMI promptly of any request it receives for copies of information provided to York County or the Advisory Board pursuant to the provisions of this Section 3.13.

Section 3.14. Right of First Refusal; Assumption of Agreement by Successors. (a) Subject to the terms and conditions contained in this Section 3.14, York County is hereby granted a right of first refusal to purchase the Hospital. Except as provided in paragraph (b) hereof, in the event that an agreement for the sale of more than an eighty percent (80%) interest in (i) the Hospital or (ii) the voting securities of AMI, has, subject only to the provisions of this Section 3.14, been entered into, written notice thereof shall be provided to York County. Such notice shall set forth the identity of the proposed purchaser, the interest proposed to be conveyed and the consideration, or, if the consideration is other than cash, the fair market value of the consideration, allocable to the Hospital in the proposed transaction. York County shall have forty-five (45) days following receipt of such notice to notify AMI of its election to exercise the right of first refusal herein granted. Notice of exercise of the right of first refusal shall be accompanied by a non-

PET-EX016.0102

RECORD 004550

refundable good faith check in the amount of fifty thousand dollars($50,000), which amount shall be credited against the purchase price payable hereunder. The purchase price to be paid by York County shall equal the consideration, or, if the consideration is other than cash, the fair market value of the consideration set forth in the notice to York County; provided that (i) if the proposed transaction contemplates a purchase of less than a one hundred percent (100%) interest, York County shall nevertheless purchase a one hundred percent (100%) interest and the consideration to be paid by York County shall equal the consideration set forth in the notice multiplied by a fraction the numerator of which is 1 and the denominator of which is the percentage interest contemplated in the proposed transaction expressed as a decimal, and (ii) if the proposed transaction contemplated is a tax free exchange of assets pursuant to Section 1031 of the Internal Revenue Code of 1986, as amended, the purchase price to be paid by York County shall be increased to provide an equivalent fair market purchase price net of taxes and Medicare recapture resulting from the failure to qualify for Section 1031 treatment. The purchase price shall be paid in cash at closing which shall be a date established by York County in its notice to AMI of its election to exercise the right of first refusal, which date shall be not later than one hundred eighty (180) days following the date of such notice to AMI.

(b) The right of first refusal granted in this Section 3.14 shall not apply to any of the following transactions:

(i) any sale, conveyance or other transfer to any Affiliate, as hereinafter defined; or

(ii) any sale, conveyance or other transfer involving the interest in AMI or the Hospital set forth in paragraph (a), above, together with equivalent or greater interests in two or more acute care hospitals owned by an Affiliate or Affiliates, and/or the voting securities thereof; or

(iii) any sale, conveyance or other transfer as part of a transaction whereby AMI retains operating responsibility for the hospital pursuant to a lease, management contract or other agreement.

For purposes of this paragraph (b), the term "Affiliate" means a corporation, partnership, joint venture, association, business trust or similar entity organized under the laws of the United States of America or any state thereof which is directly or indirectly controlled by AMI, AMI Parent or Tenet Healthcare Corporation ("Tenet"), by any such entity or by any person which controls AMI, AMI Parent, Tenet or any other Affiliate. For purposes of this definition, control means the power to direct the management and policies of a person through the ownership of its voting securities or the right to designate or elect members of its board of directors or other governing board or body by contract or otherwise.

(c) Unless York County shall be entitled to exercise, and shall have exercised the right to purchase granted in paragraph (a) hereof, in the event of any transfer of the Hospital or AMI to anyone other than AMI Parent, there shall be delivered to York County an agreement of the transferee

PET-EX016.0104

RECORD 004552

expressly assuming the obligations of AMI under this Agreement.

(d) For purposes of this Section 3.14 and Section 4.3 hereof, the term "Hospital" means the approximately (as of July 31, 1995) forty-five (45) acre campus on which Piedmont Medical Center is located, all buildings and other improvements thereon owned by AMI, and all hospital or health care related machinery, equipment, furnishings and supplies therein or thereon, as the same shall be constituted on the date of receipt by AMI of notice of the intent of York County to purchase the Hospital pursuant to either of such Sections, subject to any prior dispositions and subject to any leases or other contracts relating thereto; such term shall not include any other assets shown as such on the balance sheets of AMI.

3.15. Licensure; Permits. During the term of this Agreement, AMI shall maintain all licenses, permits and other regulatory approvals as shall be necessary to operate the Hospital and provide the services contemplated by this Agreement. AMI covenants to operate the Hospital in conformity with all applicable statutes, laws and regulations governing the operation of the Hospital or the services rendered thereby.

3.16. Complaint Resolution. Any patient at the Hospital or other recipient of service pursuant to this Agreement who wishes to register a complaint as to any matter relating to the services provided to such person by AMI, or its failure to provide any services, shall be entitled to have such complaint reviewed by AMI and, following such review, shall be provided by AMI a written response as to the matters

raised in such complaint, which response shall also advise the recipient thereof of his or her rights to have such complaint and response reviewed hereunder. Any person wishing to have such complaint and response so reviewed, may, within thirty (30) days of the receipt of AMI's response, but not thereafter, seek further review of his or her complaint by written request to the Board (as defined in Section 3.3(d) hereof). Such request for review shall be accompanied by the written response of AMI provided such person and by a written summary of the reasons why the person seeking review believes that AMI's response is incorrect. The Board shall provide AMI a copy of any request for review within five (5) business days of receipt thereof by the Board. AMI shall be entitled to provide the Board, in writing, with a response to any such request for review, including therewith such additional information or rebuttal as AMI feels appropriate. Not less than thirty (30) days following the receipt of a request for review hereunder, the Board shall provide AMI and the person seeking review a written determination as to such matter. A copy of such determination shall also be provided to York County. In connection with its review, the Board may, but shall not be required to, seek additional information, interview persons or conduct hearings in order to assist it in reaching a fair and accurate determination. AMI agrees to cooperate in any such fact finding efforts. Promptly following receipt of the Board's determination, AMI shall provide the Board and York County a written response to such determination, setting forth what actions, if any, AMI

proposes to take in connection with the specific complaint or the matters raised by such complaint.

3.17. Review and Modification. The parties hereto recognize that technological or other changes not known or foreseen at the time of entering into the covenants contained in this Agreement may, at some time in the future, make uneconomical, inefficient, unnecessary or unadvisable the provision of a service or services of a type, in the manner, or at the location, specifically provided for in this Agreement, and that some modification of the Agreement may be advisable in order to avoid unintended results or better effectuate the intent of the parties in entering into this Agreement. The parties agree to cooperate in the review of the provisions and efficacy of this Agreement in order to ensure that its provisions will achieve their intended results. At least every five (5) years the parties shall provide representatives to conduct a review of this Agreement in the light of then current conditions and a report of such representatives on such review shall be prepared and provided to each of the parties. Should any party hereto conclude, in connection with any periodic review or at any other time, that strict adherence to the express terms of any provision of this Agreement has, due to some intervening change in circumstances, become contrary to the true intent of the parties hereto or to the interests of the citizens of York County intended to be protected hereunder, such party may submit a proposed modification of the appropriate provision or provisions of this Agreement designed to remedy the unintended result or achieve the true intent of the parties to the other

parties hereto. Such proposal shall set forth the changes in circumstances or conditions which indicate the need for the modification and shall describe how the proposed modification will better accomplish the intent of the parties than the existing provision or provisions. Each of the parties agrees to give full consideration to any such proposal submitted by any other party and not to unreasonably withhold consent and cooperation in connection with any requested or proposed modification.

Section 4. Default; Remedies; Term of Agreement.

4.1. Events of Default Defined. The following shall be "events of default" under this Agreement and the terms "event of default" or "default" shall mean, whenever they are used in this Agreement, any one or more of the following events:

(a)(i) commencement by AMI, AMI Parent or Tenet of a voluntary case under the federal bankruptcy laws, as now or hereafter constituted, or any other applicable federal or state bankruptcy, insolvency or similar law or (ii) consent by AMI, AMI Parent or Tenet to the appointment of a receiver, liquidator, assignee, trustee, custodian, sequestrator or other similar official for AMI, AMI Parent or Tenet, as the case may be, or (iii) the entry of any decree or order for relief by a court having jurisdiction over AMI, AMI Parent or Tenet or its property in an involuntary case under the federal bankruptcy laws, as now or hereafter constituted, or any other applicable federal or state bankruptcy, insolvency or similar law, or (iv) appointment of a receiver, liquidator, assignee, trustee, custodian, sequestrator or

similar official for AMI, AMI Parent or Tenet or any substantial part of its property, or (v) entry of any order for the termination or liquidation of AMI, AMI Parent or Tenet or its affairs;

(b) failure of AMI, AMI Parent or Tenet within 180 days after the commencement of any proceedings against it under the federal bankruptcy laws or other applicable federal or state bankruptcy, insolvency or similar law, to have such proceedings dismissed or stayed;

(c) the entry of a final, unappealable determination, ruling, order or other action by an agency or court of competent jurisdiction which results in the loss of licensure of the Hospital or the loss of any other permits, approvals or other authority theretofore granted to AMI such that AMI is rendered incapable of substantially performing its obligations hereunder;

(d) failure by AMI or AMI Parent to substantially observe and perform any covenant, condition or agreement in this Agreement on the part of AMI or AMI Parent to be observed or performed pursuant to Sections 3.1(c), 3.2 or 3.9 of this Agreement for a period of 90 days after written notice, specifying such failure and requesting that it be remedied, given to AMI and AMI Parent by York County, unless York County shall agree in writing to an extension of such time prior to its expiration (or in the case of any such default, which cannot with due diligence be cured within such 90-day period, if AMI or AMI Parent shall fail to proceed promptly to cure the same and thereafter prosecute the curing of such default with due

diligence, it being intended in connection with such a default not susceptible of being cured with due diligence within the 90 days that the time of AMI or AMI Parent within which to cure the same shall be extended for such period as may be necessary to complete the curing of the same with all due diligence, provided that, without the consent of York County such period shall not extend beyond one hundred thirty-five (135) days following notice from York County).

(e) failure by AMI or AMI Parent to substantially observe and perform any covenant, condition or agreement in this Agreement on the part of AMI or AMI Parent to be observed or performed, other than as referred to in subsections (a), (b), (c) and (d) of this Section for a period of 30 days after written notice, specifying such failure and requesting that it be remedied, given to AMI and AMI Parent by York County, unless York County shall agree in writing to an extension of such time prior to its expiration (or in the case of any such default, which cannot with due diligence be cured within such 30-day period, if AMI or AMI Parent shall fail to proceed promptly to cure the same and thereafter prosecute the curing of such default with due diligence, it being intended in connection with such a default not susceptible of being cured with due diligence within the 30 days that the time of AMI or AMI Parent within which to cure the same shall be extended for such period as may be necessary to complete the curing of the same with all due diligence, provided that, without the consent of York

County such period shall not extend beyond forty-five days following notice from York County).

The foregoing provisions of subsections (d) and (e) of this Section 4.1 are subject to the following limitations: If by reason of force majeure AMI or AMI Parent is unable in whole or in part to carry out the agreements of AMI or AMI Parent on its part herein contained (other than the obligations on the part of AMI or AMI Parent contained in Sections 3.3(b), 3.7, 3.9, 3.10 and 3.11 hereof, to which this paragraph shall have no application), AMI or AMI Parent shall not be deemed in default during the continuance of such inability. The term "force majeure" as used herein shall mean, without limitation, the following: acts of God; strikes, lockouts or other industrial disturbances; acts of public enemies; order of any kind of the government of the United States or of South Carolina or any of their departments, agencies, or officials, or any civil or military authority; insurrections; riots; epidemics; landslides; lightning; earthquake; fire; hurricane; storms; floods; washouts; droughts; arrests; restraint of government and people; civil disturbances; explosions; breakage or accident to machinery, transmission pipes or canals; partial or entire failure of utilities; or any other cause or event not reasonably within the control of AMI or AMI Parent, it being agreed that the settlement of strikes, lockouts and other industrial disturbances shall be entirely within the discretion of AMI or AMI Parent and neither AMI nor AMI Parent shall be required to make settlement of strikes, lockouts and other industrial disturbances by acceding to the demands of the opposing party or parties when such course is,

in the judgment of AMI or AMI Parent, unfavorable to AMI or AMI Parent; provided, however, that AMI's ability to rely on force majeure with respect to strikes, lockouts and other industrial disturbances relating to its employees shall be subject to the following conditions: (i) without the written consent of York County, the period of such force majeure shall not exceed three (3) years from the date of receipt of notice from York County pursuant to this Section 4.4, (ii) during the pendency of such force majeure AMI shall continue to staff and operate an emergency room at the Hospital, and (iii) during the pendency of such force majeure AMI shall provide patient referral services to other hospitals.

4.2. Remedies on Default. (a) Whenever any event of default referred to in Section 4.1 hereof shall have happened and be subsisting, York County make take whatever action at law or in equity may appear necessary or desirable to enforce performance and observance of any obligation, agreement or covenant of AMI or AMI Parent under this Agreement.

(b) Whenever any event of default described in Section 4.1(a), (b), (c) or (d) hereof or described in Section 4.1(e) hereof with respect to the obligations of AMI or AMI Parent under Section 3.1(b), 3.1(d), 3.3, 3.4, 3.5, 3.7, 3.8(b), 3.13 or 3.14 hereof shall have happened and be subsisting, York County shall, in addition any remedy available to is pursuant to subsection (a), above, have the right, subject to, and in accordance with the provisions of Section 4.3 hereof, to purchase the Hospital.

4.3. Purchase of Hospital on Certain Defaults. (a) Notice. In order to avail itself of its remedy under Section

PET-EX016.0112

RECORD 004560

4.2(b) hereof to purchase the Hospital upon any occurrence of an Event of Default described therein, York County shall, within forty-five (45) days following receipt of notice of an event of default described in Section 4.1(a), (b) or (c), above, or following the occurrence of an event of default described in Section 4.1(d) or (e), above, but not thereafter, (i) give written notice to AMI of its intention to purchase the Hospital, specifying in such notice the Event of Default with respect to which the remedy is being exercised and a date of closing (the "Closing Date") for such purchase, which date shall not be less than one hundred eighty (180) days nor more than three hundred sixty-five (365) days from the date such notice is mailed or delivered personally, and (ii) deliver to AMI a non-refundable good faith check equal to fifty thousand dollars ($50,000), which amount shall be credited against the Purchase Price payable on the Closing Date.

(b) Purchase Price. The purchase price at which the Hospital shall be purchased by York County hereunder (the "Purchase Price") shall be the greater of the Fair Market Value of the Hospital, determined in accordance with subsection (g) of this Section 4.3, or the Adjusted Investment determined in accordance with subsection (f) of this Section 4.3.

(c) Conveyance of Hospital. On the Closing Date, York County shall deliver to AMI (i) the remaining balance of the Purchase Price, in cash or in the form of an official bank check drawn upon a bank having at least five hundred million dollars in capital and assets, and (ii) an assumption agreement in form reasonably acceptable to AMI and AMI Parent

whereby York County assumes all obligations and liabilities in respect of Piedmont Medical Center on and after the Closing Date, and (iii) a release of all obligations AMI or AMI Parent may have to York County under this Agreement, the Guaranty, the Lease or any other agreement of the parties relating to Piedmont Medical Center and (iv) an indemnification agreement in form reasonably acceptable to AMI and AMI Parent whereby York County agrees to indemnify AMI and AMI Parent for all claims, actions and proceedings arising in respect of Piedmont Medical Center and its operations on or after the Closing Date or in respect of "Liabilities" as defined in subsections 5.3(a)(i), (ii) and (iii) of this Agreement.

In exchange for items (i) through (iv) above, on the Closing Date, AMI and AMI Parent or their successors shall execute and deliver to York County a statutory warranty deed (and, if applicable, a bill of sale) in form acceptable to York County, which conveys to York County all their respective right, title and interest in the Hospital (known as Piedmont Medical Center), subject to utility and transportation easements and rights of way and all other similar encumbrances appearing of record or apparent upon a reasonable inspection of the premises.

(d) Failure to Close. In the event that York County should fail to deliver any of the items listed in (i) through (iv) in subsection (c), above, or, subsequent to the delivery thereof by York County, York County shall fail or refuse to close such purchase in accordance with the terms hereof, the right of York County to purchase the Hospital as a remedy for the Event of Default with respect to which the notice of

exercise of the such right was delivered pursuant to subsection (a), above, will become void and AMI shall retain the non-refundable good faith deposit of York County delivered pursuant to subsection (a), above. Failure by York County to perform with respect to the right to purchase in connection with any Event of Default will not affect any other remedy otherwise available to York County hereunder nor its right to purchase as a result of any other Event of Default with respect to which such remedy is otherwise available.

(e) Non-Transferability. The right of York County to purchase the Hospital as a remedy for the Events of Default described in Section 4.2(b) hereof is non-transferable and non-assignable. Any attempted assignment, transfer or other disposition of such right by York County shall render such right void and unenforceable.

(f) Adjusted Investment. The Adjusted Investment shall equal the sum of the amounts calculated pursuant to the following paragraphs (i) and (ii).

(i)(A) the amount of purchase price of property acquired under this Agreement paid prior to January 1, 1989, plus the sum of all rental payments made under the lease of the former York General Hospital; and liabilities assumed and discharged by AMI pursuant to Section 5.3(a) of this Agreement; plus (B) the aggregate amount of AMI's and/or AMI Parent's investment in the former York General Hospital and in the Hospital as of December 31, 1988, adjusted as provided in the next paragraph; minus (C) the aggregate amount of the depreciation claimed by AMI and/or AMI Parent in their most recent audited financial

statements with respect to the Hospital as of the date of exercise.

The adjustment referred to in the immediately preceding paragraph shall be effected as follows: multiply the sum of the amounts referred to in clauses (A) and (B) by an amount equal to seventy-five (75%) of the percentage of increase in the cost of living from December 1980 to the date of exercise, calculated as follows: by dividing a dividend consisting of the Index (as defined in Section 3.11 hereof), expressed as a whole number, for the month immediately preceding the date of exercise by a divisor equal to the Index established for December 1980, and from the quotient obtained, subtract the integer 1, and any resulting positive number shall be deemed to be the percentage of increase in the cost of living.

The term AMI's or AMI Parent's investment in the former York General Hospital and in the Hospital shall mean the total cost of acquiring, constructing, and equipping the Hospital, including, without limitation: (1) land acquisition costs (including, without limitation, brokerage fees and land carrying costs through completion, such as taxes and insurance), (2) costs of providing necessary and appropriate utility service, (3) costs of materials and fixed and movable equipment placed in service, (4) grading, site preparation, paving and parking lot costs, (5) landscaping costs, (6) labor costs, (7) costs of surveys, (8) costs of engineering, architectural and other

studies, (9) architectural, engineering, legal, land appraisal and contractors' fees and charges, (10) financing costs (including without limitation, construction and permanent financing costs and mortgage brokerage commissions), (xi) all other costs and expenses reasonably attributable to construction, and (11) cost of supplies, inventory and contract rights. The term AMI's or AMI Parent's additional investment in the Hospital as used in subparagraph (ii), below, shall mean such investment in the Hospital made after December 31, 1988.

(ii) The amount of all additional investments made by AMI or AMI Parent after December 31, 1988, adjusted as provided in the next paragraph, minus an amount equal to the aggregate amount of depreciation claimed by AMI and AMI Parent in their most recent audited financial statements with respect to such additional investments as of the date of exercise.

The adjustment referred to in the immediately preceding paragraph shall be effected as follows: multiply the amount of such additional investments by seventy-five percent (75%) of the percentage of increase in the cost of living from January 1, 1989, to the date of exercise, calculated as follows: by dividing a dividend consisting of the Index, expressed as a whole number, for the month immediately preceding the date of exercise by a divisor equal to the Index established for December 1988, and from the quotient obtained, subtract the integer 1, and any resulting positive number shall be

deemed to be the percentage of increase in the cost of living.

(g) Fair Market Value. (i) The Fair Market Value of the Hospital shall be equal to the Appraised Value of the Hospital as an operating hospital.

(ii) Within thirty (30) days after delivery of the notice and good faith check described in subsection (a) of this Section 4.3, (A) York County and AMI shall select a trustee (the "Trustee") to hire appraisers; which Trustee shall be a bank or trust company having at least $500,000,000 of net worth and authorized to do business in South Carolina and (B) each party will deliver to the other the names and brief qualification statement demonstrating expertise in appraising hospitals of two appraisers nominated by such party to compute the Appraised Value of the Hospital. Each appraiser shall be a member of the American Institute of Real Estate Appraisers (or any successor organization thereto). Within thirty (30) days after selection of the Trustee and nomination of the appraisers, AMI and York County shall negotiate in good faith to either (X) agree on a single appraiser to compute the Appraised Value of the Hospital, or (Y) select which of the two appraisers nominated by the other party will be engaged to conduct an appraisal, in which event two appraisers (the one remaining after one nominated by each party has been stricken by the other party) will be engaged.

(iii) All appraisers engaged hereunder shall be hired by the Trustee on an anonymous basis. The Trustee shall engage the appraisers and each party shall deliver to the Trustee an amount of money equal to the fees, costs and expenses of the

appraiser such party nominated. AMI and York County hereby agree, and any contract with the Trustee shall provide that the Trustee shall agree, not to directly or indirectly communicate to the appraiser or appraisers engaged hereunder which party selected or nominated such appraiser. The appraiser(s) thus appointed shall, within forty-five (45) days after the date of the notice appointing the appraiser, proceed to appraise the Hospital to determine the Appraised Value as of the Closing Date (giving effect to the impact, if any, of inflation from the date of their decision to the closing date). In the case of two (2) appraisers, except as provided in subparagraph (iv) below, the two appraisals shall be averaged to determine the Appraised Value. In any event, the Appraised Value determined in accordance with this subsection (g) shall be final and binding on the parties.

(iv) To the extent consistent with sound appraisal practice as then existing at the time of any such appraisal, such appraisal shall determine the fair market value of the Hospital and shall be made to determine the value of the Hospital as an operating hospital consistent with the current operation of the Hospital at the time the Hospital was appraised. Notwithstanding the provisions of paragraph (ii), above, if the difference between the appraisal amounts determined by the appraisers appointed pursuant there exceeds ten percent (10%) of the lesser of such appraisal amounts, then the two appraisers shall have twenty (20) days to appoint a third appraiser. If no such appraiser is appointed within such twenty (20) days or within ninety (90) days after the original request for a determination of Appraised Value,

PET-EX016.0119

RECORD 004567

either party may apply to any court having jurisdiction to have such appointment made by such court. Any appraiser appointed by the original appraisers or by such court shall be instructed to determine the Appraised Value within forty-five (45) days after the appointment of such appraiser. The determination of the three appraisers which differs most in the terms of dollar amount from the determinations of the other two appraisers shall be excluded, and if the difference between the appraisal amounts determined by the two appraisers is less than ten (10%) of the lesser of the appraised amounts, fifty percent (50%) of the sum of the remaining two determinations shall be the Appraised Value, which Appraised Value shall be final and binding upon York County, AMI and AMI Parent for purposes of determination of the Fair Market Value pursuant to this subsection (g). If the lowest and highest Appraised Values are equidistant in amount from the middle Appraised Value, then such middle Appraised Value shall be used for purposes of determination of the Fair Market Value pursuant to this subsection (g). If the difference between the two remaining Appraised Values so computed is in excess of ten percent (10%) of the lesser of such Appraised Values, the process described above in this paragraph shall be repeated by hiring successive appraisers until such difference is not more than ten percent (10%) of the lesser Appraised Value. The provisions of this subsection (g) shall be specifically enforceable to the extent such remedy is available under applicable law, and any determination hereunder shall be final and binding upon the parties except as otherwise provided by applicable law. York County, AMI and AMI Parent each shall

pay to the Trustee and fees and expenses of the appraiser nominated by it, and each shall pay one-half of the fees and expenses of any additional appraiser or appraisers and one-half of all other costs and expenses incurred in connection with each additional appraisal.

4.4. Term of Agreement. Unless extended by written agreement of the parties hereto, this Agreement shall expire on July 1, 2045."

Section 2. Section 16.4 of the Agreement is hereby amended to delete therefrom the reference to, and address of, the "Trustees of the Hospital" and to substitute the following addresses for AMI and AMI Parent and York County:

If to AMI or AMI Parent, addressed to:

Piedmont Healthcare System
c/o President
222 S. Herlong Avenue
Rock Hill, South Carolina 29732

Tenet Healthcare Corporation
c/o Vice President for Southeast Region
1000 Abernathy Road
Building 400, Suite 1110
Atlanta, Georgia 30328

Tenet Healthcare Corporation
c/o Executive Vice President, Eastern Division
14001 Dallas Parkway
Suite 200
P. O. Box 809088
Dallas, Texas 75380-9088

If to York County, addressed to:

York County, South Carolina
c/o County Manager
P. O. Box 66
York, South Carolina 29745

Section 3. The options to purchase various assets contained in Section 14 of the Prior Agreement and the First and Second Addenda thereto, as modified and amended by the

Third, Fourth and Fifth Addenda thereto, are terminated and hereby waived by York County, and the parties hereto hereby waive and relinquish all rights with respect thereto. Nothing obtained in this Section 3 shall affect any rights or obligations contained in Section 4 of the Agreement as amended by this Sixth Addendum.

Section 4. AMI Parent hereby jointly and severally guarantees all representations, warranties, agreements, covenants and obligations of AMI contained in this Sixth Addendum.

Section 5. Except as herein modified, the Agreement is hereby ratified and confirmed.

Section 6. Capitalized terms not otherwise defined in this Sixth Addendum shall have the meaning assigned thereto in the Agreement, if defined therein.

IN WITNESS WHEREOF, the undersigned parties have caused this Sixth Addendum to Agreement to be executed under seal as of the date first above written.

AMERICAN MEDICAL INTERNATIONAL, INC.

By W Randolph Smith

Title Executive V.P.

Attest August C. Dale
Secretary

PET-EX016.0122

RECORD 004570

AMISUB OF SOUTH CAROLINA, INC.

By _____

Title _____

Attest _____
Secretary

YORK COUNTY, SOUTH CAROLINA

By _____
Carl L. Gullick, Chairman
York County Council

Attest _____
J. Clay Killian, County Manager

PIEDMONT MEDICAL CENTER
ROCK HILL, SOUTH CAROLINA

EMERGENCY DEPARTMENT
SPECIALTY MANUAL

TRIAGE CRITERIA

CLASS I

EMERGENT

Cardio-Respiratory

- Cardiopulmonary arrest
- Severe respiratory distress
- Foreign body aspiration with distress
- Croupy cough with or without stridor
- Unable to swallow secretions
- Asymmetrical chest expansion
- Trachial deviation
- Carbon dioxide exposure, smoke inhalation
- Tracheostomy patient with distress
- Displaced trach tubes
- Anaphylaxis
- Malfunctioning pacemaker
- Chest pain with evidence of impending MI

Trauma

- Laceration with severe bleeding (arterial)
- Compound fracture
- Obvious deformity of limb or joint
- Any neurological impairment secondary to laceration or fracture
- Amputation
- Wringer or crush injuries
- Hemophiliac with obvious injury
- Hoarseness with history of trauma to throat, larynx
- Extensive burns
- Hypothermia
- Electrical shock
- Spinal injury with loss of function/sensation
- Drowning or suspected drowning

Nuerological

- Coma or decreasing level of consciousness
- Status epilepticus
- Active seizure
- Altered mental status with severe H/A
- Sudden visual changes
- Acute headache - sudden onset, unstable vital signs

Schedule 3.1(c)

Eye, Ear, Nose, Throat
- Hoarseness with history to throat or larynx
- T & A bleeding, active
- Sore throat with drooling or stridor
- Hoarse cry in baby < 3 months old with fever
- Sudden onset hoarseness; difficulty breathing and swallowing
- Epistaxis with persistent bleeding
- Foreign body in nose that may be aspirated
- Foreign body in ear with bleeding associated
- Hearing problem; acute following trauma
- Hyphema
- Puncture wound to globe
- Chemical substance to eye
- Direct burn to face, eye, mouth
- Peri orbital swelling to client with fever
- Sudden onset severe eye pain - no history of trauma
- Sudden onset blurred vision, diplopia

Gynecological and Genitourinary
- Precipitous delivery
- Severe genital trauma
- Third trimester bleeding with severe pain
- Vaginal hemorrhage
- Severe abdominal pain with abnormal vital signs
- Severe testicular pain
- Inguinal bulge, sudden onset pain
- Indications of eclampsia

Toxic Substances
- History bite/sting with distress and/or known poisons
- Systemic allergic reaction to meds with respiratory symptoms
- Inhalation of carbon dioxide or any hydrocarbon containing carbox dioxide
- Ingestion/exposure of caustic substance
- Cyanide exposure
- Heavy metal ingestion (i.e., iron/lead/arsenic)
- Ingestion of poisonous plant (including tobacco)
- Overdose (prescription or over-the-counter drugs)
- Ingestion of alcohol in pediatric patients

GI/Abdominal
- Severe abdominal pain with abnormal vital signs
- Hematemesis
- Vomiting/diarrhea with obvious signs of dehydration
- Active rectal bleeding
- < six months old with jelly-like stools, projectile vomiting
- Wound dehiscence
- Rectal prolapse
- Dehydration in child/elderly
- Diabetic with persistent nausea/vomiting/diarrhea

Temperature
- Fever associated with stiff neck, lethargy, rahs, irritability
- Child < three months old with temperature > 100.6 rectal or < 98 rectal
- Fever with rapid onset and history febrile seizures
- Fever > 104.9
- Fever with petechial rash
- Hypothermia < 95
- Infants with temperature < 98 rectal

Reviewed: 08/90
Revised: 08/91
Revised: 01/92
Reviewed: 10/93
Revised: 08/95

PIEDMONT MEDICAL CENTER
ROCK HILL, SOUTH CAROLINA

EMERGENCY DEPARTMENT
SPECIALTY MANUAL

TRIAGE CRITERIA

CLASS II

URGENT

Cardio-Respiratory
- Chest pain or cardiac symptoms
- Croupy cough without respiratory distress/drooling
- Foreign body aspiration without respiratory distress
- Asthma without severe respiratory distress
- Chemical inhalation
- Hemoptysis (active)

Trauma
- Child abuse
- Dog bite (severe)
- Alleged sexual assault within 24 hours
- Minor or partial tear external ear

Neurological
- Seizures or postictal state
- New onset headache without neuro impairment

Ear, Eye, Nose, Throat
- Dysphagia, able to tolerate secretions
- T & N bleeding, by history no active bleeding
- Epistaxis with elevated blood pressure
- Tinnitus with vertigo
- Foreign body to eye
- Foreign body to nose (if too large to aspirate)

Gynecological and Genitourinary
- Probable miscarriage with vaginal bleeding, passing tissue
- Genital injury
- Renal calculi
- Inability to void > 12 hours with fever, nausea, vomiting
- Penile edema - inability to void
- Vaginal bleeding in pregnancy

Toxic Substances
- History severe bite/sting with severe local reaction (no systemic symptoms)
- Allergic reaction to med substance without respiratory involvement
- Inhalation of any hydrocarbon <u>not</u> containing carbon dioxide

GI/Abdominal
- Hematemesis with normal vital signs
- Diabetic with history of nausea/vomiting/diarrhea stable vital signs
- Dehydration (adult)

Temperature
- Child with temperature > 102.5 (history of seizures)
- Adult with temperature > 102 with complaints

Reviewed: 08/90
Revised: 08/91
Revised: 01/92
Reviewed: 10/93
Revised: 08/95

PIEDMONT MEDICAL CENTER
ROCK HILL, SOUTH CAROLINA

EMERGENCY DEPARTMENT
SPECIALTY MANUAL

TRIAGE CRITERIA

CLASS III

NURSE ALERT

Cardio-Respiratory
- Cough, ill appearing child not in acute distress
- Asthma without severe respiratory distress
- FB aspiration (no distress)
- Hyperventilation
- Pharyngitis with persistent fever, dysphasia, pain referred to ear, muffled speech

Musculoskeletal
- Simple fractures without evidence of neurovascular impairment
- Multiple joint pain with fever
- Hip pain with fever
- Tight casts

Neurological
- Head injury (blunt) with normal vital signs, alert
- Sudden onset headaches

Trauma
- Lacerations without severe bleeding or neurovascular impairment
- Minor burns
- Insect bites with swelling over hands, face, eyes, neck, genitalia

GI
- Ingestions, non-toxic
- Acute pain with fever, pallor, distension
- Infant with acute onset vomiting (past 12 hours)
- Bloody diarrhea with fever
- Excessive watery stools
- Hematemesis without acute distress

Temperature
- Newborns with fevers of 99-100.5 degrees F
- Infants and children with fevers greater than 101.8 degrees F and other symptoms - not severe

EENT
- Conjunctivitis with severe symptoms - pain, visual distrubances, severe irritation
- Hot, tender, fluctuant, enlarged nodes
- Hemoptysis - no history of tooth extraction
- Bilateral swelling of eyelids
- Epistaxis
- History of foreign body in ear with pain

GU
- Grossly bloody urine
- Oliguria greater than 8 hours
- Vulvovaginitis with history of injury, severe discomfort
- Acute swelling of scrotum, tenderness

Other
- Abdominal pain with temperature > 101

Reviewed: 08/90
Revised: 08/91
Revised: 06/92
Reviewed: 10/93
Revised: 08/95

PIEDMONT MEDICAL CENTER
ROCK HILL, SOUTH CAROLINA

EMERGENCY DEPARTMENT
SPECIALTY MANUAL

TRIAGE CRITERIA

CLASS IV

NON URGENT

Cardio-Respiratory
- URI symptoms or chest discomfort with temperature greater than/equal to 100° F

Musculoskeletal
- Onset of swollen joints with temperature
- Extremity injury - no swelling or deformity
- Back pain - no trauma
- Joint sprains

Trauma
- Minor cuts - needing cleaning and physician exam for foreign body
- Minor abrasion - questionable mechanism of injury
- Insect bites - multiple

GI
- Chronic, recurrent abdominal pain without changes in character on day of visit
- Feeding problems - spitting up
- Vomiting with normal vital signs

GU
- Dysuria
- Frequent urination - in no acute distress
- Hydrocele
- Inguinal hernia - reducible
- Oral lesions - Unable to eat or take p.o. fluids - vital signs normal

Other
- Jaundice
- Emotionally disturbed
- Injury to more than one area - asymptomatic
- Ear ache without severe pain, normal vital signs
- Pink eye without distress
- History of alleged rape, assault > 48 hours
- Draining stye
- Foreign body in ear - pain free

Reviewed: 08/90
Revised: 08/91
Revised: 06/92
Reviewed: 10/93
Revised: 08/95

PIEDMONT MEDICAL CENTER
ROCK HILL, SOUTH CAROLINA

EMERGENCY DEPARTMENT
SPECIALTY MANUAL

TRIAGE CRITERIA

CLASS V

ROUTINE

Cardio-Respiratory
- Congestion
- Runny nose
- Cold

Musculoskeletal
- Chronic swollen joints - afebrile
- Muscle aches with no significant past medical history or trauma
- Chronic back pain - no history of trauma

Trauma
- Minor cuts with no indications of foreign body (not requiring suturing)
- Minor abrasions without significant mechanisms of injury
- Insect bites - minor local reaction with no significant past medical history
- Poison ivy - minor rash - negative facial involvement

GI
- Diarrhea - no clinical distress
- Constipation without severe abdominal pain
- Fecal impaction
- Thrush

GU
- Diaper rash
- Local irritation ulcer, discharge from genitalia excluding children 12 and under

Other
- Physical exams
- Pregnancy testing
- Inoculations
- Drug screen
- Prescription refills
- Pin worms
- Chronic recurrent problems - asymptomatic at time of visit
- Obesity
- Speech and learning problems detected through routine screening
- Wax in ears
- Ringworm
- Chronic cough
- Insect bites - no signs of infection or systemic symptoms

COUNTY MANAGER'S OFFICE
Post Office Box 66, York, South Carolina 29745
Tel: (803) 684-8511 • Fax: (803) 684-8550

August 24, 1995

Mr. Paul Walker, President
Piedmont Healthcare System
222 South Herlong Avenue
Rock Hill, South Carolina 29732

Dear Paul,

The following is an explanation of how population figures were derived for Section 3.2 of the sixth addendum to the Agreement between York County, South Carolina and American Medical International, Inc., and Amisub of South Carolina, Inc. The only reliable population figures currently available are those provided in the decennial census. In order to project 1990 census figures through 1995, we have assumed that the population has increased in York County at the same level at which it increased between 1980 and 1990.

The 1980 census indicated a total population figure for York County of 106,720. The 1990 population was stated to be 131,497, for an increase between 1980 and 1990 of 24,777 persons. Assuming that growth was the same in each of these ten years, the annual growth rate for York County between 1980 and 1990 was 2,477 persons. If we assume that this annual growth rate will hold true for the current decade then the population of York County in 1995 would be 143,882, (2,477 x 5 + 131,497 = 143,882).

According to the Catawba Regional Planning Council, the 1990 population of 131,497 can be broken down between eastern and western York County along the longitude line 81° 10' with the assistance of readily available computer software. This procedure indicates that in 1990, 77.4% (101,785) of the County's population lived to the east of this line and the remaining 22.6% (29,712) lived to the west of the line.

For 1995 population figures, we have made the assumption that the same percentage of the population lives to the east of the line as opposed to the west that did in 1990. For our calculations we have assigned 9,585 of the County's new residents since 1990 to the east and the remaining 2,800 to the west. This gives us an estimate of the 1995 population of eastern York County of 111,370 and western York County of 32,512 (rounded to 111,500 and 32,500, respectively).

YORK COUNTY GOVERNMENT CORRESPONDENCE IS PRINTED ON RECYCLED PAPER.

We believe that the same methodology as is outlined above will be suitable for projecting population figures in the future. Please advise if you have any questions or concerns.

Sincerely,

Clay Killian
County Manager

PET-EX016.0137

RECORD 004585

SEVENTH ADDENDUM TO AGREEMENT BY AND AMONG TENET HEALTHCARE CORPORATION, AMISUB OF SOUTH CAROLINA, INC., AND YORK COUNTY, SOUTH CAROLINA

THIS SEVENTH ADDENDUM TO AGREEMENT made and entered into this 5th day of October, 2000, by and among TENET HEALTHCARE CORPORATION (formed as the result of a merger between American Medical International, Inc., and National Medical Enterprises, Inc.), a corporation organized under the laws of the State of Delaware (herein referred to as "AMISUB Parent"), AMISUB OF SOUTH CAROLINA, INC., (herein referred to as "AMISUB"), and YORK COUNTY, SOUTH CAROLINA, a political subdivision of the State of South Carolina (herein referred to as "York County"),

WITNESSETH:

WHEREAS, AMISUB Parent, AMISUB, the Trustees of York General Hospital and York County entered into an Agreement on or about December 9, 1980 (herein referred to as the "Prior Agreement") pursuant to which the Trustees of York General Hospital and York County leased and sold certain property and assets to AMISUB Parent and its subsidiary corporation, AMISUB, for the operation of a hospital in York County, South Carolina: and

WHEREAS, York County has succeeded to all rights and interests and assumed all liabilities of the Trustees of York General Hospital under the Prior Agreement; and

WHEREAS, AMISUB Parent and AMISUB constructed and operate a hospital in York County, South Carolina, known as Piedmont Medical Center (the "Hospital"), pursuant to the terms and conditions of the Prior Agreement; and

000769

WHEREAS, the Prior Agreement has been amended and modified by a First Addendum thereto dated June 15, 1989, a Second Addendum thereto dated April 1992, a Third Addendum thereto dated April, 1995, a Fourth Addendum thereto dated June, 1995, a Fifth Addendum thereto dated as of July 1, 1995, and a Sixth Addendum thereto dated August 25, 1995, (the Prior Agreement, as amended and modified, being referred to herein as the "Agreement"); and

WHEREAS, AMISUB and AMISUB Parent desire to amend the Prior Agreement, as amended and modified, in order to improve the quality of health care provided at the Hospital; and

WHEREAS, the parties have determined that the Prior Agreement, as amended and modified, should be further amended in the particulars and on the terms and conditions stated in this Seventh Addendum to the Agreement in order to serve the public interest, improve the quality of health care rendered at the Hospital and address emerging medical needs and changing circumstances in York County;

NOW, THEREFORE, for and in consideration of the premises, the mutual promises contained herein the sum of Ten Dollars ($10.00) paid by each party to the other and of other good and valuable consideration, the receipt, adequacy and sufficiency of which is hereby acknowledged by each party, the undersigned parties, intending to be legally bound, hereby agree as follows:

1. Section 3.1 (b)(vi) of the Agreement is hereby deleted.

2. Section 3.1 (b)(vii) of the Agreement is hereby amended to read as follows:
   (b)(vii) - Renovation of the clinical laboratory at a cost of approximately Two Hundred Thousand Dollars ($200,000) to begin on or about January 1, 2002.

3. Section 3.1 (d) of the Agreement is hereby amended to read as follows:
   (d) - Medical/surgical beds, AMISUB shall maintain, upon completion of the project described herein, at least two hundred ten (210) private and

000770

sixteen (16) semi-private medical/surgical beds and twenty (20) psychiatric beds at the Hospital. On or before December 31, 2002, or no later than twelve (12) months after completion of the Women's Tower as provided in paragraph 4 (x), complete renovations to the original hospital structure to create 166 private medical/surgical beds. Additionally, the Women's Tower will provide for the ability to add additional 28 private rooms that can be built out as demand dictates. For purposes of this Section 3.1 (d), the term "medical/surgical beds: means licensed beds at the Hospital other than psychiatric, rehabilitation, sub-acute, intensive care or general observation beds. Within on hundred eighty (180) days following any date on which the daily census at the Hospital has averaged eighty-five percent (85%) of the then available bed capacity at the Hospital for a period of twelve (12) months, AMISUB shall prepare and present to York County an estimate of future medical/surgical bed requirements at the Hospital necessary to comply with the terms of this Agreement. In the event such estimate indicates that patient demand will exceed available bed capacity, such estimate shall be accompanied by a proposal, including a schedule, for the filing of a request for a Certificate of Need and/or other such action as shall be necessary to provide such bed capacity as shall be shown to be required in such estimate, at the time such estimate shall project such capacity shall be needed.

4. Section 3.1 (b) of the Agreement is hereby amended by adding the following new subsection (x), relating to additional new projects not encompassed in the Hospital Agreement:

(x) – Complete construction of a new forty-four (44) bed women's tower at an estimated cost of Thirty-Four Million, Five Hundred Thousand Dollars ($34,500,000), which includes costs of renovating to private rooms with an estimated completion date of December 31, 2002, or within thirty-six (36) months of receipt of a Certificate of need, subject to regulatory approval.

000771

5. Section 3.10 of the Agreement is hereby deleted.

6. AMISUB Parent hereby jointly and severally guarantees all representations, warranties, agreements, covenants and obligations of AMISUB contained in this Seventh Addendum.

7. Except as herein modified, the Agreement is hereby ratified and confirmed.

8. Capitalized terms not otherwise defined in this Seventh Addendum shall have the meaning assigned thereto in the Agreement, if defined therein.

000772

IN WITNESS WHEREOF, the undersigned parties have caused this Seventh Addendum to Agreement to be executed under seal as of the date first above written.

TENET HEALTHCARE CORPORATION

BY: _____

Title: VP - Operations Southern States Region

Attest: _____

Title: Assistant Vice President - CFO

AMISUB OF SOUTH CAROLINA, INC.

BY: _____

Title: CEO

Attest: Elizabeth A DeMarco

YORK COUNTY, SOUTH CAROLINA

BY: _____

C. Michael Short, Vice Chairman
York County Council

Attest: _____

Al Greene
Acting County Manager

000773

EIGHTH ADDENDUM TO AGREEMENT BY AND AMONG TENET HEALTHCARE CORPORATION (FORMED AS A RESULT OF MERGER BETWEEN AMERICAN MEDICAL INTERNATIONAL, INC., AND NATIONAL MEDICAL ENTERPRISES,INC.),AMISUB OF SOUTH CAROLINA, INC., AND YORK COUNTY, SOUTH CAROLINA

THIS EIGHTH ADDENDUM to Hospital Agreement dated as of December 8, 1980, among American Medical International, Inc., AMISUB of South Carolina, Inc. and York County, South Carolina, as amended and modified from time to time, made and entered into this 7th day of June, 2004, by and among Tenet Healthcare Corporation, a corporation organized under the laws of the State of Delaware, and formed as the result of a merger between American Medical International, Inc., and National Medical Enterprises, Inc. (herein referred to as "AMISUB Parent"), AMISUB of South Carolina, Inc., (herein referred to as "AMISUB"), and York County, South Carolina, a political subdivision of the State of South Carolina (herein referred to as "York County"),

WITNESSETH:

WHEREAS, AMISUB Parent, AMISUB, the trustees of York General Hospital and York County entered into an agreement on or about December 9, 1980 (herein referred to as the "Prior Agreement") pursuant to which the trustees of York General Hospital and York County leased and sold certain property and assets to AMISUB Parent and its subsidiary corporation, AMISUB, for the operation of a hospital in York County, South Carolina; and

WHEREAS, AMISUB Parent and AMISUB constructed and operate a hospital in York County, South Carolina, known as Piedmont Medical Center (the "Hospital") pursuant to the terms and conditions of the Prior Agreement; and

WHEREAS, the Prior Agreement has been amended and modified by a First Addendum thereto dated June 16, 1989, a Second Addendum thereto dated April, 1992, a

Third Addendum thereto dated April, 1995, a Fourth Addendum thereto dated June, 1995, a Fifth Addendum thereto dated as of July 1, 1995, a Sixth Addendum thereto dated as of August 25, 1995, and a Seventh Addendum thereto dated October 5, 2000, (the Prior Agreement, as amended and modified, being referred to herein as the "Agreement"); and

WHEREAS, issues have arisen concerning the pricing provisions of Section 3.1(e) and other sections of the Agreement, as amended and modified; and

WHEREAS, AMISUB, AMISUB Parent and York County have determined that cost-effective competitive pricing for services provided at the "Hospital" is essential to the provision of quality health care services to the citizens of York County, to the continuing economic well-being of the "Hospital", and to the ability of AMISUB and AMISUB Parent to meet their obligations under the Agreement; and

WHEREAS, in order to resolve pricing and other issues under the Agreement, the undersigned parties desire to amend the Agreement, as previously amended and modified, by the execution and delivery of this Eighth Addendum to the Agreement.

NOW, THEREFORE, for and in consideration of the premises, the mutual promises contained herein, the sum of Ten Dollars ($10.00) paid by each party to the other, and of other good and valuable consideration, the receipt, adequacy and sufficiency of which is hereby acknowledged by each party hereto, the undersigned parties, intending to be legally bound, hereby agree as follows:

1. Section 3.1(e) of the Agreement, as amended and modified by the First, Second, Third, Fourth, Fifth, Sixth and Seventh addenda thereto, is hereby amended to read as follows:

> (e) Pricing. (i) AMISUB and AMISUB Parent acknowledge that a major objective of York County in entering into this Agreement is that such care be provided on a cost-effective basis at prices favorably

comparable to those charged for similar services provided by comparable acute-care hospitals in the same general geographical area. York County acknowledges that the pricing of, and charging and reimbursement for, health care services and the market therefor and other factors relating thereto, including the reporting thereof, are complex and but a few of a number of related major management responsibilities of the governing body of AMISUB and AMISUB Parent in the administration of the "Hospital". AMISUB, AMISUB Parent and York County acknowledge and agree that cost-effective, competitive pricing for services provided at the "Hospital" is essential to the provision of quality health care services to the citizens of York County, to the continuing economic well-being of the "Hospital", and to the ability of AMISUB and AMISUB Parent to meet their obligations under this agreement. AMISUB and AMISUB Parent agree to exert every reasonable effort to so conduct their operations and finances to maintain prices for services at the "Hospital" at reasonable, competitive levels as and when compared to other hospitals in the "peer group" [as defined in Section 3.13(a)(xii) of the Agreement, as amended and modified] for which Medpar pricing information is provided pursuant to Section 3.13(a)(xii) of the Agreement, as amended and modified.

(ii) Effective with the Medpar reporting period beginning October 1, 2003, in the event Medpar pricing information submitted to or obtained by the "Hospital" shall, at any time, show that the Average Charge Per Case by the "Hospital" for "all product lines" is the highest in the peer group established and described in this Agreement, AMISUB and AMISUB Parent shall in no event more than fifteen (15) business days after receipt of such Medpar report or information:

(1) reduce its rates, charges and fees or otherwise demonstrate to the county that the rates, charges and fees currently utilized by the hospital reduce the Average Charge Per Case to levels which establish that the Average Charge Per Case by the "Hospital" for "all product lines" will be less than the highest in the peer group as reported in the first Medpar report that contains a full year of data reflecting the changes referred to herein; and

(2) maintain such reduced rates, charges and fees and not adjust rates, charges or fees so as to cause the Average Charge Per Case to increase over the prior period report until such time as there has been delivered to York County a report pursuant to Section 3.13(a)(xii) of this agreement, as amended and modified, which shows that the Hospital's Average Charge Per Case for all product lines is less than the highest of the peer group; and

(3) within forty-five (45) days of the receipt of such Medpar information provide York County, at the "Hospital's" expense, a report, from a qualified consultant, mutually agreed upon by the "Hospital" and York County, that the action taken in (1) above will, to the best of the consultant's ability to make such a determination, result in the Average Charge Per Case by the "Hospital" for "all product lines" being less than the next highest in the peer group designated and established in this Agreement on the first Medpar report that contains a full year of data reflecting the changes made in (1) above. Additionally, should the consultant determine that the action taken by the "Hospital" in (1), will not result in the "Average Charge Per Case" for "all product lines" being less than the next highest in the peer group as called for in (1) above, the "Hospital" will immediately, and in no event more than forty-five (45) days unless an extension is agreed to by county, work with the consultant to identify and implement those actions necessary to achieve the required result that the Average Charge Per Case by the "Hospital" for "all product lines" is less than the next highest in the peer group. York County shall respond to the hospital's designation of a proposed consultant by notification to the hospital that such proposed consultant is approved or disapproved within ten days of receipt from hospital of the name of a proposed consultant. The "Hospital" agrees to begin requesting the required Medpar data no later than April 1st of each year. AMISUB, AMISUB Parent, and York County acknowledge that the release of this information is subject to the control of the Centers for Medicare and Medicaid.

(4) York County, AMISUB and the "Hospital" all recognize that MedPar data is not available for over 12 months after each of the "Hospital"'s fiscal years ends. In order to provide more timely information to monitor the "Hospital"'s prices for services, the "Hospital" agrees to provide York County quarterly financial information, commencing with the first financial quarter after the date of this Eighth Addendum, to include: (1) Charge Description Master; (2) Report showing frequency of all charge items processed for inpatient Medicare services consistent with the data available in the Medpar report. These schedules will be prepared from Hospital internal billing data by quarter and show comparable information to that appearing in the annual MedPar data. York County acknowledges this information may not be reflective of the data appearing in the annual Medpar report and is to be used for informational purposes only.

York County, AMISUB and the "Hospital" agree that York County reserves the right, at its expense, to hire an outside consultant to test the data provided by the "Hospital" for reasonableness.

(iii) Should AMISUB and/or AMISUB Parent fail to perform their obligations under Section 3.1(e)(i) and/or (ii) of the Agreement, as amended and modified by this Eighth Addendum, within the time frame prescribed, York County, subject to the provisions of Section 4.1, shall be entitled to take whatever action at law or in equity may appear necessary or desirable to enforce performance and observance of the obligations, agreements and covenants of AMISUB and AMISUB Parent under this Agreement, as further amended by this Eighth Addendum. Additionally, if AMISUB and/or AMISUB Parent shall fail to substantially observe and perform the covenants, conditions or agreements in Section 3.1(e)(i) and/or (ii) above, AMISUB and AMISUB Parent shall, upon written demand by York County:

(a) within thirty (30) days of the receipt of such written demand adjust rates, charges and costs at the "Hospital" to the average of the Average Charge Per Case for hospitals in the peer group, based on the most recent MedPar report available, for "all product lines" for a period of twelve months or until receipt of the next Medpar report, whichever period of time is greater, showing that the Average Charge Per Case is no longer the highest in the peer group; and

(b) within thirty (30) days of the implementation of the provisions of Section 3.1(e)(iii)(a) above, submit a Charge Master Report to York County, which report is subject to audit and verification, at York County's expense, by York County or its agents, consultants or auditors, which shows that the rates, charges and costs at the "Hospital" have been reduced to the average of the Average Charge Per Case for "all product lines" for hospitals in the peer group based on the most recent Medpar report available for all product lines. If the "Hospital" has not reduced rates, charges and costs to the average of the Average Charge Per Case for hospitals in the peer group for all product lines within the thirty (30) day period provided in this subparagraph (b), AMISUB and AMISUB Parent shall, in addition to the actions required in (a) above, promptly pay to York County, upon York County's demand, the sum of one hundred thousand ($100,000.00) dollars per month, representing the amount of liquidated damages which the parties have agreed upon as compensation to York County until the "Hospital" adjusts, fixes

or reduces its rates, charges and fees to levels which establish that the Average Charge Per Case by the "Hospital" for all product lines will be less than the highest in the peer group for a period of not less than three consecutive months. The parties acknowledge and agree that the sum of one hundred thousand ($100,000.00) dollars per month for each month in which "Hospital" fails or neglects to adjust, fix or reduce the Average Charge Per Case at the "Hospital" for all product lines to less than the highest of the peer group represents a fair and equitable amount of compensation for delay, failure or neglect to adjust, fix or reduce the "Hospital's" Average Charge Per Case for all product lines to less than the highest in the peer group, in view of the impossibility or difficulty of ascertaining actual damages. The foregoing liquidated damages clause shall, however, be in addition to and not in substitution of any other rights or remedies which York County may have under this Agreement or otherwise against AMISUB and AMISUB Parent or the "Hospital".

2. (a) Section 3.7 of the Agreement, as previously amended and modified, is further amended by inserting the following new Section (b) immediately following the existing Section 3.7, and designating existing Section 3.7 of the Agreement as 3.7(a):

(b) AMISUB, AMISUB Parent and York County acknowledge and agree that the viability of community-based agencies which have no ownership relationship with the "Hospital" is essential to serve and improve the delivery of health care services in York County. In recognition of the vital services provided by community-based service agencies which are not directly related to the "Hospital", AMISUB and AMISUB Parent, in a continuing effort to improve the health status of the York County community, agree to contribute the following sums to the following York County community-based agencies:

(i) to Keystone, a not-for-profit substance abuse facility, to be applied to its capital campaign the sum of one hundred twenty-five thousand ($125,000) dollars to expand its York County residential treatment facility, to be paid in annual contributions of twenty-five thousand ($25,000) dollars a year for five years;

(ii) to the York County Hospice Agency, to be applied to the construction of a residential hospice facility in York County, the sum of one hundred twenty-five thousand ($125,000.00) dollars, to be paid in annual contributions of twenty-five thousand ($25,000) dollars a year for five years;

(iii) to North Central Family Clinic, a family medicine clinic which receives federal funding for treating Medicaid patients and others on a "sliding scale" the sum of three hundred fifty thousand ($350,000) dollars, to be paid in annual contributions of seventy thousand ($70,000) dollars per year for five years, provided, however, that North Central Family Clinic shall continue to provide prenatal care as a part of its clinical programming through the use of licensed midwives a minimum of sixty hours per week.

Section 3.11 of the Agreement is amended by adding the following provision at the end of Section 3.11.

> AMISUB and AMISUB Parent agree to endow fifteen (15) annual scholarships to York Technical College in its registered nursing and radiology technician programs for a period of five years without restrictions except for the requirement of a two-year commitment of post-graduate work at Piedmont Healthcare System with a projected cost of three thousand seven hundred fifty ($3,750) dollars per year per scholarship, with a maximum total commitment over a five-year period of two hundred eighty-one thousand two hundred fifty ($281,250) dollars.

3. Section 3.1(c), Emergency Room Service, of the Agreement, as previously amended and modified, is further amended by inserting the following new paragraph immediately following the existing Section 3.1(c):

> AMISUB and AMISUB Parent further agree that the "Hospital" will maintain its Joint Commission on Accreditation for Healthcare Organizations ("JCAHO") accreditation.

4. Section 3.13 of the Agreement, as previously amended and modified, is further amended by inserting a new Section (c) immediately following the existing section 3.13(b) as follows:

(c) In order to permit York County or its auditors, consultants, representatives or agents to monitor and determine the observance and performance of the covenants, conditions or agreements in this Agreement on the part of AMISUB and AMISUB Parent, AMISUB, AMISUB Parent and the "Hospital" hereby grant to York County, its

successors, auditors, consultants, accountants, attorneys and agents the right, upon reasonable notice, to inspect, examine, and review books, records and reports of AMISUB Parent, AMISUB and the "Hospital" reasonably necessary in order to determine compliance, observance and performance by AMISUB Parent, AMISUB and the "Hospital" of and with the covenants, conditions, provisions and agreements contained in the Agreement, as amended and modified. In the event AMISUB, AMISUB Parent, or the "Hospital" determines that any such request is not reasonably necessary to York County's ability to monitor or determine the observance or performance of the covenants, conditions, or agreements in this Agreement or is otherwise unreasonable, AMISUB, AMISUB Parent, or the "Hospital" shall provide written objection to York County, describing the specific grounds of objection. Within ten (10) days upon the County's receipt of said objection, the parties shall meet and attempt to resolve the issues. Should the parties be unable to resolve their differences at said meeting, they shall jointly retain a mutually agreeable consultant to determine whether the request at issue is reasonably necessary to York County's ability to monitor or determine the observance or performance of the covenants, conditions, or agreements in this Agreement and is otherwise reasonable. The provisions of this Eighth Addendum shall be cumulative and in addition to, and not in substitution for any other rights or remedies which York County may have under this Agreement or otherwise, and this provision shall not preclude or limit York County in the exercise of any other right or remedy under this Agreement or at law or in equity.

4. Guaranty by AMISUB Parent.

AMISUB Parent hereby jointly and severally guarantees all representations, warranties, agreements, covenants and obligations of AMISUB contained in this agreement.

5. Prior Agreement ratified and confirmed.

Except as modified herein, the Prior Agreement as amended and modified by the First, Second, Third, Fourth, Fifth, Sixth and Seventh addenda thereto, is hereby ratified and confirmed.

6. Miscellaneous provisions.

(a) Enforceability. All of the terms, provisions and conditions of the Agreement, as amended and modified, shall be binding upon and enforceable by the respective parties, their successors, representatives, officials, officers, agents, employees and assigns.

(b) Amendment. The Agreement and this and prior addenda may be amended or modified only by a written document which has been signed by the parties hereto or by their duly authorized officers or officials.

(c) No waiver. No waiver of a breach of any of the covenants, promises or provisions contained in the Agreement, as amended or modified, and this Eighth Addendum shall be construed as a waiver of any succeeding breach of the same covenant or promise or any other covenant or promise thereof.

(d) Governing law; choice of forum. The Agreement, as amended and modified, and this Eighth Addendum shall be governed by the laws of the State of South Carolina, and by the execution of this agreement, the parties consent to the exclusive jurisdiction of the state and federal courts of South Carolina, for resolution of any dispute arising hereunder.

(e) Severability. In the event that any part or provision of the Agreement, as amended and modified, or this Eighth Addendum shall be determined to be invalid and/or unenforceable, the remaining parts and provisions which can be separated from the invalid and/or unenforceable provision or provisions shall continue in full force and effect.

(f) Captions. The captions and headings of the paragraphs of this Eighth Addendum are for convenience only and are not to be used to interpret or define any or all of the provisions of the Agreement, as amended or modified, or provisions of this Eighth Addendum.

(g) Notices. All notices pertaining to the Agreement, as amended or modified or this Eighth Addendum shall be in writing and addressed as set forth below, and shall be deemed properly delivered, given or served when (i) personally delivered, or (ii) sent by overnight courier, or (iii) four (4) days have elapsed following the date mailed by certified or registered mail, postage prepaid.

Notices to AMISUB and AMISUB Parent:

Tenet Healthcare Corporation
c/o Sr. Vice President of Southern States Region
3350 Riverwood Parkway
Suite 1800
Atlanta, Georgia 30339

Tenet Healthcare Corporation
c/o President, Eastern Division
245 Town Park Drive
Suite 075
Kennesaw, GA 30144

Mr. Charles F. Miller (or successor)
President and CEO
Piedmont Healthcare System
222 S. Herlong Avenue
Rock Hill, SC 29732

Notices to County:

York County
P. O. Box 66
York, SC 29745
Attention: County Manager Alfred W. Greene (or successor)

Melvin B. McKeown, Jr. (or successor)
McKeown Law Firm
P. O. Box 299
York, SC 29745-0299

(h) Assignment. Except as otherwise provided by applicable law, the Agreement, as amended and modified, and/or this Eighth Addendum may not be assigned by any party without the written consent of the other party.

(i) Successors. This agreement shall be binding upon and enure to the benefit of the parties hereto, their respective successors and assigns.

(j) No third-party beneficiaries. No rights in any third party are created by this agreement, and no person or entity not a party to this agreement may rely on any aspect of this agreement, notwithstanding any representation, written or oral, to the contrary, made by any person or entity.

(k) Multiple counterparts. This Eighth Addendum is executed in multiple counterparts, each of which shall be deemed an original, but all of which collectively shall constitute but one and the same agreement.

(l) Prior Agreements; entire agreement. All obligations of the parties, each to the other, relating to the subject matter of the Agreement, as previously amended or modified, or this Eighth Addendum, contained in any other document or agreement or based on any other communication prior to the execution of this Eighth Addendum are superseded by the Agreement, as amended and modified. The Agreement, as modified by the First, Second, Third, Fourth, Fifth, Sixth, Seventh and this Eighth addenda, constitutes the entire agreement between the parties relating to the subject matter hereof.

IN WITNESS WHEREOF, the undersigned parties have caused this Eighth Addendum to Agreement to be executed under seal as of the date first above written.

TENET HEALTHCARE CORPORATION

By: _____
Reynold J. Jennings
Chief Operating Officer

Attest: _____

Title: Sr. Admin Assistant

AMISUB OF SOUTH CAROLINA, INC.

By: _____
Charles F. Miller
Chief Executive Officer

Attest: _____

Title: Executive Assistant

YORK COUNTY, SOUTH CAROLINA

By: _____
Ada Chisolm-Perry, Vice Chairman
York County Council

Attest: _____
Alfred W. Greene
County Manager

"Doc# 5536140.03"

NINTH ADDENDUM TO AGREEMENT BY AND AMONG TENET HEALTHCARE CORPORATION (FORMED AS A RESULT OF MERGER BETWEEN AMERICAN MEDICAL INTERNATIONAL, INC., AND NATIONAL MEDICAL ENTERPRISES,INC.),AMISUB OF SOUTH CAROLINA, INC., AND YORK COUNTY, SOUTH CAROLINA

THIS NINTH ADDENDUM to Hospital Agreement dated as of December 8, 1980, among American Medical International, Inc., AMISUB of South Carolina, Inc. and York County, South Carolina, as amended and modified from time to time, made and entered into this 5th day of June, 2006, by and among Tenet Healthcare Corporation, a corporation organized under the laws of the State of Delaware, and formed as the result of a merger between American Medical International, Inc., and National Medical Enterprises, Inc. (herein referred to as "AMISUB Parent"), AMISUB of South Carolina, Inc., (herein referred to as "AMISUB"), and York County, South Carolina, a political subdivision of the State of South Carolina (herein referred to as "York County"),

WITNESSETH:

WHEREAS, AMISUB Parent, AMISUB, the trustees of York General Hospital and York County entered into an agreement on or about December 9, 1980 (herein referred to as the "Prior Agreement") pursuant to which the trustees of York General Hospital and York County leased and sold certain property and assets to AMISUB Parent and its subsidiary corporation, AMISUB, for the operation of a hospital in York County, South Carolina; and

WHEREAS, AMISUB Parent and AMISUB constructed and operate a hospital in York County, South Carolina, known as Piedmont Medical Center (the "Hospital") pursuant to the terms and conditions of the Prior Agreement; and

WHEREAS, the Prior Agreement has been amended and modified by a First Addendum thereto dated June 16, 1989, a Second Addendum thereto dated April, 1992, a

NINTH ADDENDUM TO AGREEMENT BY AND AMONG TENET HEALTHCARE CORPORATION (FORMED AS A RESULT OF MERGER BETWEEN AMERICAN MEDICAL INTERNATIONAL, INC., AND NATIONAL MEDICAL ENTERPRISES,INC.),AMISUB OF SOUTH CAROLINA, INC., AND YORK COUNTY, SOUTH CAROLINA

THIS NINTH ADDENDUM to Hospital Agreement dated as of December 8, 1980, among American Medical International, Inc., AMISUB of South Carolina, Inc. and York County, South Carolina, as amended and modified from time to time, made and entered into this ___ day of _____, 2006, by and among Tenet Healthcare Corporation, a corporation organized under the laws of the State of Delaware, and formed as the result of a merger between American Medical International, Inc., and National Medical Enterprises, Inc. (herein referred to as "AMISUB Parent"), AMISUB of South Carolina, Inc., (herein referred to as "AMISUB"), and York County, South Carolina, a political subdivision of the State of South Carolina (herein referred to as "York County"),

WITNESSETH:

WHEREAS, AMISUB Parent, AMISUB, the trustees of York General Hospital and York County entered into an agreement on or about December 9, 1980 (herein referred to as the "Prior Agreement") pursuant to which the trustees of York General Hospital and York County leased and sold certain property and assets to AMISUB Parent and its subsidiary corporation, AMISUB, for the operation of a hospital in York County, South Carolina; and

WHEREAS, AMISUB Parent and AMISUB constructed and operate a hospital in York County, South Carolina, known as Piedmont Medical Center (the "Hospital") pursuant to the terms and conditions of the Prior Agreement; and

WHEREAS, the Prior Agreement has been amended and modified by a First Addendum thereto dated June 16, 1989, a Second Addendum thereto dated April, 1992, a

Third Addendum thereto dated April, 1995, a Fourth Addendum thereto dated June, 1995, a Fifth Addendum thereto dated as of July 1, 1995, a Sixth Addendum thereto dated as of August 25, 1995, a Seventh Addendum thereto dated October 5, 2000, and a Eighth Addendum thereto dated June 4, 2004, (the Prior Agreement, as amended and modified, being referred to herein as the "Agreement"); and

WHEREAS, AMISUB has made application to the South Carolina Department of Health and Environmental Control (DHEC) for the purpose of granting a Certificate of Need to expand AMISUB by 64 beds to be located in the vicinity of Fort Mill, South Carolina, such facility to provide medical / surgical services, emergency room services open 24 hours a day / 7 days a week, inpatient / outpatient surgical services and all the necessary diagnostic and support services expected to provided for the successful support of those services, and

WHEREAS, the Fort Mill campus is a continuation of services provided by AMISUB and AMISUB is the contractual party to the Prior Agreement, the Fort Mill campus would operate under the Prior Agreement, as subsequently amended and modified, as applicable.

WHEREAS, opportunities have arisen for further improvement of services for the residents of York County under Section 3.2 and Section 3.5 of the Agreement, as amended and modified; and

WHEREAS, in order to expand and clarify the obligations and expectations under the Agreement, the undersigned parties desire to amend the Agreement, as previously amended and modified, by the execution and delivery of this Ninth Addendum to the Agreement which, unless extended by written agreement of the parties hereto, shall expire on July 1, 2045.

NOW, THEREFORE, for and in consideration of the premises, the mutual promises contained herein, the sum of Ten Dollars ($10.00) paid by each party to the other, and of other

good and valuable consideration, the receipt, adequacy and sufficiency of which is hereby acknowledged by each party hereto, the undersigned parties, intending to be legally bound, hereby agree as follows:

1. Section 3.5 of the Sixth Addendum of the Agreement, as amended and modified by the Seventh and Eighth addenda thereto, is hereby amended to read as follows:

a) AMISUB has established an urgent care/occupational medicine facility (Facility) in western York County, which provides urgent care for minor emergencies, occupational medicine, including physical examinations, occupational testing/screenings, care for on-the-job injuries and other similar health care services, and which currently is open and staffed between the hours of 8:00 a.m. and 8:00 p.m., Monday through Saturday and 1:30 p.m. on Sundays, except for Christmas, New Years, Easter and Thanksgiving in accordance with the guidance provided by the advisory committee established under the Sixth (6th) Addendum of the Agreement. York County and AMISUB have agreed that an evaluation of the community need for an expansion of hours of operation at this Facility is appropriate to determine how best to serve the residents of western York County in an efficient and cost effective manner. Therefore, effective no later than 300 days following the execution of this Ninth (9th) Addendum the Facility will be open between the

hours of 8:00 a.m. and 12:00 midnight Monday through Saturday and 1:30 p.m. and 12:00 midnight Sundays and AMISUB will implement this change as soon as possible after the execution of this Ninth (9th) addendum, the requisite full time professional staff are employed, and the Facility transitioned. Additionally, effective no later than three (3) full months following the extension of hours to 12:00 midnight the Facility will be open twenty-four hours each day, except that the Facility will be permitted to be closed between the hours of 12.00 midnight and 1:30 p.m. on Sundays. Additionally, the Facility will be permitted to be closed from 12:01 a.m. to 10:00 p.m. Christmas, New Years, Easter and Thanksgiving. Staffing of the Facility will be provided by not less than two (2) licensed physicians. AMISUB will use its best efforts to retain Board Certified or Board Eligible in Emergency Medicine physicians (at least one (1) of whom shall be at the Facility during all operating hours) and adequate support staff.

b) This evaluation shall continue for a period of not less than five (5) years from the first day the Facility begins operation "24 hours each day" as set forth in paragraph a) above. At the conclusion of that five (5) year period, AMISUB shall evaluate the performance of the Facility and may, at its sole discretion, adjust the hours of operation and/or levels of service as

AMISUB determines may be appropriate, but at no time shall the hours of operation or service be less than that which existed prior to the execution of this Ninth Addendum. Failure to make adjustments at the end of the five year period shall not preclude AMISUB from making adjustments at a later time should it determine that adjustments are appropriate.

c) In order to ensure responsiveness to community needs by this Facility, there shall be established an advisory committee comprised of one (1) member of York County Council, three (3) residents of York County Council Districts 2 and/or 3 (as constituted on the date of delivery of this Sixth Addendum) appointed by AMISUB from a list of not less than five (5) nominees for three (3) vacancies, four (4) nominees for two (2) vacancies, and three (3) nominees for one (1) vacancy named by York County Council and one (1) representative of AMI. Such committee shall meet no less often than annually to discuss the need for services in western York County, the manner in which the western York County urgent care facility is meeting such needs and any changes which might be necessary or advisable with respect to the types of services provided or the manner in which services are provided in order to better meet the needs of the residents of western York County. AMISUB agrees to take into consideration any recommendations or requests made by the

advisory committee in connection with its operation of the urgent care facility and its planning with respect thereto and provide a timely written response to any such recommendation or request.

2. Section 3.7 of the Sixth Addendum of the Agreement, as amended and modified by the Seventh and Eighth addenda thereto, is hereby amended to read as follows:

AMI agrees that in the period beginning June 1, 1995, and ending May 31, 1998, it will make investments in land or depreciable or amortizable property located in York County, South Carolina, in an aggregate amount not less than Twenty-Three Million ($23,000,000) Dollars, provided that in the event AMI shall be relieved from the obligation to provide any facility or service described in Section 3.1(b) hereof as a result of the inability to obtain any regulatory approval required therefore, such amount shall be reduced by the estimated cost of such facility or service as set forth in said Section 3.1(b). Thereafter, in each period of twelve (12) months beginning June 1 of a year and ending on May 31 of the next succeeding year, beginning with the twelve-month period starting June 1, 1998, it will invest in land, depreciable or amortizable property, and depreciable property acquired by way of operating lease(s), such leases providing for the payment of ad vorem taxes to York County, shall belocated in York County, South Carolina, and used for the purpose of providing the service required by this Agreement, an amount which, when added to the amount so invested by AMI in the preceding two (2) such twelve (12) month periods, would make the average thereof

PET-EX016.0161

RECORD 004609

equal to or greater than the greater of (i) $4,000,000 or, (ii) one hundred eight percent (108%) of the average of the amounts shown on the financial statements of AMI as depreciation or amortization for property, plant and equipment located in York County for the preceding three (3) such twelve (12) month periods, provided that in no such twelve (12) month period shall the amount actually so invested be less than $1,500,000. Notwithstanding the foregoing, in the event AMI's earnings before depreciation and amortization, as shown in the financial statements of AMI for the twelve (12) month period in question, are less than $4,000,000, the amount required to be reinvested as herein provided during such period shall not exceed an amount equal to fifty percent (50%) of such earnings before depreciation and amortization. Accounting terms used in this Section 3.7 shall be given meaning and applied in accordance with generally accepted accounting principles; depreciation and amortization shall be determined in accordance with American Hospital Association or some other nationally recognized standard therefore.

3. Section 3.14 of the Sixth Addendum, Right of First Refusal; Assumption of Agreement by Successors is hereby amended to read as follows:

(a) Subject to the terms and conditions contained in this Section 3.14, York County is hereby granted a right of first refusal to purchase the Hospital. Except as provided in paragraph (b) hereof, in the event that an agreement for the sale of more than an eighty percent (80%) interest in (i) the Hospital or (ii) the voting securities of AMI, has, subject only to the provisions of this Section 3.14, been entered into, written notice thereof shall be provided to York County. Such notice shall set forth the identity

PET-EX016.0162

RECORD 004610

of the proposed purchaser, the interest proposed to be conveyed and the consideration, or, if the consideration is other than cash, the fair market value of the consideration, allocable to the hospital in the proposed transaction. York County shall have ninety (90) days following receipt of such notice to notify AMI of its election to exercise the right of first refusal herein granted. Notice of exercise of the right of first right of refusal shall be accompanied by a non-refundable good faith check in the amount of fifty thousand dollars ($50,000), which amount shall be credited against the purchase price payable hereunder. The purchase price to be paid by York County shall equal the consideration, or, if the consideration is other than cash, the fair market value of the consideration of the consideration set forth in the notice to York County; provided that (i) if the proposed transaction contemplates a purchase of less than a one hundred percent (100%) interest, York County shall nevertheless purchase a one hundred percent (100%) interest and the consideration to be paid by York County shall equal the consideration set forth in the notice multiplied by a fraction, the numerator of which is 1 and the denominator of which is the percentage interest contemplated in the proposed transaction expressed as a decimal, and (ii) if the proposed transaction contemplated is a tax free exchange of assets pursuant to Section 1031 of the Internal Revenue Code of 1986, as amended, the purchase price to be paid by York County shall be increased to provide an equivalent fair market purchase price net of taxes and Medicare recapture resulting from the failure to qualify for Section 1031 treatment. The purchase price shall be paid in cash at closing which shall be a date established by York County in its notice to AMI of its election to exercise the right of first refusal, which date shall be not later than one hundred eighty (180) days following the date of such notice to AMI.

(b) The right of first refusal granted in this Section 3.14 shall not apply to any of the following transactions:

(i) any sale, conveyance or other transfer to any affiliate, as hereinafter defined; or

(ii) any sale, conveyance or other transfer involving the interest in AMI or the Hospital set forth in paragraph (a), above, together with equivalent or greater interest in two or more acute care hospitals owned by an Affiliate or Affiliates, and/or the voting securities thereof; or

(iii) any sale, conveyance or other transfer as part of a transaction whereby AMI retains operating responsibilities for the hospital pursuant to a lease, management contract or other agreement.

For purpose of this paragraph (b), the term "Affiliates" means a corporation, partnership, joint venture, association, business trust or similar entity organized under the laws of the United States of America or any state thereof which is directly or indirectly controlled by AMI, AMI Parent or Tenet Healthcare Corporation ("Tenet"), by any such entity or by any person which controls AMI, AMI Parent, Tenet or any other Affiliate. For purposes of this definition, "control" means the power to direct the management and policies of a person through the ownership of its voting securities or the right to designate or elect members of its board of directors or governing board or body by contract or otherwise.

(c) Unless York County shall be entitled to exercise, and shall have exercised the right to purchase granted in paragraph (a) hereof, in the event of any transfer of the Hospital or AMI to anyone other than AMI Parent, there shall be delivered to York County an agreement of the transferee expressly assuming the obligations of AMI under this Agreement

PET-EX016.0164

RECORD 004612

(d) For purposes of this Section 3.14 and Section 4.3 of the Sixth Addendum, the term "Hospital" means the approximately (as of July 31, 1995) forty-five acre campus on which Piedmont Medical Center is located, all buildings and other improvements thereon owned by AMI, and all hospital or health care related machinery, equipment, furnishings and supplies therein or thereon, as the same shall be constituted on the date of receipt by AMI of notice of the intent of York County to purchase the Hospital pursuant to either of such Sections, subject to any prior dispositions and subject to any leases or other contracts relating thereto; such term shall not included any other assets shown as such on the balance sheets of AMI.

4. Guaranty by AMISUB Parent.

AMISUB Parent hereby jointly and severally guarantees all representations, warranties, agreements, covenants and obligations of AMISUB contained in this agreement.

5. Prior Agreement ratified and confirmed.

Except as modified herein, the Prior Agreement as amended and modified by the First, Second. Third, Fourth, Fifth, Sixth, Seventh, and Eighth addenda thereto, is hereby ratified and confirmed. Of specific note is the reaffirmation of Subsection (c) of Section 3.13 of the Sixth Addendum of the Agreement, as previously amended and modified in the Eighth Addendum, (c) In order to permit York County or its auditors, consultants, representatives or agents to monitor and determine the observance and performance of the covenants, conditions or agreements in this Agreement on the part of AMISUB and AMISUB Parent, AMISUB, AMISUB Parent and the "Hospital" hereby grant to York County, its successors, auditors, consultants, accountants, attorneys and agents the right, upon reasonable notice, to inspect, examine, and review books, records and reports of AMISUB Parent, AMISUB and the

"Hospital" reasonably necessary in order to determine compliance, observance and performance by AMISUB Parent, AMISUB and the "Hospital" of and with the covenants, conditions, provisions and agreements contained in the Agreement, as amended and modified. In the event AMISUB, AMISUB Parent, or the "Hospital" determines that any such request is not reasonably necessary to York County's ability to monitor or determine the observance or performance of the covenants, conditions, or agreements in this Agreement or is otherwise unreasonable, AMISUB, AMISUB Parent, or the "Hospital" shall provide written objection to York County, describing the specific grounds of objection. Within ten (10) days upon the County's receipt of said objection, the parties shall meet and attempt to resolve the issues. Should the parties be unable to resolve their differences at said meeting, they shall jointly retain a mutually agreeable consultant to determine whether the request at issue is reasonably necessary to York County's ability to monitor or determine the observance or performance of the covenants, conditions, or agreements in this Agreement and is otherwise reasonable. The provisions of this Ninth Addendum shall be cumulative and in addition to, and not in substitution for any other rights or remedies which York County may have under this Agreement or otherwise, and this provision shall not preclude or limit York County in the exercise of any other right or remedy under this Agreement or at law or in equity.

5. Miscellaneous provisions.

(a) Enforceability. All of the terms, provisions and conditions of the Agreement, as amended and modified, shall be binding upon and enforceable by the respective parties, their successors, representatives, officials, officers, agents, employees and assigns.

PET-EX016.0166

RECORD 004614

(b) Amendment. The Agreement and this and prior addenda may be amended or modified only by a written document which has been signed by the parties hereto or by their duly authorized officers or officials.

(c) No waiver. No waiver of a breach of any of the covenants, promises or provisions contained in the Agreement, as amended or modified, and this Ninth Addendum shall be construed as a waiver of any succeeding breach of the same covenant or promise or any other covenant or promise thereof.

(d) Governing law; choice of forum. The Agreement, as amended and modified, and this Ninth Addendum shall be governed by the laws of the State of South Carolina, and by the execution of this agreement, the parties consent to the exclusive jurisdiction of the state and federal courts of South Carolina, for resolution of any dispute arising hereunder.

(e) Severability. In the event that any part or provision of the Agreement, as amended and modified, or this Ninth Addendum shall be determined to be invalid and/or unenforceable, the remaining parts and provisions which can be separated from the invalid and/or unenforceable provision or provisions shall continue in full force and effect.

(f) Captions. The captions and headings of the paragraphs of this Ninth Addendum are for convenience only and are not to be used to interpret or define any or all of the provisions of the Agreement, as amended or modified, or provisions of this Ninth Addendum.

(g) Notices. All notices pertaining to the Agreement, as amended or modified or this Ninth Addendum shall be in writing and addressed as set forth below, and shall be deemed properly delivered, given or served when (i) personally delivered, or (ii) sent by overnight courier, or (iii) four (4) days have elapsed following the date mailed by certified or registered mail, postage prepaid.

Notices to AMISUB and AMISUB Parent:

Tenet Healthcare Corporation
c/o Sr. Vice President, Regional operations
15450 South Outer Fourty Dr
Suite 120
Chesterfield, MO 63017

Tenet Healthcare Corporation
c/o Chief Operating Officer
13737 Noel Road
Dallas, TX 75240

Mr. Charles F. Miller (or successor)
President and CEO
Piedmont Healthcare System
222 S. Herlong Avenue
Rock Hill, SC 29732

Notices to County:

York County
P. O. Box 66
York, SC 29745
Attention: County Manager Alfred W. Greene (or successor)

Melvin B. McKeown, Jr. (or successor)
McKeown Law Firm
P. O. Box 299
York, SC 29745-0299

(h) Assignment. Except as otherwise provided by applicable law, the Agreement, as amended and modified, and/or this Ninth Addendum may not be assigned by any party without the written consent of the other party.

(i) Successors. This agreement shall be binding upon and enure to the benefit of the parties hereto, their respective successors and assigns.

(j) No third-party beneficiaries. No rights in any third party are created by this agreement, and no person or entity not a party to this agreement may rely on any aspect of this

agreement, notwithstanding any representation, written or oral, to the contrary, made by any person or entity.

(k) Multiple counterparts. This Ninth Addendum is executed in multiple counterparts, each of which shall be deemed an original, but all of which collectively shall constitute but one and the same agreement.

(l) Prior Agreements; entire agreement. All obligations of the parties, each to the other, relating to the subject matter of the Agreement, as previously amended or modified, or this Ninth Addendum, contained in any other document or agreement or based on any other communication prior to the execution of this Ninth Addendum are superseded by the Agreement, as amended and modified. The Agreement, as modified by the First, Second, Third, Fourth, Fifth, Sixth, Seventh, Eighth and this Ninth addenda, constitutes the entire agreement between the parties relating to the subject matter hereof.

IN WITNESS WHEREOF, the undersigned parties have caused this Ninth Addendum to Agreement to be executed under seal as of the date first above written.

TENET HEALTHCARE CORPORATION

By: _____

Title: _____

Attest: _____

Title: _____

AMISUB OF SOUTH CAROLINA, INC.

By: _____
Charles F. Miller
Chief Executive Officer

Attest: _____

Title: _____

YORK COUNTY, SOUTH CAROLINA

By: _____
T. Steve McNeely, Chairman
York County Council

Attest: _____
Alfred W. Greene
County Manager

Tenet Healthcare System

I have reviewed the attached 2009 Annual Report to York County Council and, to the best of my knowledge, believe it to be accurate in reporting on the operations of Piedmont Medical Center as required in the sixth addendum to the York County Contract dated August 1995.

John Holland
Sr. Vice President Regional Operations

Petitioner's Trial Exhibit 017A

Table of contents

Description *page*

Vision statement....3
Board of Governors....4
Advisory board members....5-6
Annual financial statement....7
Property Tax schedule....8
Depreciation report....9
Capital investment....10
Equipment purchases....11
Services to medically indigent....12
Resident Charity and Bad Debt....13
Services to York County Detention Center....14
Emergency Department services....15
Physician recruitment....16
Emergency Medical Services....17
Emergency Medical Services response times....18
Emergency Medical Services equipment and resource allocation....19
Employee information....20
Medicaid cost/charge ratios....21
Pricing....22
Medpar data....23
Licensed beds....24
Scholarships, education and donations....25-27
Physician satisfaction survey summary....28
Continuing education report....29-30
Medical indigent assistance guidelines....31-60

PMC.2012.00000237
PET-EX017A.0002

RECORD 004620

Vision Statement

Piedmont Medical Center will be the leading resource for healthcare services in the upstate of South Carolina.

PMC.2012.00000238

PET-EX017A.0003

RECORD 004621

Board of Governors for 2009

Voting Members

Joe Robinson – Chair
Charles F. Miller, CEO – Secretary
Bill Alexander
Chantay Bouler
Michael Cowen, MD
Joseph Duschl [1] [2]
Alex Espinal, MD
John Hoitink, MD
Ted Matthews
Jay Shah, MD
Skip Tuttle [1] [3]
Karen Walto
James Welsh, MD

Non-Voting members

Sushil Singhi, MD – Chief of Staff
Dorcas Hinson – President, Volunteer Auxiliary
Claudia Douglass – Piedmont Senior Vice President, Operations and Chief Operating Officer
Mary Cline – Piedmont Vice President of Business Development
Don Currier – Piedmont Vice President, Human Resources
Mary Kaye Halterman – Piedmont Vice President – Patient Care Services and Chief Nursing Officer
Jawanna King – Piedmont Hospital Compliance Officer
Richard Patterson, MD – Chief Medical Officer
Jay Pennisson – Piedmont Vice President, Finance and Chief Financial Officer

[1] *Selected from York County nominees*
[2] *Resident - Western York County*
[3] *At-large member*

PMC.2012.00000239
PET-EX017A.0004

RECORD 004622

Advisory board members for 2009

Clergy:

Pastor James Barber	Rock Hill	Rev. Andy Barnett	Rock Hill
Rev. Dennis Buchanan	Rock Hill	Rev. Craig Butler	Rock Hill
Rev. Darryl Colston	Rock Hill	Rev. Roland Dry	Rock Hill
Rev. Warren Fowler	Richburg	Rev. Sally Franklin	Fort Mill
Rev. Carlos Gardner, Jr.	Lancaster	Father John Giuliani	Rock Hill
Rev. Alice Haynes	Rock Hill	Rev. Andrew Housley	Rock Hill
Rev. Sandra King	Rock Hill	Rev. Barry Lambert	Fort Mill
Rev. Robert Lindsay	Rock Hill	Rev. Charlie Mason, Jr.	Rock Hill
Rev. Alvin McLamb	Rock Hill	Rev. Tom McPhail	York
Rev. William Shytle	Rock Hill	Rev. Jesse Sims	Rock Hill
Rev. Kyle Sims	Smyrna	Rev. Jerry Sosebee	Rock Hill
Rev. David Stanford	Clover	Rev. Patricia Starr	Clover
Rev. Wallace Tinsley	York	Rev. Kenneth Walters	Rock Hill
Rev. John Warren	Fort Mill		

Retired Physicians:

Hal Anderson, MD	Rock Hill	George Bonham, MD	Rock Hill
John Boulware, MD	Rock Hill	David Cowan, MD	Rock Hill
Max Culp, MD	Rock Hill	L.D. Frederick, MD	Rock Hill
Dennis Gettelfinger, MD	Rock Hill	William Gregory, MD	Rock Hill
William Henry, MD	Fort Mill	Cloud Hicklin, MD	Chester
Hartwell Hildebrand, MD	Rock Hill	William Hull, MD	Rock Hill
Joel Huneycutt, MD	Lake Wylie	Matthew Johnson, MD	Rock Hill
Frank Kiser, MD	Rock Hill	Kenneth Laughlin, MD	Rock Hill
Francis Lemmon, MD	Rock Hill	Richard McCoy, MD	Rock Hill
Rion Rutledge, MD	Rock Hill	Robert Scoville, MD	Rock Hill
Frank Strait, MD	Rock Hill	Walter Tiedeman, MD	Rock Hill
W.B. Ward, MD	Rock Hill	Robert Wilson, MD	Rock Hill
Dianne West	Sharon		

PMC.2012.00000240

PET-EX017A.0005

RECORD 004623

Advisory board members for 2009, continued

Seniors:

Ricardo Bach	Lake Wylie	Joanne Cauthen	Rock Hill
Al Crouch	Rock Hill	Jennifer Davis	Rock Hill
Wendy Duda	Rock Hill	Robert Hope	Rock Hill
Helen Johnston	Fort Mill	Elizabeth Killian	Clover
Joan McMaster	Rock Hill	Bob Meeker	Lake Wylie
Otis Patton	Rock Hill	Jean Sherer	Rock Hill
Juanita Toatley	Rock Hill	Barbara Williams	Rock Hill

Western York County:

Debra Brown	Clover
Bill Whitesides	Smyrna
Joe Cox	York County Council
Thomas Smith	York County Council
Charles Miller	Piedmont Medical Center President and CEO

Women's Services:

Mary Ann Aberman	Rock Hill	Martha Bollinger	Rock Hill
Dorcas Hinson	Rock Hill	Elaine Copeland	Rock Hill
Phyllis Fauntleroy	Rock Hill	Sherry Glenn	Rock Hill
Beverly Kelly	Lake Wylie	Sue Kirsh (deceased 02/09)	Clover
Shirley MacMillan	Lake Wylie	Pam Morrell	Rock Hill
Barbara Robinson	Rock Hill	Kara Tipp	Rock Hill
Judy Tuttle	Rock Hill	Tammie Welch	Fort Mill
Dot Welchel	Blackstock	Gladys Whitesides	Smyrna
Pansy Yates	Rock Hill		

PMC.2012.00000241

PET-EX017A.0006

RECORD 004624

Annual Financial Statement FY '09 - Ending May 31, 2009

Funds Available	2009 (000s)
Piedmont Medical Center received:	
For inpatient services	$332,485
For outpatient services	$239,028
Total revenue	$571,514
In Addition, the Medical Center Received,	
From Cafeteria Activity	
From Other Non-Patient Activity	$3,334
Total Non-Patient Revenue	$3,334
Piedmont did not receive full payment for services:	
From Government and Third-Party Payors	$281,596
From Those Unwilling to Pay	$26,292
From Those Unable to Pay	$20,574
From Compact with Uninsured Total	$11,107
Revenue Not Received	***$339,569***
Total Funds Available	$235,278
FUNDS APPLIED	
Piedmont Medical Center Applied Funds:	
To Pay Full- and Part-Time Employees	$68,310
To Provide Employee Benefits	$15,278
To Purchase Supplies, Utilities, Insurance and Other Expenses	$97,094[1]
To Pay Depreciation and Amortization	$10,316
To Pay Interest on Debt	$16,287
Total Expenses	***$207,286***
Pre-Tax Income	$27,993
Federal Inc Taxes	$6,340
State Inc Taxes	$906
State Franchise Taxes	$90
Property Taxes	$2,011
Business License Taxes	$175
Indigent Care Taxes	$7,602
Total Tax Expense	***$17,124***
After Tax Income	$10,869
Capital Expenditures	***$10,089***

(1) This amount includes corporate overhead.

Property Tax Payments Calendar Year 2008

School Operations	$927,304.24
School Debt Service	$325,021.90
City Operations	$533,407.49
County Operations	$255,518.97
County Debt Service	$55,448.09
Library	$25,723.39
Culture and Heritage	$16,577.31
York Tec College	$24,008.51
Unincorporated County Millage	$1,181.55
Special Fire District	$569.10
Total	**$2,164,760.54**

Depreciation Reported for Piedmont Medical Center

Medicare Cost Report (Ending April 30, 1996)	$2,957,674
Medicare Cost Report (Ending April 30, 1997)	$3,643,810
Medicare Cost Report (Ending May 31, 1998)	$4,326,446
Medicare Cost Report (Ending May 31, 1999)	$5,047,537
Medicare Cost Report (Ending May 31, 2000)	$5,040,228
Medicare Cost Report (Ending May 31, 2001)	$6,598,342
Medicare Cost Report (Ending May 31, 2002)	$7,343,714
Medicare Cost Report (Ending May 31, 2003)	$8,458,222
Medicare Cost Report (Ending May 31, 2004)	$7,940,379
Medicare Cost Report (Ending May 31, 2005)	$7,701,444
Medicare Cost Report (Ending May 31, 2006)	$7,307,246
Medicare Cost Report (Ending May 31, 2007)	$8,067,789
Medicare Cost Report (Ending May 31, 2008) (1) (2)	$8,788,613
Medicare Cost Report (Ending May 31, 2009) (1) (2)	$9,336,025

(1) Unaudited

(2) PMC book depreciation prior to corporate year-end adjustments. Excludes amortization (computer software and intangible).

Calculation of Required Minimum Capital Investment

AMI (Tenet Healthcare System) agrees that in the period beginning June 1, 1995, and ending May 31, 1998, it will make investments in land or depreciable or amortizable property located in York County, South Carolina, in an aggregate amount not less than $23,000,000.

Period ending	*Capital expended*
FY96 (June 1, 1995 - May 31, 1996)	$ 9,037,474
FY97 (June 1, 1996 - May 31, 1997)	$20,307,000
FY98 (June 1, 1997 - May 31, 1998)	$15,296,000
FY99 (June 1, 1998 - May 31, 1999)	$ 8,330,000
FY00 (June 1, 1999 - May 31, 2000)	$ 6,286,533
FY01 (June 1, 2000 - May 31, 2001)	$19,371,848
FY02 (June 1, 2001 - May 31, 2002)	$21,186,311
FY03 (June 1, 2002 - May 31, 2003)	$14,265,756
FY04 (June 1, 2003 - May 31, 2004)	$ 5,142,463
FY05 (June 1, 2004 - May 31, 2005)	$ 8,426,403
FY06 (June 1, 2005 - May 31, 2006)	$12,573,989
FY07 (June 1, 2006 - May 31, 2007)	$22,650,453 (A)
FY08 (June 1, 2007 - May 31, 2008)	$13,912,248
FY09 (June 1, 2008 - May 31, 2009)	$10,089,419
Total Capital Investment to Date	***$186,875,897***

Calculations for contract year ending May 31, 2009:

1) $4,000,000.00, or,
2) 108% of $8,730,809 (average of most recent three years' depreciation) = $9,429,274 but no less than $1,500,000

- Therefore required minimum capital for 2009 = $9,429,274
- Average actual capital spent (contract year ending May 31, 2009 and preceding two years)= 15,550,707

Obligation under paragraph 3.7 of the sixth addendum of the Agreement exceeded in 2009 by $660,146

(A) Includes land purchase of $8,581,257

Descriptive List of Capital "Equipment" Purchased (June 1, 2008 to May 31, 2009):

A. Cost basis greater than $250,000

Item	Capital Cost
34008756 Enterprise Wireless LAN	$289,226
34007720 Fort Mill Hospital Pre-design	$465,532
34008502 Piedmont Internal Medicine & Family Practice at York	$665,788
34007924 MediTech Upgrade	$1,627,288
34007808 The Imaging Center at Baxter Village	$5,048,423
Total:	***$8,096,258***

C. Cost basis greater than $100,000

Item	Capital Cost
34008505 Rock Hill Family Practice	$189,965
Total:	***$189,965***

Note: *This schedule does not include equipment valued under $100,000.*

Services to the Medically Indigent (June 1, 2008 - May 31, 2009)

A. York County Write-offs

1. 30 Outpatient accounts	$ 268,357

B. MIAP and Other Non Statutory Charity Write-Offs

1. 588 Inpatient accounts	$13,167,849
2. 780 Outpatient accounts	$ 2,340,596
3. Additional Charity Reserves	$ 4,797,093
A - B. ***Total Charity Care***	***$20,573,895***
Other Uncompensated Care (Bad Debt Provision)	$26,291,962
D. Compact with the Uninsured Discounts	$11,107,208

E. Indigent Care Taxes Paid

To State of SC	$7,165,472
To York County	$ 471,831
Total	*$7,637,303*

Calculation of required indigent services for June 1, 2008 - May 31, 2009:

$662,831 x (.97734) = $647,811

Note: CPI decreased -4.96 points or -2.3% (6/08, 218.815 and 5/09, 213.856) = .97734

Schedule of York County Resident Charity and Bad Debts

A. Charity

York County	$17,412,804
Other Counties or Unclassified	$3,161,091
All counties	$20,573,895

B. Bad debt *

York County	$23,960,356
Other Counties or Unclassified	$2,331,606
All counties	*$26,291,962*

*Bad debt provision based on account assignments to collection agency.

PMC.2012.00000248
PET-EX017A.0013

RECORD 004631

Services, assistance, and supplies provided to York County Detention Center

York County Detention Center Accounts

Patient Number	Total Charges	Expected Reimbursement
18567834	$ 408.00	$ 250.00
18729061	$ 895.30	$ 433.96
18885830	$1,292.55	$ 708.34
18898460	$1,327.60	$ 774.19
Total	***$3,923.45***	***$2,166.49***

Description of Emergency Department Services (June 1, 2008- May 31, 2009)

Total Volume: 59,789

Acuity levels of patients treated in the Emergency Department (based on charge levels):

Level from least to most severe	Volume
I	768
II	14,986
III	23,893
IV	12,144
V	5,998
Critical Care	110
0	1,890

PMC.2012.00000250

PET-EX017A.0015

RECORD 004633

Physicians joining Piedmont's staff June 1, 2008 through May 31, 2009

New Practitioner	Status	Specialty
Dharmendra Bhaskaran, MD	Active	Internal Medicine
Rene Herlong, MD	Consulting	Pediatric Cardiology
Graham Bullard, MD	Courtesy	Pain Management
Jimmy Antezana, MD	Active	Vascular Surgery
Brian Pope, MD	Courtesy	Family Practice
Robert McCammon, MD	Consulting	Radiation Oncology
Jerome Butler, MD	Consulting	Radiation Oncology
Brian Walker, DO	Courtesy	Family Practice
Paul Kim, MD	Courtesy	Neurosurgery
Geralyn Campi, MD	Active	Internal Medicine
Christopher Jones, MD	Active	Otolaryngology
Sally Wooten, MD	Active	Critical Care
Elizabeth Bumgarner, MD	Active	Pediatrics
Douglas Villaret, MD	Active	Otolaryngology
Daniel Bauer, MD	Active	Internal Medicine
Amsalu Bizuneh, MD	Active	Internal Medicine
Jared Browning, MD	Consulting	Telemedicine
John Chang, MD	Consulting	Telemedicine
Jeffrey Zorn, MD	Consulting	Telemedicine
Eugene Kim, MD	Active	Critical Care
Jeanea Hundley, MD	Active	Emergency Medicine
Sameer Vemuri, MD	Consulting	Physical Med/Rehabilitation
Stuart Jarrell, MD	Active	Neurosurgery
Chad Eller, MD	Active	Emergency Medicine
William Bragdon, MD	Courtesy	Psychiatry
Marial Cobb, MD	Consulting	Telemedicine
Darius Bulczack, MD	Consulting	Telemedicine
Dhawal Goradia, MD	Consulting	Telemedicine
David Wells, MD	Courtesy	Neonatology
Brian Erb, MD	Active	Nephrology
Shashank Mishra, MD	Courtesy	Family Practice
Jeremy Johnson, DO	Courtesy	Emergency Medicine
Anoma Gamage,MD	Courtesy	Family Practice
Jonathan Liu, MD	Courtesy	Family Practice
Dara Josiah-Howze, MD	Active	Psychiatry
Aydrian Thomas, MD	Courtesy	Family Practice
Wilkins, Thomas, MD	Courtesy	Emergency Medicine
Shepard, Jaime, MD	Consulting	Telemedicine
Angel Perez, MD	Courtesy	Psychiatry

Emergency Medical Services

Objective: Promote educational opportunities for agencies providing Emergency Medical Services for York County.

- $ Maintain physician medical control for all agencies providing emergency medical services.
- $ Working to bring more educational opportunities for EMS providers to York County through York Technical College and Piedmont EMS.

Objective: Promote community health education and safety programs.

- $ Continue as lead agency of York County Safe Kids program.
- $ Continue to conduct child passenger safety checks at EMS headquarters on Heckle Boulevard. Explore additional locations to conduct child passenger safety checks.
- $ Conduct a study to evaluate the need for pre-hospital public education in our community. Develop and provide programs to meet those needs.

Objective: Enhance the level of pre-hospital care given in York County.

- $ Conduct research to identify best practice in pre-hospital care.
- $ Enhance protocols to provide best practice.
- $ Develop at least one medical pilot program for pre-hospital care.
- $ Implement Automatic Vehicle Location System in conjunction with York County.

PMC.2012.00000252

PET-EX017A.0017

RECORD 004635

Emergency Medical Services (EMS) - Response Times (June 1, 2008-May 31, 2009)

Total EMS calls*:	15,230
Total Emergency Dispatches:	12,216 (80%)
Quick Response Unit	979

*Reconciled to York County Data

District	Total District Calls	Total Emergency Responses
Eastern York County	10,981	8,665
Clover/Lake Wyle	1,636	1,388
City of York	1,929	1,604
Western York County	684	559

District	Contract Response Provision (in minutes)	Average Response Times (in minutes)
Eastern York County	12	9:01
Clover/Lake Wylie	18	10:50
City of York	12	8:05
Western York County	20	16:30

York County Emergency Response Districts

Eastern York County (12 minutes)
Bethesda
City of Rock Hill
Flint Hill
Fort Mill
Lesslie
Newport
Oakdale
Riverview
Tega Cay

Western York County (20 minutes)
Bethany
Bullock
Hickory Grove
McConnells
Sharon
Smyrna
York Fire District (out of city)

City of York: 12 minutes

Clover/Lake Wylie & Bethel - Clover Fire District: 18 minutes

Projected population FY 2009	221,346	Next Trigger for New Equipment
Eastern York County	154,942	166,500
Western York County	66,403	72,500

Emergency Medical Services Equipment/Resource Allocation

I. As required by the contract, all ambulances operate as Advanced Life Support units, 24 hours a day, 365 days a year.

II. As required by the contract, Piedmont Medical Center is required to operate ambulance stations in Eastern York County and three ambulance stations in Western York County as follows:

Eastern York County:
One unit on Heckle Boulevard
One 12-hour unit on Heckle Boulevard
One Quick Response Unit at Heckle Boulevard
One unit on Black Street
Three EMS units in Fort Mill area-Tega Cay, Baxter and downtown Fort Mill
One unit at Exit 82/ Riverview Road
** Approved for FY 09-additional 12-hour peek unit to Rock Hill area*

Western York County:
One unit at Piedmont West station
One unit in Sharon
One unit at Clover station
One 24-hour unit at Newport station
One 24 ALS Quick Response Vehicle (QRV) at Piedmont West

Employee Information as of May 31, 2009

	Full Time	Part Time	PRN
Piedmont Medical Center	1,118	108	238
Carolina Surgical Center	18	10	4
Totals	*1,136*	*118*	*242*

Medicaid Cost/Charge Ratios:

Inpatient:	28.23%
Outpatient:	32.94%

PMC.2012.00000256
PET-EX017A.0021
RECORD 004639

Contract Reporting Year Ending May 31, 2009

"Pricing"

As of the filing of this annual report, Amisub of South Carolina, d/b/a Piedmont Medical Center, is in full compliance with all requirements of Section 3.1 (e) Pricing as amended and modified by the First, Second, Third, Fourth, Fifth, Sixth, Seventh and Eighth addenda to the agreement between York County, South Carolina and Amisub.

Attached is the MedPar report reflecting Medicare inpatient charge data for the federal year beginning October 1, 2007 and ending September 30, 2008.

(A) Comparison of reported charge data between average charges 2007 to 2008 shows the following rates of increase among local hospital providers:

Piedmont Medical Center	2.3%
Carolinas Medical Center	2.0%
Carolinas Medical Center- Mercy (includes CMC-Pineville)	7.3%
Gaston Memorial	5.7%
Presbyterian Hospital	9.8%

MEDPAR DATA
Federal Fiscal Year October 1, 2007 Through September 30, 2008
Medicare Inpatient Data

Hospital Comparison using 2008 Medpar Data by Specialty

Salary and Wages	Carolinas Medical Center (340113)	Carolinas Medical Center-Mercy (340008)	Gaston Memorial Hospital (340012)	Mary Black Memorial Hospital (420033)	Palmetto Health Baptist Columbia (420054)	Palmetto Health Richland Memorial (420010)	Piedmont Medical Center (420002)	Presbyterian Hospital/Uptown (340053)	Providence Hospital (420026)	Spartanburg Regional Medical Center (420007)	Springs Memorial Hospital (420035)
CARDIOVASCULAR MEDICINE	$18,971.30	$15,826.30	$16,827.82	$27,345.46	$31,021.77	$30,717.26	$18,214.97	$16,720.09	$18,728.38	$28,646.80	$26,326.42
CATHET	$48,896.60	$48,826.93	$46,413.61	$56,166.76	$42,085.91	$59,896.43	$44,899.97	$47,057.11	$50,266.79	$48,712.41	$50,668.37
DENTAL/ORAL	$24,832.77	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
DERMATOLOGY	$14,701.85	$13,890.87	$12,447.46	$23,160.07	$28,858.08	$26,322.35	$16,478.82	$14,878.42	$13,277.51	$26,341.54	$22,882.85
ENDOCRINOLOGY MEDICINE	$13,836.37	$12,576.12	$11,871.22	$23,443.74	$26,395.41	$28,436.37	$16,819.55	$13,954.11	$18,324.16	$25,910.89	$22,166.03
ENDOCRINOLOGY SURGERY	$26,446.04	$0.00	$25,625.06	$0.00	$36,962.94	$55,936.00	$23,616.26	$27,094.17	$18,470.06	$37,933.04	$0.00
ENT MEDICINE	$14,410.16	$10,837.68	$12,955.40	$0.00	$14,759.00	$20,861.65	$11,944.39	$11,052.60	$17,002.47	$24,860.43	$20,830.53
ENT SURGERY	$29,109.30	$0.00	$0.00	$0.00	$0.00	$91,295.12	$0.00	$0.00	$0.00	$40,217.99	$0.00
GASTROINTESTINAL MEDICINE	$19,934.17	$17,263.28	$16,349.15	$28,018.11	$27,717.20	$33,789.80	$18,778.17	$16,632.58	$17,729.27	$31,355.77	$27,168.93
GENERAL MEDICINE	$14,483.60	$12,445.00	$12,761.38	$16,695.12	$23,279.87	$20,189.49	$14,446.42	$12,850.58	$13,939.13	$23,041.59	$12,840.17
GENERAL SURGERY	$68,880.89	$55,836.66	$47,206.82	$63,932.52	$69,324.19	$136,377.69	$71,615.50	$57,662.13	$66,123.64	$100,361.21	$74,267.44
GYNECOLOGY	$20,541.91	$15,858.81	$13,782.70	$23,210.88	$34,005.93	$28,585.79	$19,587.72	$16,907.77	$20,849.82	$23,892.62	$37,255.58
HEMATOLOGY	$16,321.76	$20,212.98	$16,139.68	$25,872.01	$30,430.82	$30,141.09	$21,382.97	$21,814.00	$14,762.05	$25,845.35	$23,041.42
HIV INFECTIONS	$23,020.53	$26,191.58	$36,431.94	$0.00	$0.00	$63,937.09	$0.00	$26,845.00	$0.00	$0.00	$0.00
INFECTIOUS DISEASES	$40,819.35	$28,803.35	$28,061.46	$50,770.33	$61,250.56	$66,169.54	$52,054.77	$37,416.21	$40,421.43	$54,360.50	$59,224.22
MAJOR TRAUMA	$33,880.46	$0.00	$24,139.87	$0.00	$31,139.33	$48,371.58	$0.00	$18,228.09	$25,501.00	$42,164.89	$0.00
NEPHROLOGY	$16,806.00	$16,806.07	$15,774.82	$31,666.28	$32,444.26	$28,157.69	$24,204.36	$20,722.83	$23,455.90	$36,295.21	$30,562.74
NEUROLOGICAL MEDICINE	$22,423.60	$16,477.03	$15,771.50	$28,459.39	$32,360.87	$34,236.14	$19,618.03	$19,443.90	$16,786.35	$33,679.14	$33,959.53
NEUROSURGERY	$48,887.81	$32,763.28	$30,116.28	$25,901.86	$63,261.00	$76,491.68	$25,462.48	$36,167.66	$27,864.98	$50,800.35	$0.00
OBSTETRICS - DELIVERED	$14,868.15	$0.00	$6,354.46	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$13,558.20	$0.00
OBSTETRICS - NON DELIVERED	$0.00	$0.00	$0.00	$0.00	$0.00	$16,801.54	$0.00	$0.00	$0.00	$0.00	$0.00
ONCOLOGY MEDICINE	$25,629.50	$18,527.99	$19,665.47	$55,709.22	$50,367.77	$57,021.61	$25,831.10	$33,554.03	$23,988.17	$36,246.61	$40,795.30
ONCOLOGY SURGERY	$53,880.69	$30,069.59	$26,404.40	$25,025.60	$71,316.65	$51,476.57	$26,215.62	$33,761.51	$0.00	$35,655.98	$48,561.60
OPHTHEARY	$100,544.49	$87,877.98	$71,694.64	$0.00	$0.00	$184,232.09	$72,726.03	$95,042.60	$84,879.01	$137,069.19	$0.00
OPTHALMOLOGY	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$14,121.09	$0.00	$0.00	$0.00
ORTHOPEDIC MEDICINE	$16,544.73	$16,164.47	$12,698.98	$21,494.53	$27,930.24	$28,009.44	$17,954.31	$18,251.38	$14,224.98	$27,483.22	$21,317.59
ORTHOPEDIC SURGERY	$36,167.60	$29,211.94	$25,566.89	$48,651.40	$51,439.67	$54,312.99	$27,997.26	$26,004.59	$35,021.44	$46,009.69	$50,040.96
PLASTIC SURGERY	$33,871.49	$26,316.38	$26,659.17	$32,680.54	$60,990.60	$58,637.44	$66,476.88	$33,056.26	$34,773.14	$52,276.51	$28,714.71
POISONING/DRUG TOX/COMP. OF TX	$22,824.61	$15,850.64	$14,604.21	$12,905.05	$23,482.63	$27,895.68	$16,930.00	$17,805.22	$12,534.34	$32,048.88	$19,612.92
PSYCHIATRY	$12,830.72	$10,306.80	$10,530.26	$28,876.33	$28,244.12	$24,775.52	$13,750.43	$12,773.83	$13,261.15	$27,362.77	$0.00
PULMONARY MEDICINE	$27,237.37	$20,222.86	$16,019.86	$52,513.94	$40,878.83	$40,760.21	$27,122.02	$29,666.33	$28,858.49	$35,119.28	$35,292.09
SPINAL FISION SURGERY	$64,892.43	$57,482.67	$29,911.38	$89,644.30	$79,916.61	$132,095.37	$45,735.46	$67,516.90	$95,699.06	$68,365.89	$0.00
SUBSTANCE ABUSE	$16,278.04	$9,809.27	$15,950.10	$0.00	$0.00	$35,704.89	$0.00	$15,784.40	$0.00	$35,009.26	$0.00
THORACIC SURGERY	$58,085.29	$54,761.59	$39,850.59	$0.00	$75,885.66	$78,954.53	$46,284.02	$48,760.91	$56,357.57	$69,746.52	$51,812.05
TRANSPLANT	$127,889.69	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
UROLOGY MEDICINE	$20,736.97	$15,261.62	$13,542.01	$23,176.02	$27,586.61	$28,401.31	$16,888.97	$16,600.75	$15,849.04	$26,067.38	$29,429.30
UROLOGY SURGERY	$29,286.59	$22,079.12	$23,881.69	$32,756.31	$37,384.70	$47,767.69	$20,130.55	$27,842.81	$99,949.33	$40,745.05	$27,903.33
VASCULAR SURGERY	$44,287.86	$38,736.24	$34,311.06	$48,962.85	$71,052.14	$71,832.06	$45,873.08	$50,372.16	$52,306.88	$65,890.06	$38,449.64
Total Average	$36,287.44	$25,710.26	$22,116.77	$37,038.25	$43,838.28	$53,921.16	$30,088.65	$28,338.56	$36,586.13	$44,854.40	$34,758.00
Average LOS	5.63	5.37	4.89	5.10	7.33	8.82	5.74	6.10	5.60	6.86	4.64
Rank	6	10	11	4	9	1	8	3	5	2	7

Piedmont Medical Center Beds

Total licensed beds:	*288*
- Acute Medical/Surgical	251
- Psychiatric	17
-Non-operational	20
- Special Care Nursery Bassinets	10

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2009 Scholarships and Education

A. Scholarships
Paid June 1, 2008-May 31, 2009

CAP Scholarships to York Technical College 9 Scholarships	$51,672
York Technical Community College York County Scholarship	$15,718
Winthrop University York County Scholarship	$15,718

A. Education support

1.	University of South Carolina – Nursing program support	$250,000
2.	York Technical College – Nursing program support	$ 55,255

Education support

3. Piedmont provides funding and support to the following programs:

♦ Various educational booklets	$ 5,238
♦ Community programs, including:	
Screenings, health fairs, wellness programs	$47,220
Additional on-site classes /support groups	$11,900

Total education support	***$452,721***

1. Piedmont provides community education through the following publications and events:

including Healthy Hometown Fort Mill and York events	$173,768
HealthBreak magazine	$183,229
Total community education	***$356,997***
Grand total education	***$809,718***

2. Piedmont Medical Center serves as a clinical practicum site for:

- Medical University of South Carolina
  - Nursing, Physician Assistant, Pharmacy
- University of South Carolina
  - Nursing, Pharmacy, Speech Pathology, Physical Therapy
- Winthrop University
  - Dietitian Training, Social Work, Program
- York Technical College
  - Nursing, Allied Health, Laboratory Technologists, Operating Room Technician, Emergency Medical Training
- Kaplan University: Nursing
- University of Phoenix: Nursing
- Walden University: Nursing
- University of South Dakota: RN Refresher Program

Community Donations

1. Hospice & Community Care/Hospice House	$82,249
2. Palmetto Volunteers in Medicine	$70,000
3. North Central Family Medical Center	$43,436
4. Keystone Substance Abuse Services	$37,500
5. Main Streets of Old Town Association	$15,000
6. Girls on the Run	$11,777
7. American Red Cross/York	$ 9,999
8. York County Safe Kids	$ 9,883
9. Move Fort Mill Forward Inc.	$ 8,500
10. Rock Hill Bicycle Club Inc.	$ 7,000
11. Arts Council of Rock Hill	$ 5,500
12. City of Rock Hill	$ 3,650
13. Carolina Motor Madness	$ 2,500
14. Fort Mill Rotary Foundation	$ 2,500
15. High Cotton Classic	$ 2,500
16. Tega Cay Lions Club	$ 2,500
17. York County – Pregnancy	$ 2,500
18. Good Folks of York County	$ 2,000
19. Nation Ford Land Trust	$ 2,000
20. United Way of York County SC	$ 2,792
21. Boy Scouts of America/Palmetto	$ 1,750
22. Culture & Heritage Foundation Inc.	$ 1,500
23. Piedmont Medical Center/Auxiliary	$ 1,300
24. American Cancer Society	$ 1,000
25. Catawba Care Coalition Inc.	$ 1,000
26. Family Connection of SC	$ 1,000
27. Harry Hampton Memorial Wildlife Fund	$ 1,000
28. March of Dimes/SC	$ 1,000
29. Individuals Caring for the Elderly	$ 700
30. City of Tega Cay	$ 580
31. Fort Mill YMCA	$ 500
32. Alexa Good ALS Foundation	$ 500
33. Sheriff's Foundation of York County	$ 500
34. York County Medical Society Alliance	$ 500
35. Young Life of York County	$ 500
36. NAACP	$ 400
37. Greater York Chamber	$ 350
38. Clover High School	$ 100
Total donations	**$337,966**
Grand total education and donations	***$1,147,684***

Piedmont Medical Center Physician Satisfaction Survey

The last survey was conducted during second quarter 2008.

Overall hospital rating = 71.6 percent

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RECORD 004646

Piedmont Medical Center
Continuing Education Report, FY 2008-2009

During the fiscal year 2008, Piedmont Medical Center's Department of Education continued providing employees with diverse opportunities to enrich their knowledge and increase skill levels. With a staff that includes three staff educators and two diabetes/wound care educators, the department provided multiple educational offerings to employees and others from the surrounding community.

A variety of learning formats were available for Piedmont employees, including educational presentations, self learning modules (written), videos and computer assisted instruction. Additionally, the department uses Tenet's Educational library and maintains a membership with Mid-Carolina Area Health Educational Consortium.

Piedmont is an approved provider of Continuing Nursing Education by the South Carolina Nurses Association, an accredited approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. During the fiscal year 2008, the department provided 68 educational activities yielding 290 Continuing Education Contact Hours (CECH) to a total of 2,152 attendees. Programs included Basic Cardiac Rhythm Interpretation, Crisis Management, Nursing Research, Healthcare Statistics, Legal Aspects of Nursing, IV Therapy, Critical Thinking, Physical Assessment, Leadership Development, Documentation, Wound Assessment, Diabetes Management, Skin Care Prevention, Lactation Training, Hemodynamic Monitoring and Psychiatric Issues. Basic and Advanced levels of various programs were offered. The department also provided contact hours for the South Carolina Trauma Symposium.

In addition to various educational offerings, the department also sponsors and supports the Research Committee, Shared Governance program, the Hospital Clinical Ladder program, and the Nursing Awards promotion process. Throughout the year, the department supported four National Certification Review Programs: Certified Critical Care Nurse, Certified Medical Surgical Nurse, Certified Oncology Nurse and Certified Emergency Nurse. Various program offerings were available for Registered Nurses, Licensed Nurses, Nurse Technicians, Pharmacists, Radiology Technicians, Social Workers and Physical Therapists. International programs such as the Trauma Nursing Core course, Advanced Fetal Monitoring, Crisis Prevention Intervention and Crucial Conversations were offered throughout the year. Piedmont also updates and maintains an in-house medical library used by employees, physicians and students from a variety of disciplines.

Computer Assisted Instruction for all disciplines remained available through the Tenet Web site using .EDU and OPAL (Management Resource Tool). Available also online is an NCLEX RN review course to assist newly graduated nurses in preparing for their licensing examination and an online Critical Care course from the American Association of Critical Care Nurses. Nationally recognized continuing education credits were also provided through the Emergency Nurses Association, the American Association of Critical Care Nurses, the Association of Women's Health, Obstetric and Neonatal Nurses (AWOHN), and the Oncology Nurses Society.

The American Heart Association (AHA) recognizes Piedmont's Department of Education as a Community Training center. Piedmont provides all available courses in Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) and Neonatal Resuscitation Courses (NRP).

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PET-EX017A.0029

RECORD 004647

During the fiscal year, the department provided training and verification to 1,291 Piedmont Medical Center employees and others in the surrounding medical community. Piedmont also sponsored three mass CPR training sessions for the community, teaching 554 individuals.

The department assisted in the coordination and facilitation of the mandatory 2008-2009 Ethics and Compliance general training from Tenet and provided Nursing orientation to all new staff.

The department coordinated the Annual Safety Skills fair attended by 1,465 employees. The fair included training on hand washing, fire safety, electrical safety, hospital codes, back safety, HAZMAT, JCAHO Patient safety goals, oxygen safety and nursing specific training to include the ParaSlyde, hand off communication and Accucheck blood sugar measurements.

The department participated in all of Piedmont's community activities and Healthy Hometowns providing CPR training and demonstration, blood sugar monitoring and heart and stroke education.

Medical Indigent Assistance Fund Guidelines

Financial Eligibility Requirements

Introduction: This chapter states the criteria used to determine if the applicant's income and resources are within the MIAF limits.

301 *Determining Financial Eligibility*

In determining eligibility for the MIAF, the income and resources of the applicant's family must be considered and measured against the appropriate standards. Spouses are responsible for spouses and parents are responsible for minor children.

302 *Family*

The first step is determining the amount of income and resources available to the applicants to establish the family composition. A family is defined as the applicant and dependents or legally responsible relatives who live in the same household.

Consideration must be given to the applicant's dependent status in determining the family composition.

A. If the applicant is legally or financially dependent upon someone else in the household, the family is composed of the following household members:

1. the applicant; and
2. the persons upon whom he/she is dependent (i.e., the responsible person); and
3. all persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the responsible person.

If the applicant is a minor child who lives in the home with a stepparent, the stepparent is considered a member of the family only if the stepparent claims the child as an income tax dependent.

If the applicant is an adult who is financially dependent upon someone else in the household, the applicant is considered a family member only if the person upon whom he/she is dependent is a relative; and both parties agree that one is financially dependent upon the other; and one could be claimed by the other as a dependent for income tax purposes, whether or not a return is filed.

B. If the applicant (e.g., adult) is not dependent upon someone else, the family is

composed of the following household members:

1. the applicant; and
2. the persons related to the applicant by birth, marriage, or adoption and who are legally or financially dependent upon the applicant.

If the applicant has stepchildren living in the home, the stepchildren are included as members of the family only if the stepparent claims them as income tax dependents.

Common Law Relationships. South Carolina law recognizes common law marriages. A legally binding common law marriage is an agreement between two people to be married. Both of the individuals must be legally free to marry and they must hold themselves out to the community as a married couple. To document that a common law marriage exists, verification must be obtained that substantiates the fact that both individuals are legally free to marry. Statements are obtained from each partner indicating when the couple began living together as husband and wife and a collateral statement indicating the couple is known to the community as husband and wife. In South Carolina, common law marriages between minors are recognized when the male is at least 14 years old and the female is at least 12 years old.

Unmarried Individuals Living Together. Unmarried individuals who live together, who do not have common children and do not claim to have a common law relationship are not considered members of the same family. Ordinarily the income and resources of one would not be attributed to the other since they are not legally or financially responsible for each other. However, if both parties agree that their income is mutually available, half of the total gross annual income is attributed to the applicant.

Pregnant Women Cases. The family composition for a pregnant woman applicant is as follows:

- the pregnant woman;
- the unborn child(ren);
- the father of the unborn child (if he resides in the home); and
- persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the applicant

Family Members Recently Deceased. When a member of the applicant's Family dies prior to the effective date of the application, the deceased individual is not considered a member of the family. Therefore, his income and resources are not considered in determining the applicant's eligibility unless such income and assets are available to the applicant and his family as of the effective date of the application.

When the applicant is deceased and death occurred within 30 days of the date of admission, his income is considered for only the thirteen weeks prior to the date of application and is not annualized.

When the applicant's family composition is questionable, prepare a summary of the family's circumstances and forward it to the Division of Eligibility for a determination of family size.

302.1 *Minors or Students Absent from Home*

To determine the family composition for an applicant who is a minor or a student absent from his parent(s) home, consideration must be given to the student's financial dependence upon the parent(s). Examples of such minors are students or children who choose not to live with their parent(s). For the purposes of the MIAF, an applicant who is a minor child or a student who is still financially dependent upon his/her parent(s) is considered a member of his parents(s)' household. If his/her parent(s) do not live in the same home, he/she is considered a family member in the home of the parent who holds legal custody.

A minor child is always considered a dependent of his parent(s) unless a court order exists which divests the parent(s) and the child of their rights, privileges and annuities, duties and obligations with respect to each other. If such a document exists, the child is not considered a member of the parent(s)'s family and the parent(s)' income and resources are not available to the minor child. A copy of the court order must be filed in the case record as documentation. For students over age eighteen (18), the parent(s) must be contacted to determine if the student Is financially dependent upon the parent(s), the student is not considered a member of their family and the parent(s)' income and resources are not available to the child.

303 *Income Standards*

Only those persons whose gross family income is equal to or less than one hundred percent of the poverty guidelines may qualify for full payment through the MIAF. Only those persons whose gross family income is between one hundred and two hundred percent of the poverty guidelines, may qualify for partial payment through the MIAF.

Refer to Table II, Table III, Table IV and Table V of this Chapter for Poverty Guidelines.

304 *Computation of Income*

The gross annual income of the individual and his family is measured against the annual poverty guidelines for the appropriate size family. Gross annual income should be representative of the family's average earnings. For this

reason, the method of calculating gross annual income will vary depending on the employment status of the family members. In all cases, the applicant must be carefully interviewed to determine his/her employment status. *(Refer to 306.2 for the treatment of income when a family member is self-employed.)*

304.1 *Methods of Verification and Computation*

The following describes methods of verifying and computing gross annual income based on the manner in which the income is received.

1. Fixed Income is a set benefit or a set income for work performed. An example is someone receiving Social Security benefits or a teacher. If the income is a fixed monthly amount, the income received in the preceding or current month must be verified. The verified monthly income is multiplied be twelve (12) to determine gross annual income. If the income is a fixed amount received semi-monthly, bi-monthly, etc., the income for the appropriate pay period must be verified and multiplied by the number of pay periods in a year.

2. Hourly/Salaried with Bonuses, Commission and Overtime is income received regularly and is based on the number of hours worked or a salary, which is subject to additional earnings due to overtime, commissions or bonuses. Income received in this manner is usually variable. Therefore, it must be verified for the thirteen (13) weeks prior to the effective date of the application. If income verification is available for thirteen (13) week period, the income received is multiplied by four (4) to determine gross annual income. If income verification is available for a longer period of time, the income received should be converted to an average weekly income and multiplied by fifty-two (52).

   If the applicant does not have thirteen (13) weeks of income (earned or unearned), verify the total amount of income received in the thirteen (13) week period and multiply by four (4) to determine the gross annual income.

3. Irregular Income is income which varies from week to week or month to month. An example is people who work odds jobs. The method for verifying and computing income is the same as stated in number 2 above.

4. Self-Employment Income is income derived from an individuals' own business. Examples are farmers, beauticians, "shade tree" mechanics, loggers, etc. In this situation, determine gross annual income based on income received in the thirteen (13) weeks prior to the effective date of application, multiplied by four (4). If the person does not report income on a weekly, bi-weekly, or monthly basis, determine gross annual income based on the prior year's income tax return. Deductions are allowed for self-employment income for the cost of doing business. Refer to Chapter 3 Section 306.2 for a list of allowed deductions.

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PET-EX017A.0034

RECORD 004652

For self-employed individuals who do not file income tax returns or maintain employment records, a signed affidavit regarding their earnings should be obtained. Refer to Transmittal Number 16 dated October 30, 1986.

5. Seasonal Income is income that is generally received only part of the year. If an individual or family has no other sources of income, the amount received during the most recent "season" must be verified and considered to be annual income. If an individual has other income, the amount received during the "season" is combined with the other income to determine gross annual income.

   Most recent season is defined as a season that occurred in the twelve (12) months prior to the effective date of the application.

   It should be noted for migrants work all during the year. Therefore, their income should be determined based on the method stated in number 2 on the previous page.

   Note: *If the earnings of the applicant and his/her family do not conform to the aforementioned description, contact the Division of Eligibility for assistance.*

   For non-emergency applications, income is verified based on the income received prior to the effective date of the application. For emergency admissions and retroactive applications, income is verified based on income received prior to the date of admission rather than the effective date of the application.

306 *Earned Income-Definition and Types*

Earned income includes all income in cash earned by an individual through the receipt of wages, salary, commissions, or profit from activities in which he/she is engaged as a self-employed individual or as an employee. This earned income may be derived from his/her own employment, such as a business enterprise or farming, or derived from wages or salary received as an employee.

306.1 *Earned Income Credit (EIC)*

The EIC is a provision of the Federal tax laws that allows the earnings of many individuals and couples who receive less than $22,370 per year to be supplemented either in advance or in a lump sum. The maximum credit is $1,384,00 per year. This supplement (Earned Income Credit) is counted as earned income.

306.2 *Computation of Income*

Self-employment income is allowed deductions for the cost of doing business. The applicant must provide a record of expenses incurred in the production of the income. Examples of self-employment are beauticians, makeup sales, etc. Allowable costs for

producing self-employment income are:

1. Identifiable costs of labor, such as salaries, employer share of Social Security, insurance, etc.;
2. Stock, raw materials, seed and fertilizer, feed for livestock used in producing income;
3. Rent and costs of maintenance for the business building;
4. Business telephone costs;
5. Costs of operating a motor vehicle when required in connection with the operation of the business;
6. Insurance premiums and taxes paid on the business;
7. Costs of feed for work livestock;
8. Costs of meals for children when day care is provided in the applicant's home;
9. and Interest paid to purchase income-producing property.

The following items are not considered as a cost of producing self-employment income:

1. Payments on the principle of the purchase price of income producing real estate and capital assets, equipment, machinery and other durable goods;
2. Net losses from previous providers;
3. Federal, state and local income taxes, money set aside for retirement purposes, and expenses are accounted for by the earned income deduction.
4. Costs of producing home produce intended for family consumption;
5. Family living expenses;
6. Personal debts;
7. Entertainment expenses'
8. Depreciation expense.

After the self-employment income is given the cost of doing business deduction, it is added to any other earned income.

306.3 *Border or Lodger Income*

The worker must verify and document the income received from the boarder or lodger and then exclude the verified actual costs incurred in providing room and/or board. Examples of costs incurred are the additional utilities, cost of food provided, laundry expenses, etc.

If the applicant is unable to provide records that substantiate the costs of providing lodging and/or board, a standard deduction of $60 monthly may be given for lodging and board and a standard $20 monthly may be given for lodging only. Any income received in excess of the standard amounts is added to other earned income prior to granting the standard earned income disregards.

After this exclusion, the remaining income is considered earned income and is added to other earned income.

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307 *Verification*

All income must be verified and the method, amount and date of verification must be documented. The following documents that can be used to verify earned income:

1. Pay stubs;
2. Employee's W-2 Forms;
3. Wage tax receipts;
4. Federal income tax return;
5. Self-employment bookkeeping records;
6. Sales and expenditures records;
7. Employer's wage records;
8. Statements from employer; and
9. Employment Security Office.

The following are documents that can be used to verify other types of income:

1. Social Security award letter (changes in benefits will not always be reflected);
2. Benefit payment check;
3. Unemployment Compensation award letter;
4. Pensions award notice;
5. Veterans Administration award notice;
6. Correspondence on benefits;
7. Income tax records;
8. Railroad award letter;
9. Support and alimony papers evidenced by court order, divorce or separation papers, contribution check;
10. Social Security Administration records and letters;
11. Employment Security Commission;
12. Union records;
13. Workmen's Compensation records;
14. Veterans Administration records and letters;
15. Insurance company records;
16. Tax records;
17. Railroad Retirement Board records; and
18. Department of Social Services Letter of Notification

Note: *If the applicant claims to have no income, you may accept his/her statement; however, he should be carefully interviewed to determine how he obtains food, clothing, and shelter given such circumstances. This information should be included in the case record dictation. If you question the accuracy of his statement, you may request that the applicant go to the Employment Security Commission to obtain the most recent.*

PMC.2012.00000272

PET-EX017A.0037

RECORD 004655

Total countable resources include the business assets owned by a self-employed individual. Total countable resources must be within the limits described below:

1. **Home property.** The valve of a farm of 50 acres or less on which the applicant or his family resides and has resided for at least twenty-five (25) years is excluded from the resources computation. The equity value of home property other than a family form cannot exceed $35,000.00.

2. **Non-home real property and taxable personal property.** The applicant's or family's total equity interest in non-home real property and taxable personal property such as motor vehicles may not exceed $6,000.00.

3. **Household effects.** Household effects such as furniture, kitchen utensils, etc., are not considered in the resource computation.

4. **Liquid assets.** The applicant or family's total liquid assets may not exceed $500.00.

   For non-emergency admissions, the value of liquid assets must be determined as of the effective date of the application. For emergency admissions and retroactive determination, the value of liquid assets must be determined as of the date the applicant entered the hospital

   If an applicant claims that he/she nor his/her family members do not own any liquid assets, you may accept his statement. The case record should contain a notation that the applicant's statement was accepted.

   a) If the total value of all liquid assets owned by the applicant and his/her family members does not exceed the limit, the liquid asset test is met.

   b) An applicant with excess liquid assets may establish eligibility if he/she and/or other members of his/her family spend the excess amount over $500.00 toward payment of valid debts.

   For the purpose of meeting this spend-down requirement, valid debts are defined as:

   Rent or Mortgage Payment - The actual amount of rent or mortgage on the primary residence not to exceed maximum allowable deductions of $500.00 per month, per household.

   Utilities - The actual amount for utility bills (i.e., electric, gas, oil, kerosene, wood, etc.) not to exceed a maximum allowable deduction of $150.00 per month, per household.

PMC.2012.00000273
PET-EX017A.0038
RECORD 004656

Medical Expenses - The actual amount paid for the cost of medical care, i.e., doctor bills, hospital charges, durable medical equipment, prescription drugs, etc. for each family members which were incurred within thirty (30) days prior to the effective date of application or for the applicant, during the period of hospitalization for which assistance is requested.

The applicant must be advised that he/she must spend-down his excess liquid assets before he can qualify for assistance through the fund. The applicant should be advised that the spend-down of excess liquid assets must occur after the effective date of application in order for the expense to be deducted from excess resources and that spend-down may be accomplished in the following way:

The applicant must present paid receipts that verify that the excess amount was used toward the payment of these valid debts which were incurred within 30 days prior to the effective date of application or during the period of hospitalization for which assistance is requested. Spend-down must be accomplished within three (3) days of the effective date of the application. For retroactive applications, the spend-down must be accomplished within thirty (30) days of the date of verification that the value of liquid assets exceeded the limit, if the applicant still owns the excess liquid assets. If the applicant no longer owns the excess liquid assets, the excess amount must have been spent on valid debts in accordance with the above stated procedure.

309 *Non-Liquid Resources*

The equity interest of non-liquid resources must be considered in the resources computation. Equity interest is the value of the applicant's and/or his family's ownership interest in the resources less any legal indebtedness. To determine a person's equity interest in a non-liquid resource, the following factors must be considered:

1. **Ownership Interest.** The value of a person's interest in property must be considered. A person may have sole ownership. In this case, the equity value in the entire piece of property must be considered a resource and measured against the appropriate standard.

   If the person, jointly owns property with on or more other persons, only the equity value of the applicant's and/or his family's interest in the property is considered a resource and measured against the appropriate standards.

   In addition to joint or sole ownership of property, a person may own the right to use real property. These rights might be in the form of:

   $ *Timber Rights* - Timber rights permit an individual to cut and remove freestanding trees from property owned by another as designated by contract with the person holding title to the land on which the timber stands. In this case, the value of the timber rights would be considered and measured against the appropriate standards.

$ *Mineral Rights* - A mineral right is an ownership interest in certain natural resources such as coal, sulfur, petroleum, sand natural gas, etc. which are usually obtained from the ground. Only the value of the mineral right is considered a resource.

$ *Remainder Interest/Life Estate* - A person may also hold a life estate or remainder interest in property. A life estate conveys upon an individual or individuals for his lifetime, certain rights in property. Its duration is measured by the lifetime of the tenant or of another person, or by the occurrence of some specific events, such as remarriage of the tenant. The owner of a life estate has the right of possession, the right to use the property, the right to obtain profits from the property and the right to sell his life estate interest. (However, the contract establishing the life estate may restrain one or more rights of the individual.) He does not have title to the property and he does not have the right to sell the property. He may not usually pass it on to his heirs in the form of an inheritance. See Table 1 in this chapter for the chart used to determine the value of a person's life estate interest in property. Where an individual owner conveys property to another person for life (life estate holder) and to a second person (the remainder man) upon the death of the life estate holder, both a life estate interest and a remainder interest have been created in the property. Upon the death of the life estate holder, the remainder man will hold full title in fee simple. An owner of real property may designate several individuals as remainder men who would hold ownership jointly or in common by will or agreement.

Example: *Mr. Heath, who is now deceased, conveyed a life estate to his wife in home property that he owned in fee simple both before and after his marriage to Mrs. Heath. Mrs. Heath has the right to live there for the rest of her life. On her death, the property will pass to her two sons who own a remainder interest in the property. The will designated that the sons will then own the property as joint tenants.*

The property is not considered a resource to the remainder man until the property is actually passed on to him.

$ Unprobated Estates (Heir Property) - If an individual who owns property dies without making a will, and the estate has not been settled and the property is divided among heirs, the property is called intestate property. If an applicant is an heir, the value of such property must be developed. An heir would not be able to sell the property itself, but he would be able to sell his interest legally without court action and without permission of the other heirs.

The South Carolina Law concerning Descent and Distribution was

changed by Act 539 of 1986. The new law is entitled Intestate Succession and Wills and is found at Section 62-2-101, et seq, S.C. Code of Laws, 1976, as amended. The law provides that the estate of an individual who dies intestate will be divided as follows:

$ If the deceased has no children, the widow (er) inherits the entire estate.

$ Regardless of the number of children surviving the deceased, the widow(er) inherits ½ of the estate and the remaining ½ is divided equally among the children of the deceased.

$ If any of the children of the deceased are not living, but at least one child survives the deceased, the ½ of the estate, which is inherited by the children, is still divided as though all children survived the parent. The portion to which the child who dies before his parent was entitled, will then be divided amongst his/her heirs according to law.

$ If there is no widow (er), the estate would then be divided equally among the children.

$ If the deceased were a joint owner of any real property, that portion to which he/she is entitled by law would become a part of his estate and would be divided according to the provisions of the law.

Note: *Any situation, which is not covered in this section, should be referred to the Division of Eligibility.*

Evidence of ownership of property can be obtained by checking the deed, the will or property and tax records in the county Courthouse. A deed does not have to be recorded to be valid. Tax records can be used only as a guide to other resources of documentation, as the person(s) listed on the tax records is not necessarily the true owner. Adverse possession, which occurs when someone lives on a parcel of land, pays the taxes, and then claims ownership to the property, is not considered legal ownership unless legal title has been conferred by court order.

2. **Tax Assessed Value** - The tax-assessed value of the resource is the current market value established by the County Tax Assessor. In addition, the current market value of a motor vehicle may be established by using either the NADA book value or the current market value established by the County Tax Assessor. When using the NADA book to verify value, use only the current month's book and the listed "Trade-In" value. If the applicant wishes to rebut the current market value as established by the tax assessor's office or the NADA book, the following action is required:

Taxable Personal Property - The applicant may obtain an appraisal from a reputable dealer to establish a different value. If the county designee questions the reliability of the appraisal, he may require a second appraisal for another dealer.

Real Property - Rebuttal must be accomplished through an appeal to the assessor's office in the county where the property is located. A copy of the assessor's determination of value must be furnished to the designee. The value established by the assessor must be used.

2. **Legal Indebtedness** - Legal indebtedness is any legal encumbrance such as a note, mortgage or lien, which has been filed against the resource. It is the applicant's responsibility to provide verification of the current amount of the indebtedness. If the applicant fails to furnish verification of indebtedness, the tax-assessed value of the resource should be used in determining equity interest.

Examples of non-liquid resources are:

a) Real property;
b) Personal property, such as boats, vehicles, farm equipment and livestock. Personal property should not be confused with personal effects such as appliances, furniture, clothes and other similarly essential items of limited value that are necessary for day to day living, since personal effects are not counted.

309.1 *Real Property*

Real property is treated in the following manner:

1. *Home Property* - Home property is the applicant's principal place of residence. The home is defined as the home and all contiguous property. This includes all buildings on the contiguous property such as sheds, barns, garages, warehouses, or other houses. If the surrounding property is separated from the home by public rights of way, such as roads, the surrounding property is still considered contiguous to the home. However, if the surrounding property is separated from the home by intervening property owned by others, the surrounding land is not considered contiguous to the home. A mobile home is considered as home property if it is the applicant's principal place of residence. Equity interest in home property, which does not meet the family farm exclusion, must be applied toward the $35,000.00 home resources limitation.

2. *Non-home Property* - Non-home property is any property that is owned by the applicant and/or his family which is not contiguous to the home. The applicant's and/or his family's equity interest in non-home property must be applied toward the $6,000.00 resource limitation.

309.2 *Taxable Personal Property*

The value of the applicant's and/or his family's interest in taxable personal property must be applied toward the $6,000.00 resource limitation.

309.3 *Buildings*

In some instances, an applicant or his family may have an ownership interest in a building but not the land on which the building is located. In such cases, the value of the interest in the building must be applied toward the $6,000.00 resources limitation.

310 *Liquid Resources*

The value of the applicant's and/or his family's liquid resources must be applied toward the liquid asset resource limitation as found in Section 308.3. Examples of liquid resources are:

1. Cash on hand;
2. Checking or savings accounts in banks or other savings institutions, including credit unions;
3. Savings certificates;
4. The market value of stocks or bonds;
5. Trust accounts except when inaccessible;
6. Funds held in individual retirement accounts (IRS's). The entire cash value of the account, less the amount of any penalty for early withdrawal, is counted;
7. Pension funds that are available;
8. Federal and State Income Tax refunds;
9. Pre-need burial contracts; and
10. Cash value of life insurance. County cash value only for each family member who has life insurance with a total face value(s) greater than $5,000.00. A separate determination must be made for each family member. For each family member who owns life insurance, determine the total face value owned by the individual.
    (The owner is the insured unless otherwise stipulated in the policy.) If the total face value of all policies owned by the family member does not exceed $5,000.00, exclude the cash value of the family member's policies. If the total face value of all policies owned by the family member exceeds $5,000.00, exclude the first $1,500.00 of cash value and count the amount above $1,500.00 as liquid asset.

    Note: *Term insurance does not have a cash value.*

310.1 *Jointly Owned Liquid Resources*

When accounts (e.g. savings or checking, stocks or bonds, etc.) are owned jointly and the applicant and/or his family have access to the entire amount in the account, the entire amount is counted toward the resource limit.

To determine whether the person has access to the entire amount, the worker will need

to determine if both signatures are needed for access to the resources or if only one signature is needed. One signature means the entire amount is accessible. When both signatures are needed, only a pro-rata s hare of the account is applied to the resource limit.

310.2 *Trusts*

If an applicant and/or a member of his family is the beneficiary of a trust and he has unrestricted access to the principal of the trust, the value of the principal is counted as a resource. The value of the trust principal is measured against the liquid asset resource limitation.

If the beneficiary of the trust does not have access to the trust and the trustee either does not have the authority or refuses to make the trust principal available to the beneficiary, the trust principal is not counted as a resource. If the applicant or family member does not have access to the trust principal, only the income and/or other benefits from the trust is counted.

310.3 *Burial Plots*

A burial plot is defined as a conventional gravesite, crypt, mausoleum, urn or other repository, which is customarily and traditionally used for the remains of a deceased person. Burial plots owned by the applicant and/or his family are excluded from resources.

311 *Household Effects*

Clothing, household goods, personal effects and furnishings used for day-to-day living are excluded.

312 *Resources Verification*

All resources must be verified and the method, amount and date of verification must be documented. The following are documents that can be used to verify resources:

1. Bank statements;
2. Tax assessor records;
3. Real estate forms;
4. Insurance policies;
5. Insurance agencies;
6. Statement from other owner when there is joint ownership;
7. Current official correspondence received by the applicant;
8. Court Records - Deeds, Titles, etc., and
9. Current NADA Book.

Note: *If the applicant states that he/she and/or his/her family do not own*

PMC.2012.00000279

PET-EX017A.0044

RECORD 004662

real property or taxable personal property, the courthouse records must be searched to verify his/her statement. Courthouse records do not have to be searched in the name of minor children unless there is an indication that they own real and personal property. For reapplications which are filed within six (6) months of an MIAF eligible hospital stay, it is not necessary to re-verify (i.e., search of courthouse records) the ownership and value of real and personal property unless the applicant indicates that their circumstances have changed.

313 *Transfer of Resources*

An applicant and/or his/her family who transferred resources without receiving full compensation within three (3) months prior to the period of hospitalization for which the application for assistance is made, may not be eligible. The application must be denied if the uncompensated value in combination with other resources exceeds the appropriate resource limitation.

Although transfer of a resource without receipt of full compensation may result in ineligibility for MIAF for up to twelve (12) months, the person may establish eligibility if it is determined that he/she later receives full market value for the transferred resource. The person may establish that full compensation was received provided the resource is returned or the applicant receives fair market value for the transferred resource, and the proceeds are used for living and/or medical expenses of the applicant to the point that the resource is reduced to within the appropriate resource limitation.

The transfer resources policy applies to:

1. Transfers made by an applicant and/or his family, or on their behalf by a person acting for and legally authorized to execute a contract for the applicant and/or his family (such as legal representative, parent of minor child, holder of power or attorney, etc.);

2. Transfers of liquid and non-liquid resources (cash, bank accounts, etc. by giving to another individual, creation of irrevocable trusts, petitioning courts to set aside funds for a specific purpose, etc.);

3. Waiver or suspension of benefits to which the individual is legally entitled, e.g. inheritance, insurance settlement and proceeds of a loan.

The transfer of resources policy does not apply to:

1. Actions take by persons not listed in #1 above (for example, policy does not apply to withdrawal of funds by another person from a bank account jointly held with the eligible applicant unless the other person is the spouse or parent of the applicant);

2. A resource that is spent or used to repay a valid debt;

3. Valid loans made by an eligible individual or eligible spouse.

314 *Treatment of Cash Received to Replace/Repair Lost, Damaged or Stolen Resources*

Cash received from any source (e.g. insurance companies, Federal or State agencies, public or private organizations, other individuals) for the purpose of replacing or repairing a resource which is lost, damaged or stolen is not income but a resource that has changed form.

When it is determined that cash will be or is received for the purpose of replacing or repairing a resource, the total amount of such cash is excluded from the income computation for a period of six (6) months from the month of receipt. However, it is not excluded from resources it is counted as the resource it replaces would have been counted.

Cash which is received for personal injury, death or other purposes is not excluded from income or resources under this provision, even if the cash is received in conjunction with an/or from the same source as cash intended to replace or repair a resource.

Table I: FAMILY COMPOSITION CHART

RELATIONSHIP TO THE APPLICANT	WHERE LIVING	INCLUDED AS FAMILY MEMBER	VERIFICATION
Spouse (Includes common law)	In the home.	Yes	Applicant's Statement
Spouse	Separated and living out of the home for 30 days from effective date of the application.	No	Collateral statement from two (2) non-related family members. Example: Landlord or Neighbor
Minor Child	In the home.	Yes	Applicant's Statement
Minor Child (Applicant)	Out of the home.	Yes, unless all parental rights are terminated by court order.	Parental statement, if yes. Court order, if no.
Child over 18 years of age.	In the home or attending school.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes.
Other Relatives	In the home.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes
RELATIONSHIP TO THE APPLICANT	**WHERE LIVING**	**INCLUDED AS FAMILY MEMBER**	**VERIFICATION**
Other Relatives	In the home.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes.
Non-Relatives	In the home.	No, refer to Page 3 of this chapter for treatment.	Applicant's statement
Unmarried couple with common child	In the home.	Yes	Applicant's statement or birth record.

Table II:

Use this table when processing MIAF applications for hospital admissions on January 1, 1986 through April 30, 1986.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,250.00	$ 10,500.00
Two (2)	$ 7,050.00	$ 14,100.00
Three (3)	$ 8,850.00	$ 17,700.00
Four (4)	$ 10,650.00	$ 21,300.00
Five (5)	$ 12,450.00	$ 24,900.00
Six (6)	$ 14,250.00	$ 28,500.00
Seven (7)	$ 16,050.00	$ 32,100.00
Eight (8)	$ 17,850.00*	$ 35,700.00
For families with more than eight (8) persons, add $1,800 for each additional family member.		

Table III:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1986.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,380.00	$ 10,760.00
Two (2)	$ 7,240.00	$ 14,480.00
Three (3)	$ 9,120.00	$ 18,240.00
Four (4)	$ 11,000.00	$ 22,000.00
Five (5)	$ 12,880.00	$ 25,760.00
Six (6)	$ 14,760.00	$ 29,520.00
Seven (7)	$ 16,640.00	$ 33,280.00
Eight (8)	$ 18,520.00*	$ 37,040.00
For families with more than eight (8) persons, add $1,880 for each additional family member.		

PMC.2012.00000283

PET-EX017A.0048

RECORD 004666

Table IV:

Use this table when processing MIAF applications for hospital admissions after May 1, 1987.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,500.00	$ 11,000.00
Two (2)	$ 7,400.00	$ 14,800.00
Three (3)	$ 9,300.00	$ 18,600.00
Four (4)	$ 11,200.00	$ 22,400.00
Five (5)	$ 13,100.00	$ 26,200.00
Six (6)	$ 15,000.00	$ 30,000.00
Seven (7)	$ 16,900.00	$ 33,800.00
Eight (8)	$ 18,800.00*	$ 37,600.00
For families with more than eight (8) persons, add $1,900 for each additional family member.		

Table V:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1988.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,770.00	$ 11,540.00
Two (2)	$ 7,730.00	$ 15,460.00
Three (3)	$ 9,690.00	$ 19,380.00
Four (4)	$ 11,650.00	$ 23,300.00
Five (5)	$ 13,610.00	$ 27,220.00
Six (6)	$ 15,570.00	$ 31,140.00
Seven (7)	$ 17,530.00	$ 35,060.00
Eight (8)	$ 19,490.00*	$ 38,980.00
For families with more than eight (8) persons, add $1,960 for each additional family member.		

PMC.2012.00000284

PET-EX017A.0049

RECORD 004667

Table VI:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1989.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,980.00	$ 11,960.00
Two (2)	$ 8,020.00	$ 16,040.00
Three (3)	$ 10,060.00	$ 20,120.00
Four (4)	$ 12,100.00	$ 24,200.00
Five (5)	$ 14,140.00	$ 28,280.00
Six (6)	$ 16,180.00	$ 32,360.00
Seven (7)	$ 18,220.00	$ 36,440.00
Eight (8)	$ 20,260.00*	$ 40,520.00
For families with more than eight (8) persons, add $2,040 for each additional family member.		

Table VII:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1990

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,280.00	$ 12,560.00
Two (2)	$ 8,420.00	$ 16,840.00
Three (3)	$ 10,560.00	$ 21,120.00
Four (4)	$ 12,700.00	$ 25,400.00
Five (5)	$ 14,840.00	$ 29,680.00
Six (6)	$ 16,980.00	$ 33,960.00
Seven (7)	$ 19,120.00	$ 38,240.00
Eight (8)	$ 21,260.00*	$ 42,520.00
For families with more than eight (8) persons, add $2,140 for each additional family member.		

Table VIII:

Use this table when processing MIAF applications for hospital admissions on or after April 1, 1991.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,620.00	$ 13,240.00
Two (2)	$ 8,880.00	$ 17,760.00
Three (3)	$ 11,140.00	$ 22,280.00
Four (4)	$ 13,400.00	$ 26,800.00
Five (5)	$ 15,660.00	$ 31,320.00
Six (6)	$ 17,920.00	$ 35,840.00
Seven (7)	$ 20,180.00	$ 40,360.00
Eight (8)	$ 22,440.00*	$ 44,880.00
For families with more than eight (8) persons, add $2,260 for each additional family member.		

Table IX:

Use this table when processing MIAF applications for hospital admissions on or after April 1, 1992.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,810.00	$ 13,620.00
Two (2)	$ 9,190.00	$ 18,380.00
Three (3)	$ 11,570.00	$ 23,140.00
Four (4)	$ 13,950.00	$ 27,900.00
Five (5)	$ 16,330.00	$ 32,660.00
Six (6)	$ 18,710.00	$ 37,420.00
Seven (7)	$ 21,090.00	$ 42,180.00
Eight (8)	$ 23,470.00*	$ 46,940.00
For families with more than eight (8) persons, add $2,380 for each additional family member.		

PMC.2012.00000286

PET-EX017A.0051

RECORD 004669

Table X:

Use this table when processing MIAF applications for hospital admissions on or after April 1, 1993.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,970.00	$ 13,940.00
Two (2)	$ 9,430.00	$ 18,860.00
Three (3)	$ 11,890.00	$ 23,780.00
Four (4)	$ 14,350.00	$ 28,700.00
Five (5)	$ 16,810.00	$ 33,620.00
Six (6)	$ 19,270.00	$ 38,540.00
Seven (7)	$ 21,730.00	$ 43,460.00
Eight (8)	$ 24,190.00*	$ 48,380.00
For families with more than eight (8) persons, add $2,460 for each additional family member.		

Table XI:

Use this table when processing MIAF applications for hospital admissions on or after April 1, 1994.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,360.00	$ 14,720.00
Two (2)	$ 9,840.00	$ 19,680.00
Three (3)	$ 12,360.00	$ 24,720.00
Four (4)	$ 14,800.00	$ 29,600.00
Five (5)	$ 17,280.00	$ 34,560.00
Six (6)	$ 19,760.00	$ 39,520.00
Seven (7)	$ 22,240.00	$ 44,480.00
Eight (8)	$ 24,720.00*	$ 49,440.00
For families with more than eight (8) persons, add $2,480 for each additional family member.		

PMC.2012.00000287

PET-EX017A.0052

RECORD 004670

Table XII:

Use this table when processing MIAF applications for hospital admissions on or after April 1, 1995.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,470.00	$ 14,940.00
Two (2)	$ 10,030.00	$ 20,060.00
Three (3)	$ 12,590.00	$ 25,180.00
Four (4)	$ 15,150.00	$ 30,130.00
Five (5)	$ 17,710.00	$ 35,420.00
Six (6)	$ 20,270.00	$ 40,540.00
Seven (7)	$ 22,830.00	$ 45,660.00
Eight (8)	$ 25,390.00*	$ 50,780.00
For families with more than eight (8) persons, add $2,560 for each additional family member.		

Table XIII:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1996.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,740.00	$ 15,480.00
Two (2)	$ 10,360.00	$ 20,720.00
Three (3)	$ 12,980.00	$ 25,960.00
Four (4)	$ 15,600.00	$ 31,200.00
Five (5)	$ 18,220.00	$ 36,440.00
Six (6)	$ 20,840.00	$ 41,680.00
Seven (7)	$ 23,460.00	$ 46,920.00
Eight (8)	$ 26,080.00*	$ 52,160.00
For families with more than eight (8) persons, add $2,620 for each additional family member.		

PMC.2012.00000288

PET-EX017A.0053

RECORD 004671

Table XIV:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1997

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,890.00	$ 15,780.00
Two (2)	$ 10,610.00	$ 21,220.00
Three (3)	$ 13,330.00	$ 26,660.00
Four (4)	$ 16,050.00	$ 32,100.00
Five (5)	$ 18,770.00	$ 37,540.00
Six (6)	$ 21,490.00	$ 42,980.00
Seven (7)	$ 24,210.00	$ 48,420.00
Eight (8)	$ 26,930.00*	$ 53,860.00
For families with more than eight (8) persons, add $2,720 for each additional family member.		

Table XV:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1998.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,050.00	$ 16,100.00
Two (2)	$ 10,850.00	$ 21,700.00
Three (3)	$ 13,650.00	$ 27,300.00
Four (4)	$ 16,450.00	$ 32,900.00
Five (5)	$ 19,250.00	$ 38,500.00
Six (6)	$ 22,050.00	$ 44,100.00
Seven (7)	$ 24,850.00	$ 49,700.00
Eight (8)	$ 27,650.00*	$ 55,300.00
For families with more than eight (8) persons, add $2,800 for each additional family member.		

PMC.2012.00000289

PET-EX017A.0054

RECORD 004672

Table XVI:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 1999.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,240.00	$ 16,480.00
Two (2)	$ 11,250.00	$ 22,120.00
Three (3)	$ 13,880.00	$ 27,760.00
Four (4)	$ 16,700.00	$ 33,400.00
Five (5)	$ 19,520.00	$ 39,040.00
Six (6)	$ 22,340.00	$ 44,680.00
Seven (7)	$ 25,160.00	$ 50,320.00
Eight (8)	$ 27,980.00*	$ 55,960.00
For families with more than eight (8) persons, add $2,820 for each additional family member.		

Table XVII:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2000.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,350.00	$ 16,700.00
Two (2)	$ 11,250.00	$ 22,500.00
Three (3)	$ 14,150.00	$ 28,300.00
Four (4)	$ 17,050.00	$ 34,100.00
Five (5)	$ 19,950.00	$ 39,900.00
Six (6)	$ 22,850.00	$ 45,700.00
Seven (7)	$ 25,750.00	$ 51,500.00
Eight (8)	$ 28,650.00*	$ 57,300.00
For families with more than eight (8) persons, add $2,900 for each additional family member.		

Table XIII:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2001.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,590.00	$ 17,180.00
Two (2)	$ 11,610.00	$ 23,220.00
Three (3)	$ 14,360.00	$ 29,260.00
Four (4)	$ 17,650.00	$ 35,300.00
Five (5)	$ 20,670.00	$ 41,340.00
Six (6)	$ 23,690.00	$ 47,380.00
Seven (7)	$ 26,710.00	$ 53,420.00
Eight (8)	$ 29,730.00*	$ 59,460.00
For families with more than eight (8) persons, add $3,020 for each additional family member.		

Table XIX:

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2002.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,860.00	$ 17,720.00
Two (2)	$ 11,940.00	$ 23,880.00
Three (3)	$ 15,020.00	$ 30,040.00
Four (4)	$ 18,100.00	$ 36,200.00
Five (5)	$ 21,180.00	$ 42,360.00
Six (6)	$ 24,250.00	$ 48,520.00
Seven (7)	$ 27,340.00	$ 54,680.00
Eight (8)	$ 30,420.00*	$ 60,840.00
For families with more than eight (8) persons, add $3,080 for each additional family member.		

PMC.2012.00000291

PET-EX017A.0056

RECORD 004674

Table XX

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2003.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 8,980.00	$ 17,960.00
2	$ 12,120.00	$ 24,240.00
3	$ 15,260.00	$ 30,520.00
4	$ 18,400.00	$ 36,800.00
5	$ 21,540.00	$ 43,080.00
6	$ 24,680.00	$ 49,360.00
7	$ 27,820.00	$ 55,640.00
8	$ 30,960.00	$ 61,920.00

For families with more than 8 persons, add $3,140 for each additional member.

Table XXI

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2004.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,310.00	$ 18,620.00
2	$ 12,490.00	$ 24,980.00
3	$ 15,670.00	$ 31,340.00
4	$ 18,850.00	$ 37,700.00
5	$ 22,030.00	$ 44,060.00
6	$ 25,210.00	$ 50,420.00
7	$ 28,390.00	$ 56,780.00
8	$ 31,570.00	$ 63,140.00

For families with more than 8 persons, add $3,180 for each additional member.

Table XXII

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2005.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,570.00	$ 19,140.00
2	$ 12,830.00	$ 25,660.00
3	$ 16,090.00	$ 32,180.00
4	$ 19,350.00	$ 38,700.00
5	$ 22,610.00	$ 45,220.00
6	$ 25,870.00	$ 51,740.00
7	$ 29,130.00	$ 58,260.00
8	$ 32,390.00	$ 64,780.00

For families with more than 8 persons, add $3,260 for each additional member.

Table XXIII

Use this table when processing MIAF applications for hospital admissions on or after May 1, 2006.

Poverty Scale

Family Size	100% **Gross Annual Income**	200% **Gross Annual Income**
1	$ 9,800	$ 19,600
2	$ 13,200	$ 26,400
3	$ 16,600	$ 33,200
4	$ 20,000	$ 40,000
5	$ 23,400	$ 46,800
6	$ 26,800	$ 53,600
7	$ 30,200	$ 60,400
8	$ 33,600	$ 67,200

For families with more than 8 persons, add $3,400 for each additional member.

PMC.2012.00000293

PET-EX017A.0058

RECORD 004676

Table XXIV

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2007.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,210	$ 20,420
2	$ 13,690	$ 27,380
3	$ 17,170	$ 34,340
4	$ 20,650	$ 41,300
5	$ 24,130	$ 48,260
6	$ 27,610	$ 55,220
7	$ 31,090	$ 62,180
8	$ 34,570	$ 69,140

For families with more than 8 persons, add $3,480 for each additional member.

Table XXIV

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2008.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,400	$ 20,800
2	$ 14,000	$ 28,000
3	$ 17,600	$ 35,200
4	$ 21,200	$ 42,400
5	$ 24,800	$ 49,600
6	$ 28,400	$ 56,800
7	$ 32,000	$ 64,000
8	$ 35,600	$ 71,200

For families with more than 8 persons, add $3,600 for each additional member.

PMC.2012.00000294

PET-EX017A.0059

RECORD 004677

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2009.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,830	$ 21,660
2	$ 14,570	$ 29,140
3	$ 18,310	$ 36,620
4	$ 22,050	$ 44,100
5	$ 25,790	$ 51,580
6	$ 29,530	$ 59,060
7	$ 33,270	$ 66,540
8	$ 37,010	$ 74,020

For families with more than 8 persons, add $3,740 for each additional member.

PMC.2012.00000295

PET-EX017A.0060

RECORD 004678

Tenet Healthcare System

I have reviewed the attached 2010 Annual Report to York County Council and, to the best of my knowledge, believe it to be accurate in reporting on the operations of Piedmont Medical Center as required in the sixth addendum to the York County Contract dated August 1995.

John Holland
Sr. Vice President Regional Operations

Petitioner's Trial Exhibit 017B

Table of contents

Description	*page*
Vision statement	3
Board of Governors	4
Advisory board members	5
Annual financial statement	6
Property Tax schedule	7
Depreciation report	8
Capital investment	9
Equipment purchases	10
Services to medically indigent	11
Resident Charity and Bad Debt	12
Services to York County Detention Center	13
Emergency Department services	14
Physician recruitment	15
Emergency Medical Services	16
Emergency Medical Services response times	17
Emergency Medical Services equipment and resource allocation	18
Employee information	19
Medicaid cost/charge ratios	20
Pricing	21
Medpar data	22
Licensed beds	23
Scholarships, education and donations	24-26
Physician satisfaction survey summary	27
Continuing education report	28-29
Medical indigent assistance guidelines	30-61

PMC.2012.00000297

PET-EX017B.0002

RECORD 004680

Vision Statement

Piedmont Medical Center will be the leading resource for healthcare services in the upstate of South Carolina.

PMC.2012.00000298

PET-EX017B.0003

RECORD 004681

Board of Governors for 2010

Voting Members

Skip Tuttle[1] [3] – Chair
Charles F. Miller, CEO – Secretary
Bill Alexander
Chantay Bouler
Michael Cowen, MD
Joseph Duschl [1] [2]
Alex Espinal, MD
John Hoitink, MD
Ted Matthews
Jay Shah, MD
Karen Walto
James Welsh, MD

Non-Voting members

Nathaniel Edwards, MD – Chief of Staff
Irma Bendet – President, Volunteer Auxiliary
Claudia Douglass – Piedmont Senior Vice President, Operations and Chief Operating Officer
Mary Cline – Piedmont Vice President of Business Development
Don Currier – Piedmont Vice President, Human Resources
Mary Kaye Halterman – Piedmont Vice President – Patient Care Services and Chief Nursing Officer
Thujuana Lawton – Piedmont Hospital Compliance Officer
Richard Patterson, MD – Chief Medical Officer
Jay Pennisson – Piedmont Vice President, Finance and Chief Financial Officer

[1] *Selected from York County nominees*
[2] *Resident - Western York County*
[3] *At-large member*

PMC.2012.00000299
PET-EX017B.0004

RECORD 004682

Community Advisory Board Members for 2010

Amy	Faulkenberry
Phyllis	Fauntleroy
Arleen	Fincher
Lyn	Garris
Sherry	Glenn
Charlie	Grobusky
Linda	Honeycutt
Cotton	Howell
Beverly	Kelly
Shirley	MacMillian
Michelle	Mann
Pam	Morrell
Barbara	Robinson
Van	Shields
Christopher	Smith
Brown	Simpson
Loyce	Sutton
David	Williams
Dianne	Woods
Debra	Zupowski

Western York County:

Debra Brown	Clover
Bill Whitesides	Smyrna
Joe Cox	York County Council
Thomas Smith	York County Council
Charles Miller	Piedmont Medical Center President and CEO

Annual Financial Statement FY '10 - Ending May 31, 2010

Funds Available	**2010 (000s)**
Piedmont Medical Center received:	
For inpatient services	$355,990
For outpatient services	$229,556
Total revenue	**$585,546**
In Addition, the Medical Center Received,	
From Cafeteria Activity	
From Other Non-Patient Activity	$2,119
Total Non-Patient Revenue	**$2,119**
Piedmont did not receive full payment for services:	
From Government and Third-Party Payors	$279,933
From Those Unwilling to Pay	$29,081
From Those Unable to Pay	$20,700
From Compact with Uninsured Total	$12,803
Revenue Not Received	**$342,517**
Total Funds Available	**$245,147**
FUNDS APPLIED	
Piedmont Medical Center Applied Funds:	
To Pay Full- and Part-Time Employees	$65,217
To Provide Employee Benefits	$14,393
To Purchase Supplies, Utilities, Insurance and Other Expenses	$99,748
To Pay Depreciation and Amortization	$10,831
To Pay Interest on Debt	$16,287
Total Expenses	**$206,476**
Pre-Tax Income	**$38,671**
Federal Inc Taxes	$9,911
State Inc Taxes	$1,416
State Franchise Taxes	$91
Property Taxes	$2,281
Business License Taxes	$176
Indigent Care Taxes	$7,805
Total Tax Expense	**$21,680**
After Tax Income	**$16,991**
Capital Expenditures	**$5,190**

(1) This amount includes corporate overhead.

Property Tax Payments Calendar Year 2009

School Operations	$996,473
School Debt Service	$313,620
City Operations	$546,894
County Operations	$264,815
County Debt Service	$57,465
Library	$26,659
Culture and Heritage	$17,180
York Tech College	$24,882
Unincorporated County Millage	$1,810
Special Fire District	$896
Total	**$2,250,694**

Depreciation Reported for Piedmont Medical Center

Medicare Cost Report (Ending April 30, 1996)	$2,957,674
Medicare Cost Report (Ending April 30, 1997)	$3,643,810
Medicare Cost Report (Ending May 31, 1998)	$4,326,446
Medicare Cost Report (Ending May 31, 1999)	$5,047,537
Medicare Cost Report (Ending May 31, 2000)	$5,040,228
Medicare Cost Report (Ending May 31, 2001)	$6,598,342
Medicare Cost Report (Ending May 31, 2002)	$7,343,714
Medicare Cost Report (Ending May 31, 2003)	$8,458,222
Medicare Cost Report (Ending May 31, 2004)	$7,940,379
Medicare Cost Report (Ending May 31, 2005)	$7,701,444
Medicare Cost Report (Ending May 31, 2006)	$7,307,246
Medicare Cost Report (Ending May 31, 2007)	$8,067,789
Medicare Cost Report (Ending May 31, 2008) [1]	$8,788,613
Medicare Cost Report (Ending May 31, 2009) [1]	$9,336,025
Medicare Cost Report (Ending May 31, 2010) [1] [2]	$9,693,184

(1) Unaudited

(2) PMC book depreciation prior to corporate year-end adjustments. Excludes amortization [computer software and intangible].

Calculation of Required Minimum Capital Investment

AMI (Tenet Healthcare System) agrees that in the period beginning June 1, 1995, and ending May 31, 1998, it will make investments in land or depreciable or amortizable property located in York County, South Carolina, in an aggregate amount not less than $23,000,000.

Period ending	*Capital expended*
FY96 (June 1, 1995 - May 31, 1996)	$ 9,037,474
FY97 (June 1, 1996 - May 31, 1997)	$20,307,000
FY98 (June 1, 1997 - May 31, 1998)	$15,296,000
FY99 (June 1, 1998 - May 31, 1999)	$ 8,330,000
FY00 (June 1, 1999 - May 31, 2000)	$ 6,286,533
FY01 (June 1, 2000 - May 31, 2001)	$19,371,848
FY02 (June 1, 2001 - May 31, 2002)	$21,186,311
FY03 (June 1, 2002 - May 31, 2003)	$14,265,756
FY04 (June 1, 2003 - May 31, 2004)	$ 5,142,463
FY05 (June 1, 2004 - May 31, 2005)	$ 8,426,403
FY06 (June 1, 2005 - May 31, 2006)	$12,573,989
FY07 (June 1, 2006 - May 31, 2007)	$22,650,453 (A)
FY08 (June 1, 2007 - May 31, 2008)	$13,912,248
FY09 (June 1, 2008 - May 31, 2009)	$10,089,419
FY09 (June 1, 2009 - May 31, 2010)	$5,189,981
Total Capital Investment to Date	***$192,065,878***

Calculations for contract year ending May 31, 2010:

1) $4,000,000.00, or,
2) 108% of $9,272,607 (average of most recent three years' depreciation) = $10,014,416 but no less than $1,500,000.
   - Therefore required minimum capital for 2011 = $10,014,416
   - Average actual capital spent (contract year ending May 31, 2010 and preceding two years)= $9,730,549
   - Required minimum average capital spent (contract year ending May 31, 2010 and preceding two years) = $9,429,274
   - Exceeded requirement $301,276

Notes:
A) Includes land purchase of $8,581,257.

Descriptive List of Capital "Equipment" Purchased (June 1, 2009 to May 31, 2010):

A. Cost basis greater than $250,000

Item	Capital Cost
34007924 Meditech Upgrade	$596,561
34009725 Ambulances	$328,498
34009776 IV Pumps (Carefusion/Alaris)	$929,188
34010661 Cath Lab Equipment	$1,450,969
34010723 Maxidriver Orthopedic Drill	$226,828
34010750 Syringe Pumps	$272,356
Total:	***$3,804,400***

B. Cost basis greater than $100,000

Item	Capital Cost
34009722 Recordable/Digital Capnography Upgrade - EMS	$100,104
34009751 Infant Warmers	$143,247
34010720 Arthroscopy Towers	$125,481
Total:	***$368,832***

Note: *This schedule does not include equipment valued under $100,000.*

Piedmont Medical Center

Services to the Medically Indigent (June 1, 2009 - May 31, 2010)

A. York County Write-offs

1. 37 Outpatient accounts	$	496,611

B. MIAP and Other Non Statutory Charity Write-Offs

1. 1,016 Inpatient accounts	$	19,763,005
2. 1,589 Outpatient accounts	$	4,767,214
3. CFC Charity pass through	$	-
4. PY GL Accrual Reversal	$	(4,327,122)

A - B.	***Total Charity Care***	***$20,699,708***
	Other Uncompensated Care (Bad Debt Provision)	$29,081,421
D.	Compact with the Uninsured Discounts	$12,803,086

E. Indigent Care Taxes Paid

To State of SC	$7,371,595
To York County	$ 446,439
Total	*$7,818,034*

Calculation of required indigent services for June 1, 2009 - May 31, 2010:

$647,811 x (1.01152) = $655,274

Note: CPI decreased 2.48 points or 1.152% (6/09, 215,693 and 5/10, 218.178) = 1.01152

Schedule of York County Resident Charity and Bad Debts

A. Charity

York County	$16,304,683
Other Counties or Unclassified	$4,395,025
All counties	$20,699,708

B. Bad debt *

York County	$27,227,600
Other Counties or Unclassified	$1,853,821
All counties	*$29,081,421*

*Bad debt provision based on account assignments to collection agency.

Services, assistance, and supplies provided to York County Detention Center

York County Detention Center Accounts

Patient Number	Total Charges	Expected Reimbursement
19991488	$32,700.65	$23,207.89
20071171	$36,329.70	$ 7,039.13
70961578	$ 392.00	$ 163.21
Total	***$69,422.35***	***$30,410.23***

Description of Emergency Department Services (June 1, 2008- May 31, 2009)

Total Volume: 59,201

Acuity levels of patients treated in the Emergency Department (based on charge levels):

Level from least to most severe	Volume
0	3,340
I	1,554
II	3,716
III	25,354
IV	17,061
V	7,950
Critical Care	226

Physicians joining Piedmont's staff June 1, 2009 through May 31, 2010

New Practitioner	Status	Specialty
Christopher DiOrio, DO	Active	Emergency Medicine
Taral Patel, MD	Active	Cardiology
Chris Anderson, MD	Active	Emergency Medicine
Stephen Outten, MD	Active	Emergency Medicine
Geoffrey Hayden, MD	Active	Emergency Medicine
Hong Bui, MD	Active	Pediatrics
Naoma Crisp-Lingren, MD	Courtesy	Psychiatry
Gal Margalit, MD	Courtesy	Emergency Medicine
Tameta Clark, MD	Courtesy	Pain Management
Heather Pacholke, MD	Consulting	Radiation Oncology
Dean Gant, MD	Consulting	Radiation Oncology
Tammy Chen, MD	Active	Psychiatry
Deborah Taylor, MD	Active	Family Practice
Michael Curren, MD	Courtesy	Family Practice
Marie Fervil, MD	Active	Internal Medicine
Joel Onafowokan, MD	Active	Internal Medicine
Rhonda Barrett, MD	Active	Ophthalmology
Augustine Onwukwe, MD	Active	Family Practice
Kelvin Wiley, MD	Active	Internal Medicine
Thomas Olson, DPM	Active	Podiatry
Donald Woodburn, MD	Active	Internal Medicine
Carter Starr, MD	Active	Emergency Medicine
Robert Sullivan, MD	Courtesy	Pain Management
Thomas Boden, MD	Consulting	TeleMedicine
Ankita Modi, MD	Active	Pediatrics
Rupal Badalyan, MD	Active	Pediatrics
Lissette Maduro, MD	Active	Pediatrics
Robert Adams, MD	Consulting	TeleMedicine
Julio Chalela, MD	Consulting	TeleMedicine
Marc Chimowitz, MD	Consulting	TeleMedicine
Angela Hays, MD	Consulting	TeleMedicine
Edward Jauch, MD	Consulting	TeleMedicine
Christos Lazaridis, MD	Consulting	TeleMedicine
Nikolaus Papamitsakis, MD	Consulting	TeleMedicine
Tanya Turran, MD	Consulting	TeleMedicine
Troy Gingerich, MD	Courtesy	Pain Management
Christopher Ezeihuaku, MD	Active	Internal Medicine

Emergency Medical Services

Objective: Promote educational opportunities for agencies providing Emergency Medical Services for York County.

- $ Maintain physician medical control for all agencies providing emergency medical services.
- $ Working to bring more educational opportunities for EMS providers to York County through York Technical College and Piedmont EMS.

Objective: Promote community health education and safety programs.

- $ Continue as lead agency of York County Safe Kids program.
- $ Continue to conduct child passenger safety checks at EMS headquarters on Heckle Boulevard. Explore additional locations to conduct child passenger safety checks.
- $ Conduct a study to evaluate the need for pre-hospital public education in our community. Develop and provide programs to meet those needs.

Objective: Enhance the level of pre-hospital care given in York County.

- $ Conduct research to identify best practice in pre-hospital care.
- $ Enhance protocols to provide best practice.
- $ Implement Automatic Vehicle Location System in conjunction with York County.

PMC.2012.00000311

PET-EX017B.0016

RECORD 004694

Emergency Medical Services (EMS) - Response Times (June 1, 2009-May 31, 2010)

Total EMS calls*:	21,879
Total Emergency Dispatches:	19,017
Quick Response Unit	1,476

*Reconciled to York County Data

District	Total District Calls	Total Emergency Responses
Eastern York County	13,641	12,686
Clover/Lake Wyle	2,037	1,914
City of York	2,393	2,249
Western York County	2,332	2,168

District	Contract Response Provision (in minutes)	Average Response Times (in minutes)
Eastern York County	12	8 minutes 29 seconds
Clover/Lake Wylie	18	9 minutes 41 seconds
City of York	12	8 minutes 53 seconds
Western York County	20	11 minutes 39 seconds

York County Emergency Response Districts

Eastern York County (12 minutes)
Bethesda
City of Rock Hill
Flint Hill
Fort Mill
Lesslie
Newport
Oakdale
Riverview
Tega Cay

Western York County (20 minutes)
Bethany
Bullock
Hickory Grove
McConnells
Sharon
Smyrna
York Fire District (out of city)

City of York: 12 minutes

Clover/Lake Wylie & Bethel - Clover Fire District: 18 minutes

Projected population FY 2009	227,000	Next Trigger for New Equipment
Eastern York County	163,665	166,500 (Obligation already met)
Western York County	63,335	72,500 (Obligation already met)

Emergency Medical Services Equipment/Resource Allocation

I. As required by the contract, all ambulances operate as Advanced Life Support units, 24 hours a day, 365 days a year.

II. As required by the contract, Piedmont Medical Center is required to operate ambulance stations in Eastern York County and three ambulance stations in Western York County as follows:

Eastern York County:
One unit on Heckle Boulevard
One 12-hour unit on Heckle Boulevard
One Quick Response vehicle at Heckle Boulevard
One unit on Black Street
Three 24-hour and one 12-hour units in Fort Mill area-Tega Cay, Baxter and downtown Fort Mill
One unit at Exit 82/ Riverview Road

Western York County:
One unit at Piedmont West
One unit in Sharon
One unit at Clover
One unit at Newport
One 12-hour unite at Leslie Fire Department
One Quick Response Vehicle (QRV) at Piedmont West

Employee Information as of May 31, 2010

	Full Time	Part Time	PRN
Piedmont Medical Center	1,040	93	236
Carolina Surgical Center	18	9	5
Totals	*1,058*	*102*	*241*

Total Contracted Employees 327

PMC.2012.00000314
PET-EX017B.0019

RECORD 004697

Medicaid Cost/Charge Ratios:

Inpatient:	27.70%
Outpatient:	26.44%

PMC.2012.00000315
PET-EX017B.0020

RECORD 004698

Contract Reporting Year Ending May 31, 2009

"Pricing"

As of the filing of this annual report, Amisub of South Carolina, d/b/a Piedmont Medical Center, is in full compliance with all requirements of Section 3.1 (e) Pricing as amended and modified by the First, Second, Third, Fourth, Fifth, Sixth, Seventh and Eighth addenda to the agreement between York County, South Carolina and Amisub.

Attached is the MedPar report reflecting Medicare inpatient charge data for the federal year beginning October 1, 2008 and ending September 30, 2009.

PMC.2012.00000316

PET-EX017B.0021

RECORD 004699

MEDPAR DATA
Federal Fiscal Year October 1, 2008 Through September 30, 2009
Medicare Inpatient Data

Hospital Comparison using 2009 Medpar Data by Specialty

Specialty and Category	Carolinas Medical Center (340010)	Carolinas Medical Center-Mercy (340079)	Catawba Memorial Hospital (340002)	Mary Black Memorial Hospital (340019)	Palmetto Health-Baptist Columbia (420088)	Palmetto Health Richland Memorial (420089)	Piedmont Medical Center (340009)	Presbyterian Hospital (340001)	Providence Hospital (340075)	Spartanburg Regional Medical Center (420007)	Spring Hill Hospital (340044)
CARDIOVASCULAR MEDICINE	$20,823.44	$16,193.61	$15,547.57	$29,572.78	$35,567.44	$33,560.84	$18,667.32	$17,701.80	$18,257.58	$26,484.80	$27,198.12
CATH LAB	$51,788.27	$50,776.82	$44,708.83	$59,782.12	$48,295.81	$61,770.25	$47,816.45	$50,527.45	$51,254.48	$51,828.89	$53,982.24
DERMATOLOGY	$16,740.57	$14,866.56	$11,870.20	$25,233.55	$44,449.97	$33,177.63	$20,465.63	$16,772.17	$16,938.30	$27,971.90	$29,817.17
ENDOCRINOLOGY MEDICINE	$16,858.51	$15,693.13	$11,764.24	$21,511.90	$29,192.55	$26,589.54	$15,845.51	$14,432.70	$16,078.67	$27,340.14	$26,500.00
ENDOCRINOLOGY SURGERY	$26,878.48	$9.00	$20,008.29	$0.00	$50,647.71	$46,048.59	$30,238.81	$28,469.91	$25,356.92	$47,014.76	$0.00
ENT MEDICINE	$14,797.12	$13,800.48	$12,215.33	$0.00	$50,505.38	$22,827.47	$13,435.05	$13,808.88	$13,009.36	$21,311.39	$19,215.00
ENT SURGERY	$31,880.09	$0.00	$0.00	$0.00	$0.00	$75,043.37	$0.00	$25,975.92	$0.00	$0.00	$0.00
GASTROINTESTINAL MEDICINE	$21,258.56	$19,852.72	$15,777.62	$29,968.49	$33,176.52	$37,899.36	$19,949.73	$19,549.18	$17,164.56	$33,192.88	$29,798.15
GENERAL MEDICINE	$16,880.51	$16,458.29	$12,326.04	$0.00	$35,359.75	$26,597.02	$14,695.60	$15,281.25	$15,129.47	$21,187.61	$24,355.65
GENERAL SURGERY	$76,809.56	$56,439.52	$39,628.91	$77,907.93	$65,945.94	$177,981.18	$58,446.89	$66,740.65	$59,848.27	$85,344.85	$92,138.54
GYNECOLOGY	$25,420.53	$19,885.11	$19,475.33	$25,162.86	$28,043.29	$28,730.83	$23,158.80	$23,432.57	$0.00	$32,058.49	$48,125.67
HEMATOLOGY	$18,705.61	$13,623.51	$14,753.94	$40,121.70	$36,782.70	$35,775.84	$14,452.74	$19,851.85	$13,192.87	$30,518.24	$36,359.64
HIV INFECTIONS	$35,676.31	$0.00	$18,454.18	$0.00	$0.00	$60,086.70	$0.00	$28,604.89	$0.00	$0.00	$0.00
INFECTIOUS DISEASE	$30,294.43	$33,297.24	$29,071.37	$63,422.12	$78,848.57	$79,549.11	$63,759.98	$40,845.37	$37,716.52	$57,502.81	$70,695.62
MAJOR TRAUMA	$34,139.55	$0.00	$15,603.00	$0.00	$49,369.06	$63,265.23	$15,760.40	$19,685.12	$0.00	$39,595.83	$0.00
NEPHROLOGY	$21,702.67	$16,338.06	$16,667.47	$34,872.83	$37,888.71	$36,054.92	$21,742.27	$21,917.39	$24,185.55	$36,258.62	$36,487.92
NEUROLOGICAL MEDICINE	$25,852.25	$21,222.59	$14,977.68	$30,930.07	$35,810.94	$38,690.48	$21,263.36	$20,618.20	$20,058.53	$33,099.46	$32,705.20
NEUROSURGERY	$51,805.11	$58,558.43	$43,666.54	$31,250.17	$65,720.23	$98,021.87	$23,733.97	$41,727.06	$31,254.92	$52,609.11	$0.00
OBSTETRICS - DELIVERED	$16,506.33	$0.00	$0.00	$0.00	$0.00	$36,401.17	$0.00	$0.00	$0.00	$15,889.19	$0.00
OBSTETRICS - NON DELIVERED	$17,456.83	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
ONCOLOGY MEDICINE	$30,927.40	$24,687.96	$18,043.76	$48,386.45	$61,962.14	$55,052.33	$26,855.03	$26,989.31	$22,248.92	$39,026.59	$32,081.60
ONCOLOGY SURGERY	$36,528.72	$0.00	$28,812.06	$0.00	$61,890.72	$59,347.86	$29,571.63	$32,865.49	$0.00	$58,401.80	$0.00
OPHTHALMIC	$111,651.37	$105,402.50	$69,198.52	$0.00	$68,627.50	$162,757.42	$61,869.61	$94,207.66	$69,583.69	$150,459.95	$0.00
OPHTHALMOLOGY	$16,869.70	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$17,992.20	$0.00	$0.00	$0.00
ORTHOPEDIC MEDICINE	$20,927.00	$17,692.38	$14,003.41	$25,241.32	$25,980.61	$28,565.20	$19,823.12	$20,992.50	$12,929.81	$25,648.30	$26,911.81
ORTHOPEDIC SURGERY	$38,911.18	$41,694.72	$28,078.84	$51,180.74	$57,376.37	$58,193.88	$32,871.87	$40,831.07	$38,764.93	$50,155.60	$53,784.67
PLASTIC SURGERY	$34,550.02	$25,505.60	$28,154.24	$28,863.58	$63,364.50	$62,692.90	$30,179.14	$37,759.39	$21,387.27	$38,882.71	$35,977.08
PODIATRIC/DRUG TOXICOLOGY PTS	$20,102.78	$21,614.41	$13,852.64	$23,965.63	$26,145.46	$33,035.75	$14,512.70	$21,080.83	$15,572.64	$29,928.78	$22,420.86
PSYCHIATRY	$15,907.12	$16,749.00	$19,713.11	$21,179.62	$28,078.45	$24,638.65	$15,846.40	$13,989.78	$0.00	$22,685.68	$20,559.92
PULMONARY MEDICINE	$25,993.10	$21,925.71	$18,180.58	$38,730.74	$49,278.13	$47,643.32	$27,644.48	$25,289.61	$26,440.75	$36,507.86	$48,508.28
SPINAL FUSION SURGERY	$58,937.50	$57,402.52	$39,398.06	$120,205.69	$103,253.39	$140,277.43	$52,619.48	$62,495.66	$35,774.93	$69,795.01	$0.00
SUBSTANCE ABUSE	$20,858.25	$7,427.41	$11,495.53	$0.00	$0.00	$49,059.59	$25,437.86	$10,218.89	$0.00	$34,250.96	$25,366.40
THORACIC SURGERY	$57,277.80	$63,119.81	$37,368.37	$76,902.93	$74,893.24	$82,815.18	$52,324.17	$52,571.19	$51,259.65	$89,431.01	$81,369.38
TRANSPLANT	$153,886.26	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
UROLOGY MEDICINE	$18,326.27	$15,915.60	$13,670.81	$24,291.89	$30,960.87	$34,090.69	$17,121.99	$16,476.90	$15,701.20	$26,248.08	$26,316.05
UROLOGY SURGERY	$38,069.46	$32,569.05	$23,894.41	$26,557.91	$43,566.51	$55,830.86	$21,804.21	$30,886.27	$68,104.92	$51,629.90	$27,619.53
VASCULAR SURGERY	$56,443.38	$43,994.71	$32,639.76	$46,223.62	$61,385.65	$80,830.28	$52,676.15	$52,916.35	$46,904.78	$73,739.44	$57,078.09
Total Average	$38,856.85	$28,655.20	$21,678.15	$42,289.96	$46,884.55	$56,690.15	$31,629.42	$32,125.65	$37,884.96	$45,983.57	$39,991.50
Average LOS	5.8	5.4	4.4	5.0	7.3	7.0	5.4	6.0	5.3	5.7	4.6
Rank	6	10	11	4	2	1	9	8	7	3	5

Piedmont Medical Center Beds

Total licensed beds:	*288*
- Acute Medical/Surgical	251
- Psychiatric	17
-Non-operational	20
- Special Care Nursery Bassinets	10

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RECORD 004701

2009 Scholarships and Education

A. Scholarships
Paid June 1, 2009 – May 31, 2010

York Technical Community College - CAP Scholarships 4 Scholarships	$19,450
York Technical Community College York County Scholarship	$15,517
Winthrop University York County Scholarship	$15,517

B. Education support

1.	University of South Carolina – Nursing program support	$250,000
2.	York Technical College – Nursing program support	$2,937
3.	Additional education support	$255,917
Total education support		***$559,338***

C. Piedmont provides community education through the following events and publications:

1.	Healthy Hometown: Fort Mill & York events	$54,586
2.	HealthBreak magazine	$149,397
Total community education		***$203,983***
Total education		***$763,321***

2. Piedmont Medical Center serves as a clinical practicum site for:

- Medical University of South Carolina
  - Nursing, Physician Assistant, Pharmacy
- Brookstone Academy
  - Pharmacy Techs
- University of South Carolina
  - Nursing, Pharmacy, Speech Pathology, Physical Therapy
- Winthrop University
  - Dietitian Training, Social Work, Program
- York Technical College
  - Nursing, Laboratory, Radiology, Operating Room Technician, Emergency Medical Training
- Kaplan University: Nursing
- University of Phoenix: Nursing
- Walden University: Nursing
- University of South Dakota: RN Refresher Program

Community Donations

1. Palmetto Volunteers in Medicine	$70,000
2. North Central Family Medical Center	$35,281
3. York County Council on Alcohol and Aging	$25,000
4. Old Town Association	$21,500
5. Springs, Leroy Girls on the Run	$10,000
6. Tega Cay Neighbors	$ 7,000
7. Boy Scouts of America/Palmetto	$ 5,000
8. Childrens Trust Fund of SC	$ 5,000
9. Leukemia & Lymphoma Society	$ 5,000
10. Civil Air Patrol/SC	$ 2,500
11. Culture & Heritage Foundation Inc.	$ 2,500
12. Fort Mill Rotary Foundation	$ 2,500
13. Tega Cay Lions Club	$ 2,500
14. American Red Cross/York	$ 2,000
15. Fort Mill High School Booster Club	$ 1,100
16. Catawba Care Coalition Inc.	$ 1,000
17. Family Connection of SC	$ 1,000
18. Good Folks of York County	$ 1,000
19. Harry Hampton Memorial Wildlife Fund	$ 1,000
20. Junior Welfare League	$ 1,000
21. March of Dimes/SC	$ 1,000
22. People's First Insurance	$ 1,000
23. Upper Palmetto YCMA	$ 1,000
24. York County Community Foundation	$ 1,000
25. Young Life of York County	$ 800
26. Early Learning Partnership	$ 500
27. Music for Humanity	$ 500
28. NAACP	$ 500
29. Sheriff's Foundation of York County	$ 500
30. Veteran's of Foreign Wars	$ 500
31. World Children's Wellness Foundation	$ 500
32. Nation Ford Land Trust	$ 250
33. SC State Guard Foundation, Inc.	$ 250
34. York County Cancer Association	$ 250
35. York County/180	$ 250
36. St. Philip Neri Catholic Church	$ 50
Grand Total	**$210,731**
Total Sponsorships	**$43,620**

Grand total education and donations ***$986,638***

Piedmont Medical Center Physician Satisfaction Survey

The last survey was conducted during third quarter 2009.

Overall hospital rating = 72.7 percent

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RECORD 004705

Piedmont Medical Center
Continuing Education Report, FY 2009-2010

During the fiscal year 2009, Piedmont Medical Center's department of Education provided employees with many diverse opportunities to enhance their knowledge and increase skill levels. With a staff of two Educators, two Diabetes / Wound Care Educators, two Community Educators, one part time Educator, and Education Liaisons in each department, the department provided multiple education opportunities to employees and the surrounding community.

A variety of learning formats were available for Piedmont employees, the healthcare community and the surrounding community at large. Opportunities included educational presentations, self learning modules (Written), videos, Voice activated manikin sessions, and computer assisted instruction. Additionally, the department uses Tenet's Education library and maintains a membership with Mid-Carolina Area Health Education Consortium.

Piedmont is an approved provider of Continuing Nursing Education by the South Carolina Nurses Association, an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. During the fiscal year 2009, the department provided 88 educational activities yielding 304 Continuing Education Contact Hours (CECH) to a total of 2,245 attendees. Programs included Basic Cardiac Rhythm Interpretation, 12 Lead EKG evaluation, Crisis Management, Nursing Research, Healthcare Statistics, Legal issues in Healthcare, Basic and Advanced IV therapy, Critical Thinking, Physical Assessment, Leadership development, Documentation, Mentoring, Electronic Medical Record systems and Bedside Medication reconciliation, Wound assessment, Diabetes management, Lactation training, Cardiac and Neurological assessment and monitoring, Psychiatric care and Maternal-child health related topics. Basic and Advanced levels of various programs were offered. Piedmont also provided continuing education contact hours for the South Carolina Trauma Symposium and the Perinatal division sponsored an annual Perinatal Nursing Conference, with 80 persons attending from across the Carolinas.

In addition to various educational offerings, the department also sponsors and supports the Research committee, Shared Governance program, the hospital Clinical Ladder program, and the Nursing awards promotion process sponsored by the South Carolina League of Nursing and Palmetto Gold with the South Carolina Nurses Foundation. Throughout the year, the department supported four national certification review programs: Certified Critical Care Nurse, Certified Medical Surgical Nurse, Certified Oncology Nurse and Certified Emergency Nurse. The department also sponsored two Certifications for Oncology in Chemotherapy and Biotherapy administration and management. Various program offerings were available for Registered Nurses, Licensed Practical Nurses, Nurse Technicians, Pharmacist, Imaging Technologist, Laboratory Technologist, Respiratory Care Providers, EMT's, Paramedics, Social Workers, and Physical Therapist. Many opportunities were available for Leadership and Management growth. International programs such as the Trauma Nursing Core Course, Advanced Fetal Monitoring, Crisis Prevention Intervention, and Crucial Conversations were offered throughout the year. Piedmont also updates and maintains an in-house medical library used by employees, physicians, and students from a variety of disciplines. Piedmont serves as a training facility for Nursing (BSN, ADN, LPN), Laboratory Technology, Imaging Technology, Pharmacy, Speech Therapy, Paramedic, Emergency Medical Technician, Administrative and Surgical technology students. The department also collaborates with the University of South Dakota as a clinical site for RN Refresher students, with 4 successful completions during the 2009-2010 cycle. The Department sponsored leadership training in the Healthy Work Environment utilizing

guidelines from the Association of Nurse Executives and the American Association of Critical Care Nurses.

Computer assisted instruction for all disciplines remained available through the Tenet Web network using .EDU, HealthStream, and Skillsoft. Available also on line is an NCLEX RN review course to assist newly graduated nurses in preparation for their licensing examination, On line Critical Care courses from the American Association of Critical Care Nursing, and Surgical Nursing programs from the Association of Operating Room Nurses. Nationally recognized continuing education credits were also provided through the Emergency Nurses Association, the Association of Women's Health, Obstetric and Neonatal Nurses (AWONH), and the Oncology Nurses Society.
The American Heart Association (AHA) recognizes Piedmont's Department of Education as a Community Training Center. Piedmont provides all available courses in Basic Life Support, Advanced Life Support, Pediatric Advanced Life Support, and Neonatal Resuscitation courses. During the fiscal year, the department provided training and verification to 1356 Piedmont Medical Center employees, Physicians, and others in the surrounding medical community and the residents. Piedmont also sponsored one mass CPR training session for the community, teaching 356 individuals.

The Department assisted in the coordination and facilitation of the mandatory 2009-2010 Ethics and Compliance general training from Tenet and Nursing Orientation to all new staff.
The Department participated in Piedmont's community Healthy Hometown events in York and Fort Mill, providing Heart and Stroke awareness training, Hand Hygiene, and Blood sugar monitoring.

Medical Indigent Assistance Program Guidelines

Financial Eligibility Requirements

Introduction: This chapter states the criteria used to determine if the applicant's income and resources are within the MIAP limits.

301 *Determining Financial Eligibility*

In determining eligibility for the MIAP, the income and resources of the applicant's family must be considered and measured against the appropriate standards. Spouses are responsible for spouses and parents are responsible for minor children.

302 *Family*

The first step in determining the amount of income and resources available to the applicants is to establish the family composition. A family is defined as the applicant and dependents or legally responsible relatives who live in the same household.

Consideration must be given to the applicant's dependent status in determining the family composition.

A. If the applicant is legally or financially dependent upon someone else in the household, the family is composed of the following household members:

1. the applicant; and
2. the persons upon whom he/she is dependent (i.e., the responsible person); and
3. all persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the responsible person.

If the applicant is a minor child who lives in the home with a stepparent, the stepparent is considered a member of the family only if the stepparent claims the child as an income tax dependent.

If the applicant is an adult who is financially dependent upon someone else in the household, the applicant is considered a family member only if

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PET-EX017B.0030

RECORD 004708

the person upon whom he/she is dependent is a relative; and both parties agree that one is financially dependent upon the other; and one could be claimed by the other as a dependent for income tax purposes, whether or not a return is filed.

B. If the applicant (e.g., adult) is not dependent upon someone else, the family is composed of the following household members:

1. the applicant; and
2. the persons related to the applicant by birth, marriage, or adoption and who are legally or financially dependent upon the applicant.

If the applicant has stepchildren living in the home, the stepchildren are included as members of the family only if the stepparent claims them as income tax dependents.

Common Law Relationships. South Carolina law recognizes common law marriages. A legally binding common law marriage is an agreement between two people to be married. Both of the individuals must be legally free to marry and they must hold themselves out to the community as a married couple. To document that a common law marriage exists, verification must be obtained that substantiates the fact that both individuals are legally free to marry. Statements are obtained from each partner indicating when the couple began living together as husband and wife and a collateral statement indicating the couple is known to the community as husband and wife. In South Carolina, common law marriages between minors are recognized when the male is at least 14 years old and the female is at least 12 years old.

Unmarried Individuals Living Together. Unmarried individuals who live together, who do not have common children and do not claim to have a common law relationship are not considered members of the same family. Ordinarily the income and resources of one would not be attributed to the other since they are not legally or financially responsible for each other. However, if both parties agree that their income is mutually available, half of the total gross annual income is attributed to the applicant.

Pregnant Women Cases. The family composition for a pregnant woman applicant is as follows:

- the pregnant woman;
- the unborn child(ren);
- the father of the unborn child (if he resides in the home); and

- persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the applicant

Family Members Recently Deceased. When a member of the applicant's family dies prior to the effective date of the application, the deceased individual is not considered a member of the family. Therefore, his income and resources are not considered in determining the applicant's eligibility unless such income and assets are available to the applicant and his family as of the effective date of the application.

When the applicant is deceased and death occurred within 30 days of the date of admission, his income is considered for only the thirteen weeks prior to the date of application and is not annualized.

When the applicant's family composition is questionable, prepare a summary of the family's circumstances and forward it to the Bureau of Eligibility and Oversight for a determination of family size.

302.1 *Minors or Students Absent from Home*

To determine the family composition for an applicant who is a minor or a student absent from his parent(s) home, consideration must be given to the student's financial dependence upon the parent(s). Examples of such minors are students or children who choose not to live with their parent(s). For the purposes of the MIAP, an applicant who is a minor child or a student who is still financially dependent upon his/her parent(s) is considered a member of his parents(s)' household. If his/her parent(s) do not live in the same home, he/she is considered a family member in the home of the parent who holds legal custody.

A minor child is always considered a dependent of his parent(s) unless a court order exists which divests the parent(s) and the child of their rights, privileges and annuities, duties and obligations with respect to each other. If such a document exists, the child is not considered a member of the parent(s)'s family and the parent(s)' income and resources are not available to the minor child. A copy of the court order must be filed in the case record as documentation. For students over age eighteen (18), the parent(s) must be contacted to determine if the student is financially dependent upon the them. If it is determined that the student is not financially dependent upon the parent(s), the student is not considered a member of their family and the parents income and resources are not available to the child.

303 *Income Standards*

Only those persons whose gross family income is equal to or less than one hundred percent of the poverty guidelines may qualify for full payment through the MIAP. Only those persons whose gross family income is between one hundred and two hundred

percent of the poverty guidelines, may qualify for partial payment through the MIAP. (Refer to Table II through Table XXIV of this chapter for the Federal Poverty Guidelines.)

304 *Computation of Income*

The gross annual income of the individual and his family is measured against the annual poverty guidelines for the appropriate size family. Gross annual income should be representative of the family's average earnings. For this reason, the method of calculating gross annual income will vary depending on the employment status of the family members. In all cases, the applicant must be carefully interviewed to determine his/her employment status. *(Refer to 306.2 for the treatment of income when a family member is self-employed.)*

304.1 *Methods of Verification and Computation*

The following describes methods of verifying and computing gross annual income based on the manner in which the income is received.

1. Fixed Income is a set benefit or a set income for work performed. An example is someone receiving Social Security benefits or a teacher. If the income is a fixed monthly amount, the income received in the preceding or current month must be verified. The verified monthly income is multiplied by twelve (12) to determine gross annual income. If the income is a fixed amount received semi-monthly, bi-monthly, etc., the income for the appropriate pay period must be verified and multiplied by the number of pay periods in a year.

2. Hourly/Salaried with Bonuses, Commissions and Overtime is income received regularly and is based on the number of hours worked or a salary, which is subject to additional earnings due to overtime, commissions or bonuses. Income received in this manner is usually variable. Therefore, it must be verified for the four (4) weeks prior to the effective date of the application.

   If income verification is available for the entire four (4) week period, the income received is multiplied by thirteen (13) to determine gross annual income. If income verification is available for a longer period of time, the income received should be converted to an average weekly income and multiplied by fifty-two (52).

   If the applicant does not have four (4) weeks of income (earned or unearned), verify the total amount of income received in the four (4) week period and multiply by

thirteen (13) to determine the gross annual income.

3. Irregular Income is income which varies from week to week or month to month. An example is people who work odds jobs. The method for verifying and computing income is the same as stated in number 2 above.

4. Self-Employment Income is income derived from an individuals' own business. Examples are farmers, beauticians, "shade tree" mechanics, loggers, etc.

   In this situation, determine gross annual income based on income received in the four (4) weeks prior to the effective date of application, multiplied by thirteen (13). If the person does not report income on a weekly or bi-weekly basis, determine gross annual income based on the prior year's income tax return. Deductions are allowed for self-employment income for the cost of doing business. Refer to Chapter 3 Section 306.2 for a list of allowed deductions.

   For self-employed individuals who do not file income tax returns or maintain employment records, a signed affidavit regarding their earnings should be obtained.

   Example A. The applicant has worked odd jobs all his life, but those jobs have been routinely performed for the same individuals who know the applicant and who are known by the applicant. In this situation, the applicant should be asked to sign release of information forms. These forms give you, as the designee, permission to obtain necessary documentation.
   The applicant should be able to provide you with the names and addressed of individuals for who he has worked. With the release of information form, the employers can then be asked to furnish a statement regarding the frequency of employment, such as one (1) day per week and the amount paid.

   Example B. The applicant has worked odd jobs all his life but those jobs have been a matter of "pick-up" work here and there. The applicant does not know the names of the individuals for whom he worked.
   In this type of situation, the applicant's statement of gross annual earnings can be accepted. The case record should contain dictation regarding the applicant's statement and the reason it was accepted.

5. Seasonal Income is income, which is generally received only part of the year. If an individual or family has no other sources of income, the amount received during the most recent "season" must be verified and considered to be annual income. If an individual has other income, the amount received during the "season" is combined with the other income to determine gross annual income.

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RECORD 004712

Most recent season is defined as a season that occurred in the twelve (12) months prior to the effective date of the application.

It should be noted for migrants work all during the year. Therefore, their income should be determined based on the method stated in number 2 of this section..

Note: *If the earnings of the applicant and his/her family do not conform to the aforementioned description, contact the Bureau of Eligibility Policy and Oversight for assistance.*

For non-emergency applications, income is verified based on the income received prior to the effective date of the application. For emergency admissions and retroactive applications, income is verified based on income received prior to the date of admission rather than the effective date of the application.

305 *Unearned Income – Definitions and Types*

Unearned income is any income, which does not meet the definition of earned income. The following payments are considered unearned income (this list is not all inclusive):

1. Unemployment Compensation and Workmen's Compensation
2. Assistance Payments Based on Need – Family Independence (FI), SSI, and other cash payments
3. Pensions and Benefits – Annuities, pensions, retirement, veteran's or disability benefits, Social Security benefits, and other such pensions and benefits
4. Strike benefits
5. Support and Alimony – Support or alimony payments from non-household members
6. Contributions – Any cash contribution made to any member of the family by a non-family member (gift or loan)
7. Interest Payments – Payments from government-sponsored programs, dividends, interest, royalties and all other money payments from any source considered a gain or benefit
8. Trust Funds – When a family member receives monies from trust funds, the monies are treated as unearned income

9. Savings, Mortgages, Annuities, Insurance, and Other Investments – Dividends and interest from investments, such as stocks, bonds and savings, and payments of interest on mortgaged, annuities, insurance, etc. are unearned income. A payment of principal on a mortgage or loan may or may not be unearned income depending on whether or not the applicant loaned the money.

10. Lump Sum Payments – Any lump sum payment is considered unearned income in the month received an becomes a resource if retained to the following month. **EXCEPTION:** Federal and state income tax refunds are excluded from income.

11. Educational Loans, Grants and Scholarships – Any portion of loans, grants, and scholarships which may be used to meet the person's current living expenses (food, clothing or shelter) is counted as income. Any portion, which is clearly designated for tuition, is excluded from income.

12. Capital Gains Income – Any gain received from the sale of an asset is counted as income.

306 *Earned Income-Definition and Types*

Earned income includes all income in cash earned by an individual through the receipt of wages, salary, commissions, or profit from activities in which he/she is engaged as a self-employed individual or as an employee. This earned income may be derived from his/her own employment, such as a business enterprise or farming, or derived from wages or salary received as an employee.

306.1 *Earned Income Credit (EIC)*

The EIC is a provision of the Federal tax laws that allows the earnings of many individuals and couples to be supplemented either in advance or in a lump sum. This supplement (Earned Income Credit) is counted as earned income.

306.2 *Income of Self-Employment*

Self-employment income is allowed deductions for the cost of doing business. The applicant must provide a record of expenses incurred in the production of the income. Examples of self-employment are beauticians, makeup sales, etc. Allowable costs for producing self-employment income are:

1. Identifiable costs of labor, such as salaries, employer share of Social Security, insurance, etc.;

2. Stock, raw materials, seed and fertilizer, feed for livestock used in producing income;
3. Rent and costs of maintenance for the business building;
4. Business telephone costs;
5. Costs of operating a motor vehicle when required in connection with the operation of the business;
6. Insurance premiums and taxes paid on the business;
7. Costs of feed for work stock;
8. Costs of meals for children when day care is provided in the applicant's home;
9. Interest paid to purchase income-producing property.

The following items are not considered as a cost of producing self-employment income:

1. Payments on the principle of the purchase price of income producing real estate and capital assets, equipment, machinery and other durable goods;
2. Net losses from previous providers;
3. Federal, state and local income taxes, money set aside for retirement purposes, and other work related expenses are accounted for by the earned income deduction.
4. Costs of producing home produce intended for family consumption;
5. Family living expenses;
6. Personal debts;
7. Entertainment expenses'
8. Depreciation expense.

After the self-employment income is given the cost of doing business deduction, it is added to any other earned income.

306.3 *Boarder or Lodger Income*

The worker must verify and document the income received from the boarder or lodger and then exclude the verified actual costs incurred in providing room and/or board. Examples of costs incurred are the additional utilities, cost of food provided, laundry expenses, etc.

If the applicant is unable to provide records that substantiate the costs of providing lodging and/or board, a standard deduction of $60 monthly may be given for lodging and board and a standard $20 monthly may be given for lodging only. Any income received in excess of the standard amounts is added to other earned income prior to granting the standard earned income disregards.

After this exclusion, the remaining income is considered earned income and is added to other earned income.

307 *Income Verification*

All income must be verified and the method, amount and date of verification must be documented. The following documents that can be used to verify earned income:

1. Pay stubs;
2. Employee's W-2 Forms;
3. Wage tax receipts;
4. Federal income tax return;

5. Self-employment bookkeeping records;
6. Sales and expenditures records;
7. Employer's wage records;
8. Statements from employer; and
9. Employment Security Office.

The following are documents that can be used to verify other types of income:

1. Social Security award letter (changes in benefits will not always be reflected);
2. Benefit payment check;
3. Unemployment Compensation award letter;
4. Pensions award notice;
5. Veterans Administration award notice;
6. Correspondence on benefits;
7. Income tax records;
8. Railroad award letter;
9. Support and alimony papers evidenced by court order, divorce or separation papers, contribution check;
10. Social Security Administration records and letters;
11. Employment Security Commission;
12. Union records;
13. Workmen's Compensation records;
14. Veterans Administration records and letters;
15. Insurance company records;
16. Tax records;
17. Railroad Retirement Board records; and
18. Department of Social Services Letter of Notification

Note: *If the applicant claims to have no income, you may accept his/her statement; however, he should be carefully interviewed to determine how he obtains food, clothing, and shelter given such circumstances. This information should be included in the case record dictation. If you question the accuracy of his statement, you may request that the applicant go to the Employment Security Commission to obtain the most recent quarterly wage information.*

Total countable resources must be within the limits described below:

1. **Home property.** The value of a farm of 50 acres or less on which the applicant or his family resides and has resided for at least twenty-five (25) years is excluded from the resources computation. The equity value of home property other than a family farm cannot exceed $35,000.

2. **Non-home real property and taxable personal property.** The applicant's or family's total equity interest in non-home real property and taxable personal property such as motor vehicles may not exceed $6,000. Real property used in a business enterprise is included in the resource determination. Work-related equipment being used in a business enterprise is excluded from the resource determinations.

3. **Household effects.** Household effects such as furniture, kitchen utensils, etc., are not considered in the resource computation.

4. **Liquid assets.** The applicant or family's total liquid assets may not exceed $500.

   For non-emergency admissions, the value of liquid assets must be determined as of the effective date of the application. For emergency admissions and retroactive determination, the value of liquid assets must be determined as of the date the applicant entered the hospital

   If an applicant claims that he/she and his/her family members do not own any liquid assets, you may accept his statement. The case record should contain a notation that the applicant's statement was accepted.

   a) If the total value of all liquid assets owned by the applicant and his/her family members does not exceed the limit, the liquid asset test is met.

   b) An applicant with excess liquid assets may establish eligibility if he/she and/or other members of his/her family spend the excess amount over $500 toward payment of valid debts.

For the purpose of meeting this spend-down requirement, valid debts are defined as:

Rent or Mortgage Payment - The actual amount of rent or mortgage on the primary residence not to exceed maximum allowable deductions of $500 per month, per household.

Utilities - The actual amount for utility bills (i.e., electric, gas, oil, kerosene, wood, etc.) not to exceed a maximum allowable deduction of $150 per month, per household.

Medical Expenses - The actual amount paid for the cost of medical care, i.e., doctor

bills, hospital charges, durable medical equipment, prescription drugs, etc. for each family members which were incurred within thirty (30) days prior to the effective date of application or for the applicant, during the period of hospitalization for which assistance is requested.

The applicant must be advised that he/she must spend-down his excess liquid assets before he can qualify for assistance through the fund. The applicant should be advised that the spend-down of excess liquid assets must occur after the effective date of application in order for the expense to be deducted from excess resources and that spend-down may be accomplished in the following way:

The applicant must present paid receipts that verify that the excess amount was used toward the payment of these valid debts which were incurred within thirty (30) days prior to the effective date of application or during the period of hospitalization for which assistance is requested. Spend-down must be accomplished within thirty (30) days of the effective date of the application.

For retroactive applications, the spend-down must be accomplished within thirty (30) days of the date of verification that the value of liquid assets exceeded the limit, if the applicant still owns the excess liquid assets. If the applicant no longer owns the excess liquid assets, the excess amount must have been spent on valid debts in accordance with the above stated procedure.

309 *Non-Liquid Resources*

The equity interest of non-liquid resources must be considered in the resources computation. Equity interest is the value of the applicant's and/or his family's ownership interest in the resources less any legal indebtedness. To determine a person's equity interest in a non-liquid resource, the following factors must be considered:

1. **Ownership Interest.** The value of a person's ownership interest in property must be considered. A person may have sole ownership. In this case, the equity value in the entire piece of property must be considered a resource and measured against the appropriate standard.

   If the person, jointly owns property with one or more other persons, only the equity value of the applicant's and/or his family's interest in the property is considered a resource and measured against the appropriate standards.

   In addition to joint or sole ownership of property, a person may own the right to use real property. These rights might be in the form of:

$ *Timber Rights* - Timber rights permit an individual to cut and remove free standing trees from property owned by another as designated by contract with the person holding title to the land on which the timber stands. In this case, the value of the timber rights would be considered and measured against the appropriate standards.

$ *Mineral Rights* - A mineral right is an ownership interest in certain natural resources such as coal, sulfur, petroleum, sand natural gas, etc. which are usually obtained from the ground. Only the value of the mineral right is considered a resource.

$ *Remainder Interest/Life Estate* - A person may also hold a life estate or remainder interest in property. A life estate conveys upon an individual or individuals for his lifetime, certain rights in property. Its duration is measured by the lifetime of the tenant or of another person, or by the occurrence of some specific events, such as remarriage of the tenant. The owner of a life estate has the right of possession, the right to use the property, the right to obtain profits from the property and the right to sell his life estate interest. (However, the contract establishing the life estate may restrain one or more rights of the individual.) He does not have title to the property and he does not have the right to sell the property. He may not usually pass it on to his heirs in the form of an inheritance. See Table 1 in this chapter for the chart used to determine the value of a person's life estate interest in property.

Where an individual owner conveys property to another person for life (life estate holder) and to a second person (the remainder man) upon the death of the life estate holder, both a life estate interest and a remainder interest have been created in the property. Upon the death of the life estate holder, the remainder man will hold full title in fee simple. An owner of real property may designate several individuals as remainder men who would hold ownership jointly or in common by will or agreement.

Example: *Mr. Heath, who is now deceased, conveyed a life estate to his wife in home property that he owned in fee simple both before and after his marriage to Mrs. Heath. Mrs. Heath has the right to live there for the rest of her life. On her death, the property will pass to her two sons who own a remainder interest in the property. The will designated that the sons will then own the property as joint tenants. The property is not considered a resource to the remainder man until the property is actually passed on to him.*

$ Unprobated Estates (Heir Property) - If an individual who owns property

dies without making a will, and the estate has not been settled and the property is divided among heirs, the property is called intestate property. If an applicant is an heir, the value of such property must be developed. An heir would not be able to sell the property itself, but he would be able to sell his interest legally without court action and without permission of the other heirs.

The South Carolina Law concerning Descent and Distribution was changed by Act 539 of 1986. The new law is entitled Intestate Succession and Wills and is found at Section 62-2-101, et seq, S.C. Code of Laws, 1976, as amended. The law provides that the estate of an individual who dies intestate will be divided as follows:

$ If the deceased has no children, the widow (er) inherits the entire estate.

$ Regardless of the number of children surviving the deceased, the widow(er) inherits ½ of the estate and the remaining ½ is divided equally among the children of the deceased.

$ If any of the children of the deceased are not living, but at least one child survives the deceased, the ½ of the estate, which is inherited by the children, is still divided as though all children survived the parent. The portion to which the child who dies before his parent was entitled, will then be divided amongst his/her heirs according to law.

$ If there is no widow (er), the estate would then be divided equally among the children.

$ If the deceased were a joint owner of any real property, that portion to which he/she is entitled by law would become a part of his estate and would be divided according to the provisions of the law.

Note: *Any situation, which is not covered in this section, should be referred to the Bureau of Eligibility Policy and Ovesight.*

Evidence of ownership of property can be obtained by checking the deed, the will or property and tax records in the county Courthouse. A deed does not have to be recorded to be valid. Tax records can be used only as a guide to other resources of documentation, as the person(s) listed on the tax records is not necessarily the true owner. Adverse possession, which occurs when someone lives on a parcel of land, pays the taxes, and then claims ownership to the property, is not considered legal ownership unless legal title has been conferred by court order.

2. **Tax Assessed Value** - The tax-assessed value of the resource is the current market value established by the County Tax Assessor. In addition, the current market value of a motor vehicle may be established by using either the NADA book value or the current market value established by the County Tax Assessor. When using the NADA book to verify value, use only the current month's book and the listed "Trade-In" value. If the applicant wishes to rebut the current market value as established by the tax assessor's office or the NADA book, the following action is required:

Taxable Personal Property - The applicant may obtain an appraisal from a reputable dealer to establish a different value. If the county designee questions the reliability of the appraisal, he may require a second appraisal for another dealer.

Real Property - Rebuttal must be accomplished through an appeal to the assessor's office in the county where the property is located. A copy of the assessor's determination of value must be furnished to the designee. The value established by the assessor must be used.

2. **Legal Indebtedness** - Legal indebtedness is any legal encumbrance such as a note, mortgage or lien, which has been filed against the resource. It is the applicant's responsibility to provide verification of the current amount of the indebtedness. If the applicant fails to furnish verification of indebtedness, the tax-assessed value of the resource should be used in determining equity interest.

Examples of non-liquid resources are:

a) Real property;
b) Personal property, such as boats, vehicles, farm equipment and livestock. Personal property should not be confused with personal effects such as appliances, furniture, clothes and other similarly essential items of limited value that are necessary for day to day living, since personal effects are not counted.
c) Buildings

309.1 *Real Property*

Real property is treated in the following manner:

1. *Home Property* - Home property is the applicant's principal place of residence. The home is defined as the home and all contiguous property. This includes all buildings on the contiguous property such as sheds, barns, garages, warehouses, or other houses. If the surrounding property is separated from the home by public rights of way, such as roads, the surrounding property is still considered contiguous to the home. However, if the surrounding property is separated from the home by intervening property owned by others, the surrounding land is not considered contiguous to the home. A mobile home is considered as home property if it is the applicant's principal place of residence. Equity

interest in home property, which does not meet the family farm exclusion, must be applied toward the $35,000.00 home resources limitation.

2. *Non-home Property* - Non-home property is any property that is owned by the applicant and/or his family which is not contiguous to the home. The applicant's and/or his family's equity interest in non-home property must be applied toward the $6,000.00 resource limitation.

309.2 *Taxable Personal Property*

The value of the applicant's and/or his family's interest in taxable personal property must be applied toward the $6,000.00 resource limitation.

309.3 *Buildings*

In some instances, an applicant or his family may have an ownership interest in a building but not the land on which the building is located. In such cases, the value of the interest in the building must be applied toward the $6,000 resources limitation.

310 *Liquid Resources*

The value of the applicant's and/or his family's liquid resources must be applied toward the liquid asset resource limitation as found in Section 308.4. Examples of liquid resources are:

1. Cash on hand;
2. Checking or savings accounts in banks or other savings institutions, including credit unions;
3. Savings certificates;
4. The market value of stocks or bonds;
5. Trust accounts except when inaccessible;
6. Funds held in individual retirement accounts (IRA's). The entire cash value of the account, less the amount of any penalty for early withdrawal, is counted;
7. Pension funds that are available;
8. Federal and State Income Tax refunds;
9. Pre-need burial contracts; and
10. Cash value of life insurance. Count cash value only for each family member who has life insurance with a total face value(s) greater than $10,000.00. A separate determination must be made for each family member. For each family member who owns life insurance, determine the total face value owned by the individual.
(The owner is the insured unless otherwise stipulated in the policy.) If the total face value of all policies owned by the family member does not exceed $10,000.00, exclude the cash value of the family member's policies. If the total face value of all policies owned by the family member exceeds $10,000.00, exclude the first $1,500.00 of cash value and count the amount above $1,500.00

as liquid asset.

Note: *Term insurance does not have a cash value.*

310.1 *Jointly Owned Liquid Resources*

When accounts (e.g. savings or checking, stocks or bonds, etc.) are owned jointly and the applicant and/or his family have access to the entire amount in the account, the entire amount is counted toward the resource limit.

To determine whether the person has access to the entire amount, the worker will need to determine if both signatures are needed for access to the resources or if only one signature is needed. One signature means the entire amount is accessible. When both signatures are needed, only a pro-rata s hare of the account is applied to the resource limit.

310.2 *Trusts*

If an applicant and/or a member of his/her family is the beneficiary of a trust and he/she has unrestricted access to the principal of the trust, the value of the principal is counted as a resource. The value of the trust principal is measured against the liquid asset resource limitation.

If the beneficiary of the trust does not have access to the trust and the trustee either does not have the authority or refuses to make the trust principal available to the beneficiary, the trust principal is not counted as a resource. If the applicant or family member does not have access to the trust principal, only the income and/or other benefits from the trust is counted.

310.3 *Burial Plots*

A burial plot is defined as a conventional gravesite, crypt, mausoleum, urn or other repository, which is customarily and traditionally used for the remains of a deceased person. Burial plots owned by the applicant and/or his family are excluded from resources.

311 *Household Effects*

Clothing, household goods, personal effects and furnishings used for day-to-day living are excluded.

312 *Resources Verification*

All resources must be verified and the method, amount and date of verification must be documented. The following are documents that can be used to verify resources:

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PET-EX017B.0045

RECORD 004723

1. Bank statements;
2. Tax assessor records;
3. Real estate forms;
4. Insurance policies;
5. Insurance agencies;
6. Statement from other owner when there is joint ownership;
7. Current official correspondence received by the applicant;
8. Court Records - Deeds, Titles, etc., and
9. Current NADA Book.

Note: *If the applicant states that he/she and/or his/her family do not own real property or taxable personal property, the courthouse records must be searched to verify his/her statement. Courthouse records do not have to be searched in the name of minor children unless there is an indication that they own real and personal property. For reapplications which are filed within six (6) months of an MIAF eligible hospital stay, it is not necessary to re-verify (i.e., search of courthouse records) the ownership and value of real and personal property unless the applicant indicates that their circumstances have changed.*

313 *Transfer of Resources*

An applicant and/or his/her family who transferred resources without receiving full compensation within three (3) months prior to the period of hospitalization for which the application for assistance is made, may not be eligible. The application must be denied if the uncompensated value in combination with other resources exceeds the appropriate resource limitation.

Although transfer of a resource without receipt of full compensation may result in ineligibility for MIAP for up to twelve (12) months, the person may establish eligibility if it is determined that he/she later receives full market value for the transferred resource. The person may establish that full compensation was received provided the resource is returned or the applicant receives fair market value for the transferred resource, and the proceeds are used for living and/or medical expenses of the applicant to the point that the resource is reduced to within the appropriate resource limitation.

The transfer resources policy applies to:

1. Transfers made by an applicant and/or his family, or on their behalf by a person acting for and legally authorized to execute a contract for the applicant and/or his family (such as legal representative, parent of minor child, holder of power or attorney, etc.);

2. Transfers of liquid and non-liquid resources (cash, bank accounts, etc. by giving to another individual, creation of irrevocable trusts, petitioning courts to set aside funds for a specific purpose, etc.);

3. Waiver or suspension of benefits to which the individual is legally entitled, e.g. inheritance, insurance settlement and proceeds of a loan.

The transfer of resources policy does not apply to:

1. Actions take by persons not listed in #1 above (for example, policy does not apply to withdrawal of funds by another person from a bank account jointly held with the eligible applicant unless the other person is the spouse or parent of the applicant);

2. A resource that is spent or used to repay a valid debt;

3. Valid loans made by an eligible individual or eligible spouse.

314 *Treatment of Cash Received to Replace/Repair Lost, Damaged or Stolen Resources*

Cash received from any source (e.g. insurance companies, Federal or State agencies, public or private organizations, other individuals) for the purpose of replacing or repairing a resource which is lost, damaged or stolen is not income but a resource that has changed form.

When it is determined that cash will be or is received for the purpose of replacing or repairing a resource, the total amount of such cash is excluded from the income computation for a period of six (6) months from the month of receipt. However, it is not excluded from resources it is counted as the resource it replaces would have been counted.

Cash which is received for personal injury, death or other purposes is not excluded from income or resources under this provision, even if the cash is received in conjunction with an/or from the same source as cash intended to replace or repair a resource.

Table I: FAMILY COMPOSITION CHART

RELATIONSHIP TO THE APPLICANT	WHERE LIVING	INCLUDED AS FAMILY MEMBER	VERIFICATION
Spouse (Includes common law)	In the home.	Yes	Applicant's Statement
Spouse	Separated and living out of the home for 30 days from effective date of the application.	No	Collateral statement from two (2) non-related family members. Example: Landlord or Neighbor
Minor Child	In the home.	Yes	Applicant's Statement
Minor Child (Applicant)	Out of the home.	Yes, unless all parental rights are terminated by court order.	Parental statement, if yes. Court order, if no.
Child over 18 years of age.	In the home or attending school.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes.
Other Relatives	In the home.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes
Non-Relatives	In the home.	No, refer to Page 3 of this chapter for treatment.	Applicant's statement
Unmarried couple with common child	In the home.	Yes	Applicant's statement or birth record.

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PET-EX017B.0048

RECORD 004726

Table II:

Use this table when processing MIAP applications for hospital admissions on January 1, 1986 through April 30, 1986.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,250.00	$ 10,500.00
Two (2)	$ 7,050.00	$ 14,100.00
Three (3)	$ 8,850.00	$ 17,700.00
Four (4)	$ 10,650.00	$ 21,300.00
Five (5)	$ 12,450.00	$ 24,900.00
Six (6)	$ 14,250.00	$ 28,500.00
Seven (7)	$ 16,050.00	$ 32,100.00
Eight (8)	$ 17,850.00*	$ 35,700.00
For families with more than eight (8) persons, add $1,800 for each additional family member.		

Table III:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1986.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,380.00	$ 10,760.00
Two (2)	$ 7,240.00	$ 14,480.00
Three (3)	$ 9,120.00	$ 18,240.00
Four (4)	$ 11,000.00	$ 22,000.00
Five (5)	$ 12,880.00	$ 25,760.00
Six (6)	$ 14,760.00	$ 29,520.00
Seven (7)	$ 16,640.00	$ 33,280.00
Eight (8)	$ 18,520.00*	$ 37,040.00
For families with more than eight (8) persons, add $1,880 for each additional family member.		

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PET-EX017B.0049

RECORD 004727

Table IV:

Use this table when processing MIAP applications for hospital admissions after May 1, 1987.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,500.00	$ 11,000.00
Two (2)	$ 7,400.00	$ 14,800.00
Three (3)	$ 9,300.00	$ 18,600.00
Four (4)	$ 11,200.00	$ 22,400.00
Five (5)	$ 13,100.00	$ 26,200.00
Six (6)	$ 15,000.00	$ 30,000.00
Seven (7)	$ 16,900.00	$ 33,800.00
Eight (8)	$ 18,800.00*	$ 37,600.00
For families with more than eight (8) persons, add $1,900 for each additional family member.		

Table V:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1988.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,770.00	$ 11,540.00
Two (2)	$ 7,730.00	$ 15,460.00
Three (3)	$ 9,690.00	$ 19,380.00
Four (4)	$ 11,650.00	$ 23,300.00
Five (5)	$ 13,610.00	$ 27,220.00
Six (6)	$ 15,570.00	$ 31,140.00
Seven (7)	$ 17,530.00	$ 35,060.00
Eight (8)	$ 19,490.00*	$ 38,980.00
For families with more than eight (8) persons, add $1,960 for each additional family member.		

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RECORD 004728

Table VI:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1989.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,980.00	$ 11,960.00
Two (2)	$ 8,020.00	$ 16,040.00
Three (3)	$ 10,060.00	$ 20,120.00
Four (4)	$ 12,100.00	$ 24,200.00
Five (5)	$ 14,140.00	$ 28,280.00
Six (6)	$ 16,180.00	$ 32,360.00
Seven (7)	$ 18,220.00	$ 36,440.00
Eight (8)	$ 20,260.00*	$ 40,520.00
For families with more than eight (8) persons, add $2,040 for each additional family member.		

Table VII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1990

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,280.00	$ 12,560.00
Two (2)	$ 8,420.00	$ 16,840.00
Three (3)	$ 10,560.00	$ 21,120.00
Four (4)	$ 12,700.00	$ 25,400.00
Five (5)	$ 14,840.00	$ 29,680.00
Six (6)	$ 16,980.00	$ 33,960.00
Seven (7)	$ 19,120.00	$ 38,240.00
Eight (8)	$ 21,260.00*	$ 42,520.00
For families with more than eight (8) persons, add $2,140 for each additional family member.		

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PET-EX017B.0051

RECORD 004729

Table VIII:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1991.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,620.00	$ 13,240.00
Two (2)	$ 8,880.00	$ 17,760.00
Three (3)	$ 11,140.00	$ 22,280.00
Four (4)	$ 13,400.00	$ 26,800.00
Five (5)	$ 15,660.00	$ 31,320.00
Six (6)	$ 17,920.00	$ 35,840.00
Seven (7)	$ 20,180.00	$ 40,360.00
Eight (8)	$ 22,440.00*	$ 44,880.00
For families with more than eight (8) persons, add $2,260 for each additional family member.		

Table IX:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1992.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,810.00	$ 13,620.00
Two (2)	$ 9,190.00	$ 18,380.00
Three (3)	$ 11,570.00	$ 23,140.00
Four (4)	$ 13,950.00	$ 27,900.00
Five (5)	$ 16,330.00	$ 32,660.00
Six (6)	$ 18,710.00	$ 37,420.00
Seven (7)	$ 21,090.00	$ 42,180.00
Eight (8)	$ 23,470.00*	$ 46,940.00
For families with more than eight (8) persons, add $2,380 for each additional family member.		

PMC.2012.00000347

PET-EX017B.0052

RECORD 004730

Table X:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1993.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,970.00	$ 13,940.00
Two (2)	$ 9,430.00	$ 18,860.00
Three (3)	$ 11,890.00	$ 23,780.00
Four (4)	$ 14,350.00	$ 28,700.00
Five (5)	$ 16,810.00	$ 33,620.00
Six (6)	$ 19,270.00	$ 38,540.00
Seven (7)	$ 21,730.00	$ 43,460.00
Eight (8)	$ 24,190.00*	$ 48,380.00
For families with more than eight (8) persons, add $2,460 for each additional family member.		

Table XI:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1994.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,360.00	$ 14,720.00
Two (2)	$ 9,840.00	$ 19,680.00
Three (3)	$ 12,360.00	$ 24,720.00
Four (4)	$ 14,800.00	$ 29,600.00
Five (5)	$ 17,280.00	$ 34,560.00
Six (6)	$ 19,760.00	$ 39,520.00
Seven (7)	$ 22,240.00	$ 44,480.00
Eight (8)	$ 24,720.00*	$ 49,440.00
For families with more than eight (8) persons, add $2,480 for each additional family member.		

PMC.2012.00000348

PET-EX017B.0053

RECORD 004731

Table XII:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1995.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,470.00	$ 14,940.00
Two (2)	$ 10,030.00	$ 20,060.00
Three (3)	$ 12,590.00	$ 25,180.00
Four (4)	$ 15,150.00	$ 30,130.00
Five (5)	$ 17,710.00	$ 35,420.00
Six (6)	$ 20,270.00	$ 40,540.00
Seven (7)	$ 22,830.00	$ 45,660.00
Eight (8)	$ 25,390.00*	$ 50,780.00
For families with more than eight (8) persons, add $2,560 for each additional family member.		

Table XIII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1996.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,740.00	$ 15,480.00
Two (2)	$ 10,360.00	$ 20,720.00
Three (3)	$ 12,980.00	$ 25,960.00
Four (4)	$ 15,600.00	$ 31,200.00
Five (5)	$ 18,220.00	$ 36,440.00
Six (6)	$ 20,840.00	$ 41,680.00
Seven (7)	$ 23,460.00	$ 46,920.00
Eight (8)	$ 26,080.00*	$ 52,160.00
For families with more than eight (8) persons, add $2,620 for each additional family member.		

PMC.2012.00000349

PET-EX017B.0054

RECORD 004732

Table XIV:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1997

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,890.00	$ 15,780.00
Two (2)	$ 10,610.00	$ 21,220.00
Three (3)	$ 13,330.00	$ 26,660.00
Four (4)	$ 16,050.00	$ 32,100.00
Five (5)	$ 18,770.00	$ 37,540.00
Six (6)	$ 21,490.00	$ 42,980.00
Seven (7)	$ 24,210.00	$ 48,420.00
Eight (8)	$ 26,930.00*	$ 53,860.00
For families with more than eight (8) persons, add $2,720 for each additional family member.		

Table XV:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1998.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,050.00	$ 16,100.00
Two (2)	$ 10,850.00	$ 21,700.00
Three (3)	$ 13,650.00	$ 27,300.00
Four (4)	$ 16,450.00	$ 32,900.00
Five (5)	$ 19,250.00	$ 38,500.00
Six (6)	$ 22,050.00	$ 44,100.00
Seven (7)	$ 24,850.00	$ 49,700.00
Eight (8)	$ 27,650.00*	$ 55,300.00
For families with more than eight (8) persons, add $2,800 for each additional family member.		

PMC.2012.00000350

PET-EX017B.0055

RECORD 004733

Table XVI:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1999.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,240.00	$ 16,480.00
Two (2)	$ 11,250.00	$ 22,120.00
Three (3)	$ 13,880.00	$ 27,760.00
Four (4)	$ 16,700.00	$ 33,400.00
Five (5)	$ 19,520.00	$ 39,040.00
Six (6)	$ 22,340.00	$ 44,680.00
Seven (7)	$ 25,160.00	$ 50,320.00
Eight (8)	$ 27,980.00*	$ 55,960.00
For families with more than eight (8) persons, add $2,820 for each additional family member.		

Table XVII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2000.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,350.00	$ 16,700.00
Two (2)	$ 11,250.00	$ 22,500.00
Three (3)	$ 14,150.00	$ 28,300.00
Four (4)	$ 17,050.00	$ 34,100.00
Five (5)	$ 19,950.00	$ 39,900.00
Six (6)	$ 22,850.00	$ 45,700.00
Seven (7)	$ 25,750.00	$ 51,500.00
Eight (8)	$ 28,650.00*	$ 57,300.00
For families with more than eight (8) persons, add $2,900 for each additional family member.		

PMC.2012.00000351

PET-EX017B.0056

RECORD 004734

Table XIII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2001.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,590.00	$ 17,180.00
Two (2)	$ 11,610.00	$ 23,220.00
Three (3)	$ 14,360.00	$ 29,260.00
Four (4)	$ 17,650.00	$ 35,300.00
Five (5)	$ 20,670.00	$ 41,340.00
Six (6)	$ 23,690.00	$ 47,380.00
Seven (7)	$ 26,710.00	$ 53,420.00
Eight (8)	$ 29,730.00*	$ 59,460.00
For families with more than eight (8) persons, add $3,020 for each additional family member.		

Table XIX:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2002.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,860.00	$ 17,720.00
Two (2)	$ 11,940.00	$ 23,880.00
Three (3)	$ 15,020.00	$ 30,040.00
Four (4)	$ 18,100.00	$ 36,200.00
Five (5)	$ 21,180.00	$ 42,360.00
Six (6)	$ 24,250.00	$ 48,520.00
Seven (7)	$ 27,340.00	$ 54,680.00
Eight (8)	$ 30,420.00*	$ 60,840.00
For families with more than eight (8) persons, add $3,080 for each additional family member.		

Table XX

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2003.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 8,980.00	$ 17,960.00
2	$ 12,120.00	$ 24,240.00
3	$ 15,260.00	$ 30,520.00
4	$ 18,400.00	$ 36,800.00
5	$ 21,540.00	$ 43,080.00
6	$ 24,680.00	$ 49,360.00
7	$ 27,820.00	$ 55,640.00
8	$ 30,960.00	$ 61,920.00

For families with more than 8 persons, add $3,140 for each additional member.

Table XXI

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2004.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,310.00	$ 18,620.00
2	$ 12,490.00	$ 24,980.00
3	$ 15,670.00	$ 31,340.00
4	$ 18,850.00	$ 37,700.00
5	$ 22,030.00	$ 44,060.00
6	$ 25,210.00	$ 50,420.00
7	$ 28,390.00	$ 56,780.00
8	$ 31,570.00	$ 63,140.00

For families with more than 8 persons, add $3,180 for each additional member.

Table XXII

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2005.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,570.00	$ 19,140.00
2	$ 12,830.00	$ 25,660.00
3	$ 16,090.00	$ 32,180.00
4	$ 19,350.00	$ 38,700.00
5	$ 22,610.00	$ 45,220.00
6	$ 25,870.00	$ 51,740.00
7	$ 29,130.00	$ 58,260.00
8	$ 32,390.00	$ 64,780.00

For families with more than 8 persons, add $3,260 for each additional member.

Table XXIII

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2006.

Poverty Scale

Family Size	100% **Gross Annual Income**	200% **Gross Annual Income**
1	$ 9,800	$ 19,600
2	$ 13,200	$ 26,400
3	$ 16,600	$ 33,200
4	$ 20,000	$ 40,000
5	$ 23,400	$ 46,800
6	$ 26,800	$ 53,600
7	$ 30,200	$ 60,400
8	$ 33,600	$ 67,200

For families with more than 8 persons, add $2,600 for each additional member.

Table XXIV

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2007.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,210	$ 20,420
2	$ 13,690	$ 27,380
3	$ 17,170	$ 34,340
4	$ 20,650	$ 41,300
5	$ 24,130	$ 48,260
6	$ 27,610	$ 55,220
7	$ 31,090	$ 62,180
8	$ 34,570	$ 69,140

For families with more than 8 persons, add $3,480 for each additional member.

Table XXIV

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2008.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,400	$ 20,800
2	$ 14,000	$ 28,000
3	$ 17,600	$ 35,200
4	$ 21,200	$ 42,400
5	$ 24,800	$ 49,600
6	$ 28,400	$ 56,800
7	$ 32,000	$ 64,000
8	$ 35,600	$ 71,200

For families with more than 8 persons, add $3,600 for each additional member.

PMC.2012.00000355

PET-EX017B.0060

RECORD 004738

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2009.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,830	$ 21,660
2	$ 14,570	$ 29,140
3	$ 18,310	$ 36,620
4	$ 22,050	$ 44,100
5	$ 25,790	$ 51,580
6	$ 29,530	$ 59,060
7	$ 33,270	$ 66,540
8	$ 37,010	$ 74,020

For families with more than 8 persons, add $3,740 for each additional member.

PMC.2012.00000356

PET-EX017B.0061

RECORD 004739

Tenet Healthcare System

I have reviewed the attached 2011 Annual Report to York County Council and, to the best of my knowledge, believe it to be accurate in reporting on the operations of Piedmont Medical Center as required in the sixth addendum to the York County Contract dated August 1995.

_____

John Holland
Sr. Vice President Regional Operations

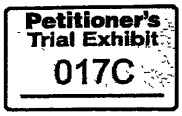


Table of contents

Description *page*

Vision Statement..... 3
Board of Governors..... 4
Advisory Board Members..... 5
Annual Financial Statement..... 6
Property Tax Schedule..... 7
Depreciation Report..... 8
Capital Investment..... 9
Equipment Purchases..... 10
Services to Medically Indigent..... 11
Resident Charity and Bad Debt..... 12
Services to York County Detention Center..... 13
Emergency Department Services..... 14
Physician Recruitment..... 15
Emergency Medical Services..... 16
Emergency Medical Services Response Time..... 17
Emergency Medical Services Accomplishments..... 18
Emergency Medical Services Equipment and Resource Allocation..... 19
Employee Information..... 20
Medicaid Cost/Charge Ratios..... 21
Pricing..... 22
Medpar Data..... 23
Licensed Beds..... 24
Scholarships, Education and Donations..... 25-28
Physician Satisfaction Survey Summary..... 29
Continuing Education Report..... 30-31
Medical Indigent Assistance Guidelines..... 32-64

PMC.2012.00000358
PET-EX017C.0002

RECORD 004741

Vision Statement

Piedmont Medical Center will be the leading resource for healthcare services in the upstate of South Carolina.

PMC.2012.00000359

PET-EX017C.0003

RECORD 004742

Board of Governors for 2011

Voting Members

Alex Espinal, MD– Chair
Charles F. Miller, CEO – Secretary
Bill Alexander
Chantay Bouler
Joseph Duschl [1] [2]
Alex Espinal, MD
John Hoitink, MD
Dr. Joe Robinson
Geri Rucker
Jay Shah, MD
Skip Tuttle[1] [3]
Karen Walto
James Welsh, MD

Non-Voting members

Mark Billman, MD – Chief of Staff
Irma Bendet – President, Volunteer Auxiliary
Claudia Douglass – Piedmont Senior Vice President, Operations and Chief Operating Officer
Mary Cline – Piedmont Vice President of Business Development
Don Currier – Piedmont Vice President, Human Resources
Mary Kaye Halterman – Piedmont Vice President – Patient Care Services and Chief Nursing Officer
Thujuana Lawton – Piedmont Hospital Compliance Officer
Richard Patterson, MD – Chief Medical Officer
Jay Pennisson – Piedmont Vice President, Finance and Chief Financial Officer

[1] Selected from York County nominees
[2] Resident - Western York County
[3] At-large member

PMC.2012.00000360
PET-EX017C.0004
RECORD 004743

Community Advisory Board Members for 2011

Amy Faulkenberry
Phyllis Fauntleroy
Arleen Fincher
Lyn Garris
Charlie Grobusky
Linda Honeycutt
Cotton Howell
Beverly Kelly
Shirley MacMillian
Kelly Macaluso
Michelle Mann
Pam Morrell
Barbara Robinson
Van Shields
Christopher Smith
Brown Simpson
Loyce Sutton
Judy Tuttle
David Williams
Dianne Woods
Dr. Joanne Zukowski
Debra Zupowski

PMC.2012.00000361
PET-EX017C.0005

RECORD 004744

Annual Financial Statement FY '11 - Ending May 31, 2011

Funds Available	**2011** (000s)
Piedmont Medical Center charges:	
For inpatient services	$365,997
For outpatient services	$226,982
Total revenue	**$592,979**
In Addition, the Medical Center Received,	
From Cafeteria Activity	-
From Other Non-Patient Activity	$2,098
Total Non-Patient Revenue	**$2,098**
Piedmont did not receive full payment for services:	
From Government and Third-Party Payors	$302,648
From Those Unwilling to Pay	$24,915
From Those Unable to Pay	$27,771
From Compact with Uninsured Total	$12,103
Revenue Not Received	**$367,437**
Total Funds Available	**$227,641**

FUNDS APPLIED

Piedmont Medical Center Applied Funds:	
To Pay Full- and Part-Time Employees	$67,982
To Provide Employee Benefits	$14,495
To Purchase Supplies, Utilities, Insurance and Other Expenses (1)	$97,564
To Pay Depreciation and Amortization	$11,523
To Pay Interest on Debt	$11,340
Total Expenses	**$202,904**
Pre-Tax Income	**$24,736**
Federal Inc Taxes	$5,343
State Inc Taxes	$763
State Franchise Taxes	$106
Property Taxes	$2,114
Business License Taxes	$174
Indigent Care Taxes	$7,077
Total Tax Expense	**$15,577**
After Tax Income	**$9,160**
Capital Expenditures	**$11,487**

(1) This amount includes corporate overhead.

Property Tax Payments Calendar Year 2010

School Operations	$939,361
School Debt Service	$289,362
City Operations	$504,127
County Operations	$251,011
County Debt Service	$47,577
Library	$24,062
Culture and Heritage	$15,312
York Tech College	$22,968
Unincorporated County Millage	$1,732
Special Fire District	$856
Total	**$2,096,368**

Depreciation Reported for Piedmont Medical Center

Medicare Cost Report (Ending April 30, 1996)	$2,957,674
Medicare Cost Report (Ending April 30, 1997)	$3,643,810
Medicare Cost Report (Ending May 31, 1998)	$4,326,446
Medicare Cost Report (Ending May 31, 1999)	$5,047,537
Medicare Cost Report (Ending May 31, 2000)	$5,040,228
Medicare Cost Report (Ending May 31, 2001)	$6,598,342
Medicare Cost Report (Ending May 31, 2002)	$7,343,714
Medicare Cost Report (Ending May 31, 2003)	$8,458,222
Medicare Cost Report (Ending May 31, 2004)	$7,940,379
Medicare Cost Report (Ending May 31, 2005)	$7,701,444
Medicare Cost Report (Ending May 31, 2006)	$7,307,246
Medicare Cost Report (Ending May 31, 2007)	$8,067,789
Medicare Cost Report (Ending May 31, 2008)	$8,788,613
Medicare Cost Report (Ending May 31, 2009)	$9,336,025
Medicare Cost Report (Ending May 31, 2010)	$9,693,184
Medicare Cost Report (Ending May 31, 2011)[1] [2]	$10,360,227

(1) Unaudited

(2) PMC book depreciation prior to corporate year-end adjustments. Excludes amortization (computer software and intangible).

Calculation of Required Minimum Capital Investment

AMI (Tenet Healthcare System) agrees that in the period beginning June 1, 1995, and ending May 31, 1998, it will make investments in land or depreciable or amortizable property located in York County, South Carolina, in an aggregate amount not less than $23,000,000.

Period ending	*Capital expended*
FY96 (June 1, 1995 - May 31, 1996)	$9,037,474
FY97 (June 1, 1996 - May 31, 1997)	$20,307,000
FY98 (June 1, 1997 - May 31, 1998)	$15,296,000
FY99 (June 1, 1998 - May 31, 1999)	$8,330,000
FY00 (June 1, 1999 - May 31, 2000)	$6,286,533
FY01 (June 1, 2000 - May 31, 2001)	$19,371,848
FY02 (June 1, 2001 - May 31, 2002)	$21,186,311
FY03 (June 1, 2002 - May 31, 2003)	$14,265,756
FY04 (June 1, 2003 - May 31, 2004)	$ 5,142,463
FY05 (June 1, 2004 - May 31, 2005)	$ 8,426,403
FY06 (June I, 2005 - May 31, 2006)	$12,573,989
FY07 (June I, 2006 - May 31, 2007)	$24,200,592 (A)(B)
FY08 (June 1, 2007 - May 31, 2008)	$15,527,362 (A)
FY09 (June 1, 2008 - May 31, 2009)	$11,780,658 (A)
FY09 (June 1, 2009 - May 31, 2010)	$6,782,329 (A)
FY09 (June 1, 2010 - May 31, 2011)	$11,487,256 (A) (C)
Total Capital Investment to Date	***$210,001,974***

Calculations for contract year ending May 31, 2011:

1) $4,000,000.00 or,
2) 108% of $9,272,607 (average of most recent three years' depreciation) = $10,014,416 but, no less than $1,500,000.
Therefore required minimum capital for 2011 = $10,014,416.

Average actual capital spent (contract year ending May 31, 2011 and preceding two years) =	$10,016,748
Required minimum average capital spent (contract year ending May 31, 2011 and preceding two years =	$10,014,416
Requirement Excess / (Shortfall)	$2,332

Notes:

A) Amounts include operating leases as of June 1, 2006 pursuant to the Ninth Contract Addendum entered into on June 5, 2006
B) Includes land purchase of $8,581,257
C) Includes $1,740,741 in major items that were ordered but not delivered by May 31, 2011 due to unique circumstances.
For example: 4 ambulances were ordered beginning in July, 2010 but not delivered by May 31, 2011 due to production delays caused by the supplier moving its manufacturing location to Florida. In another instance, a major fire alarm system implementation began in March, 2011 but required extensive testing and was not operational by May 31, 2011.

Descriptive List of Capital "Equipment" Purchased (June 1, 2010 to May 31, 2011):

Item		Capital Cost
34010755	MEDITECH PHASE II	$1,656,871
34010661	CATH LAB EQUIPMENT BOYOUT	$692,178
34010854	IMAGING RAD ROOM	$503,994
34011792	TOMOSYNTHESIS UNIT–MAMMOGRAPHY EQUIP	$453,921
34010839	UPS SYSTEM	$407,363
34010806	WT TELEMETRY	$301,459
Total:		***$4,015,786***

B. Cost basis greater than $100,000

Item		Capital Cost
34010866	CHEMICAL ANALYZERS – J&J C3600	$235,507
34010796	ALARIS PUMPS	$209,522
34010815	AMBULANCE	$203,092
34010855	TALYST AUTOPACK	$202,829
34011718	LABOR & DELIVERY BEDS	$171,185
34011753	WIN2K PC REFRESH	$168,713
34010801	NEXTGEN PROJECT	$168,269
34010876	ULTRASOUND MACHINE	$152,614
34010847	CEPHIED GENEXPERT FOR MRSA	$152,383
34011724	ED SYSTEM HARDWARE	$135,667
34010808	EXTERIOR SIGNS	$133,598
34010802	ELECTROSURGICAL UNITS	$119,712
34010860	JACKSON SPINAL TABLE	$118,789
34007924	MEDITECH UPGRADE	$113,800
34010728	TEE PLATFORM & PROBE	$111,901
Total:		$2,397,581

Note: *This schedule does not include equipment valued under $100,000.*

Services to the Medically Indigent (June 1, 2010 - May 31, 2011)

A. York County Write-offs

1. 24 Outpatient accounts	$434,665

B. MIAP and Other Non Statutory Charity Write-Offs

1. 939 Inpatient accounts	$20,866,824
2. 1,336 Outpatient accounts	$3,496,044
3. CFC Charity pass through	$ -
4. Additional Charity Reserves/(PY GL Accrual Reversal)	$2,973,493

A - B.	*Total Charity Care*	*$27,771,026*
C.	Other Uncompensated Care (Bad Debt Provision)	$24,914,730
D.	Compact with the Uninsured Discounts	$12,170,610

E. Indigent Care Taxes Paid

To State of SC	$6,561,566
To York County	$448,708
Total	*$7,010,274*

Calculation of required indigent services for June 1, 2010 - May 31, 2011:

$635,274 x (1.0367) = $679,323

Note: CPI increased 8.00 points or 3.670% (6/10, 217,695 and 5/1, 225.964) = 1.0367

PMC.2012.00000367

PET-EX017C.0011

RECORD 004750

Piedmont Medical Center

Schedule of York County Resident Charity and Bad Debts

A. Charity	
York County	$22,819,484
Other Counties or Unclassified	$4,951,543
All counties	$27,771,027
B. Bad debt *	
York County	$19,187,864
Other Counties or Unclassified	$5,726,866
All counties	*$24,914,730*

*Bad debt provision based on account assignments to collection agency.

Services, Assistance, and Supplies Provided to York County Detention Center

York County Detention Center Accounts

Patient Number	Total Charges	Expected Reimbursement
71026173	$ 392.00	$ 163.21
71219117	$ 213.00	$ 213.00
71361000	$ 392.00	$ 163.21
71388839	$ 231.00	$ 96.18
71393748	$ 392.00	$ 163.21
71680300	$ 413.00	$ 171.95
72331564	$ 414.00	$ 172.37
72423338	$ 4,271.56	$ 311.42
Total	***$ 6,718.56***	***$ 1,454.55***

Description of Emergency Department Services (June 1, 2010 - May 31, 2011)

Total Volume: 59,052
Acuity levels of patients treated in the Emergency Department (based on charge levels):

Level from least to most severe	Volume
0	1,980
I	1,427
II	3,352
III	24,396
IV	18,411
V	9,246
Critical Care	240

Physicians joining Piedmont's staff June 1, 2010 through May 31, 2011

New Practitioner	Status	Specialty
Christian Binder, MD	Consulting	Telemedicine
Aderonke Jegede, MD	Active	Internal Medicine
Felicia Baxter, MD	Active	Pediatrics
Brett Wagner, DO	Active	Emergency Medicine
Christine Holmstedt, DO	Consulting	Telemedicine
Paul Pietro, MD	Courtesy	GYN
Jeffrey Warden, MD	Active	Emergency Medicine
David Nix, MD	Active	Oncology
Ashish Thekdi, MD	Active	Gastroenterology
Mary LeBliss, MD	Active	Internal Medicine
Brian Mika, MD	Active	Psychiatry
Katrina Herring, MD	Courtesy	Family Practice
Jitendra Patel, MD	Active	Internal Medicine
Victoria Nguyen, DO	Consulting	Telemedicine
Christopher Hurt, MD	Consulting	Telemedicine
Longinus Agor, MD	Active	Internal Medicine
Jason Ratterree, MD	Active	Emergency Medicine
David Rentz, MD	Active	Emergency Medicine
Uchit Bhalodia, MD	Active	Internal Medicine
Leon "George" Alexander, MD	Active	Cardiothoracic Surgery
Sylvia Okoye, MD	Active	Internal Medicine
Richard Hughes, MD	Courtesy	Emergency Medicine
Michael Miller, DO	Active	Emergency Medicine
Shilpa Shah, MD	Active	Pediatrics
Rollin Fuller, MD	Active	Emergency Medicine
Charles Kilgore, MD	Active	Pediatrics
Richard Thoma, MD	Courtesy	Pain Management
David Savage, MD	Active	Cardiothoracic Surgery
Douglas Constant, MD	Courtesy	Pain Management
Nicole Estock, MD	Active	Pediatrics
Daniel Gordon, MD	Active	Internal Medicine
William Massey, MD	Courtesy	Cardiology
Jon-David Hoppenfeld, MD	Courtesy	Pain Management
Sander vanCleef, MD	Courtesy	Cardiology
Samuel Skarote, MD	Active	Critical Care

PMC.2012.00000371

PET-EX017C.0015

RECORD 004754

Emergency Medical Services

Objective: Promote educational opportunities for agencies providing Emergency Medical Services for York County.

- $ Maintain physician medical control for all agencies providing emergency medical services.
- $ Working to bring more educational opportunities for EMS providers to York County through York Technical College and Piedmont EMS.

Objective: Promote community health education and safety programs.

- $ Continue as lead agency of York County Safe Kids program.
- $ Continue to conduct child passenger safety checks at EMS headquarters on Heckle Boulevard. Explore additional locations to conduct child passenger safety checks.
- $ Conduct a study to evaluate the need for pre-hospital public education in our community. Develop and provide programs to meet those needs.

Objective: Enhance the level of pre-hospital care given in York County.

- $ Conduct research to identify best practice in pre-hospital care.
- $ Enhance protocols to provide best practice.
- $ Implement Automatic Vehicle Location System in conjunction with York County.

PMC.2012.00000372

PET-EX017C.0016

RECORD 004755

Emergency Medical Services (EMS) - Response Times (June 1, 2010-May 31, 2011)

Total EMS calls:	22,348
Total Emergency Dispatches:	16,802
Quick Response Unit	1,231

District	Total District Calls	Total Emergency Responses
Eastern York County	14,969	11,333
Clover/Lake Wylie	2,809	2,084
City of York	2,246	1,731
Western York County	2,124	1,654

District	Contract Response Provision (in minutes)	Average Response Times (in minutes)
Eastern York County	12	7 minutes 03 seconds
Clover/Lake Wylie	18	9 minutes 32 seconds
City of York	12	6 minutes 14 seconds
Western York County	20	10 minutes 23 seconds

York County Emergency Response Districts

Eastern York County (12 minutes)
Bethesda
City of Rock Hill
Flint Hill
Fort Mill
Lesslie
Newport
Oakdale
Riverview
Tega Cay

Western York County (20 minutes)
Bethany
Bullock
Hickory Grove
McConnells
Sharon
Smyrna
York Fire District (out of city)

City of York: 12 minutes

Clover/Lake Wylie & Bethel - Clover Fire District: 18 minutes

Projected population FY 2010	226,073	Next Trigger for New Equipment
Eastern York County	149,355	166,500
Western York County	76,718	82,500

Emergency Medical Services Accomplishments–(June 1, 2010-May 31, 2011)

- **Response Times:** Improved average response times in all contractual zones as outlined below.
  - Eastern Zone: 1 minute 26 second reduction in the average response times
  - Clover/Lake Wylie: 9 second reduction in average response times
  - City of York: 2 minute 39 second reduction in average response times
  - Western Zone: 1 minute 16 second reduction in average response times
- **Technology Enhancements**
  - Implemented new software to monitor and measure the following in real time and to provide the EMS management team with real-time alerts via smart phone technology for any performance exception or deficiencies:
    - All required response times
    - Hospital times when delivering patients to the local ED's
    - Average time for an ambulance to complete a call
    - Hourly demand for ambulance service
    - Responses to high profile locations such as:
      - Catawba Nuclear Station
      - Carowinds
      - Knights Stadium
      - Winthrop University and Winthrop athletics facilities
      - District 3 Stadium in Rock Hill
  - Implemented new software to perform advanced geospatial analysis of demand for ambulance services and to design dynamic ambulance deployment plans meant to reduce response times and to assure equitable levels of ambulance coverage throughout York County.
  - Implementing a new patient care reporting system that provides the following to the EMS department and the community:
    - Real-time access to pre-hospital data by the emergency department at Piedmont Medical Center. This allows for more accurate information for decision making for critical patients such as STEMI and Stroke patients.
    - Real-time access to critical clinical data with automated notification of management staff for any identified or potential clinical concerns or opportunities for improvement.
    - The ability to perform geospatial analysis of patient types and clinical condition types to look for trends in patient illness and injuries. This complements the ambulance positioning with regard to the placement of ambulances so that response times to the most critically ill or injured patients is minimized.
- **Process Improvements**
  - Educated the management staff on the fundamentals of six sigma quality improvement techniques and implemented root cause analysis of all ambulance responses that are outside of the department expected performance standards.
- **Community Involvement**
  - Continued as the lead agency in York County for the Safe Kids program and performed education in various schools along with bicycle helmet rodeos at community events such as Summerfest in York.
  - Continued to conduct child passenger seat safety checks.
- **Research**
  - Participating in two studies with the University of Pittsburg Center for Pre-hospital Medicine:
    - EMS safety culture

EMS provider fatigue Participating in a study designed by a graduate student at Winthrop University pertaining to EMS provider nutrition and healthy eating habits.

Emergency Medical Services Equipment/Resource Allocation

I. As required by the contract, all ambulances operate as Advanced Life Support units, 24 hours a day, 365 days a year.

II. As required by the contract, Piedmont Medical Center is required to operate ambulance stations in Eastern York County and three ambulance stations in Western York County as follows:

Eastern York County:
One unit on Heckle Boulevard
One 12-hour unit on Heckle Boulevard
One Quick Response Unit at Heckle Boulevard
One unit on Black Street
Four EMS units in Fort Mill area-Tega Cay, Baxter, northern area and downtown Fort Mill.
One unit at Exit 82/ Riverview Road
One 12-hour peek unit at Leslie Fire Department

Western York County:
One unit at Piedmont West station
One unit in Sharon at Sharon Fire Department
One unit at Clover station
One 24-hour unit at Newport Fire Department
One 24 ALS Quick Response Vehicle (QRV) at Piedmont West

Summary	Required Under Contract	Actual
Western York County:		
ALS Units	3	4
QRV	1	1
Eastern York County:		
ALS Units	5	8
QRV	1	1

Employee Information as of May 31, 2011

	Full Time	Part Time	PRN
Piedmont Medical Center	1,138	81	300
Carolina Surgical Center	19	7	10
Totals	*1,157*	*88*	*310*

Total Contracted Employees 302

PMC.2012.00000376

PET-EX017C.0020

RECORD 004759

Medicaid Cost/Charge Ratios:

Inpatient:	24.55%
Outpatient:	29.23%

PMC.2012.00000377
PET-EX017C.0021

RECORD 004760

Contract Reporting Year Ending May 31, 2010

"Pricing"

As of the filing of this annual report, Amisub of South Carolina, d/b/a Piedmont Medical Center, is in full compliance with all requirements of Section 3.1 (e) Pricing as amended and modified by the First, Second, Third, Fourth, Fifth, Sixth, Seventh and Eighth addenda to the agreement between York County, South Carolina and Amisub.

Attached is the MedPar report reflecting Medicare inpatient charge data for the federal year beginning October 1, 2009 and ending September 30, 2010.

MEDPAR DATA
Federal Fiscal Year October 1, 2009 Through September 30, 2010
Medicare Inpatient Data

Hospital Comparison using 2010 Medpar Data by Specialty

Specialty and Outlier	Piedmont Medical Center (Sheet1)	Piedmont Medical Center Specialty Outlier	Region Statewide Hospital Average	Mary Black Memorial Hospital (Sheet2)	Palmetto Health Baptist Columbia (Sheet3)	Palmetto Health Richland Hospital (Sheet4)	Piedmont Medical Center (Sheet5)	Prisma Health Greenville (Sheet6)	Prisma Health Greenville Memorial (Sheet7)	Spartanburg Regional Medical Center (Sheet8)	Spartanburg Regional Medical Center (Sheet9)
CARDIOVASCULAR MEDICINE	$20,208.05	$18,223.12	$14,295.74	$32,648.27	$36,595.05	$58,530.27	$21,909.95	$18,421.23	$19,439.91	$23,730.98	$29,053.98
CATHE	$54,700.54	$49,980.89	$51,471.78	$71,027.03	$61,382.02	$68,208.01	$49,381.92	$61,629.60	$54,499.64	$46,146.41	$59,474.66
CERATOLOGY	$16,847.21	$14,542.32	$13,537.26	$34,549.52	$46,855.49	$34,686.65	$18,473.54	$22,271.03	$17,385.21	$22,661.27	$32,289.52
ENDOCRINOLOGY MEDICINE	$15,081.42	$15,030.84	$11,685.02	$26,409.30	$26,653.79	$28,489.25	$20,421.41	$16,199.07	$12,955.69	$21,211.73	$25,575.39
GASTROINTEST SURGERY	$34,218.80	$35,467.14	$26,485.88	$0.00	$42,222.00	$92,778.00	$30,220.70	$30,597.65	$29,231.71	$41,114.60	$0.00
GI MEDICINE	$14,943.00	$15,344.67	$11,335.86	$27,193.08	$31,696.67	$26,836.68	$0.00	$14,882.43	$16,420.47	$21,068.61	$25,545.93
GI SURGERY	$41,511.65	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$24,633.58	$0.00	$46,767.25	$0.00
GASTROINTESTINAL MEDICINE	$24,091.98	$19,974.18	$16,360.92	$31,492.78	$38,988.74	$37,642.25	$18,977.80	$21,430.89	$19,248.80	$25,448.26	$37,025.96
GENERAL SURGERY	$16,614.50	$15,774.45	$11,502.65	$0.00	$24,657.80	$34,659.32	$15,809.43	$17,934.51	$13,894.53	$19,627.24	$23,479.71
GENERAL SURGERY	$84,951.91	$67,140.88	$40,327.06	$100,088.73	$95,166.67	$171,440.68	$61,362.91	$56,981.05	$73,817.40	$83,016.80	$101,363.28
GYNECOLOGY	$33,882.26	$0.00	$16,583.20	$29,089.20	$31,994.25	$55,016.63	$23,919.30	$23,910.93	$0.00	$28,310.91	$50,757.58
HEMATOLOGY	$21,236.50	$13,820.93	$17,946.97	$29,399.46	$30,845.99	$45,050.93	$14,914.90	$22,800.82	$15,233.66	$24,162.91	$37,530.35
INFECTIOUS DISEASE	$42,495.41	$30,495.57	$34,164.57	$0.00	$0.00	$98,092.71	$0.00	$20,657.81	$0.00	$0.00	$0.00
INTERNAL MEDICINE	$48,491.94	$37,485.80	$28,720.64	$34,029.31	$61,445.65	$94,908.19	$48,469.54	$40,212.55	$43,209.31	$43,941.47	$67,690.09
LAPAROSCOPIC	$37,621.04	$0.00	$16,820.94	$0.00	$0.00	$77,236.31	$19,811.92	$19,769.16	$14,428.95	$38,084.06	$0.00
NEPHROLOGY	$19,844.03	$21,136.85	$17,133.80	$37,689.40	$45,793.68	$51,760.60	$26,848.87	$23,224.61	$21,714.35	$27,106.97	$40,801.27
NEUROLOGICAL MEDICINE	$28,856.85	$20,999.48	$16,043.33	$32,303.87	$36,065.67	$40,815.45	$21,186.95	$23,249.34	$18,841.84	$28,191.69	$37,297.43
NEUROSURGERY	$58,856.72	$44,912.82	$33,654.19	$32,528.62	$77,589.23	$119,338.33	$24,080.69	$47,074.00	$43,824.78	$45,315.97	$0.00
OBSTETRICS - DELIVERED	$25,182.03	$0.00	$8,895.27	$0.00	$0.00	$33,349.29	$0.00	$0.00	$0.00	$14,027.07	$0.00
OBSTETRICS - NOT DELIVERED	$11,912.79	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
OPHTHALMOLOGY	$38,251.04	$20,699.48	$20,020.47	$42,629.44	$61,240.64	$62,164.68	$29,457.16	$33,982.96	$21,426.58	$35,664.30	$60,980.98
ORTHOPEDIC SURGERY	$47,260.11	$45,337.68	$33,820.03	$0.00	$71,607.15	$83,759.05	$29,249.77	$39,359.87	$0.00	$42,263.08	$0.00
OTHER ENT	$128,104.79	$97,307.83	$69,095.26	$0.00	$109,979.69	$227,072.24	$83,766.33	$112,921.60	$96,504.67	$136,869.30	$0.00
OPHTHALMOLOGY	$21,532.17	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$18,822.11	$0.00	$0.00	$0.00
ORTHOPEDIC MEDICINE	$21,243.55	$16,559.84	$12,375.57	$26,415.25	$33,300.83	$31,828.45	$14,441.05	$20,404.64	$13,249.46	$25,257.09	$29,630.04
ORTHOPEDIC SURGERY	$45,460.44	$47,503.99	$30,557.07	$58,268.86	$63,624.67	$65,060.84	$34,442.31	$30,209.83	$38,843.14	$41,537.36	$58,022.97
PLASTIC SURGERY	$46,769.85	$57,828.37	$25,278.90	$0.00	$73,734.59	$75,090.75	$55,875.11	$30,831.50	$37,899.80	$52,767.68	$60,153.00
PULMONARY DISEASE	$22,032.27	$16,949.34	$15,763.69	$31,443.50	$40,962.00	$42,544.21	$17,709.80	$22,461.21	$16,852.70	$29,030.71	$34,901.23
RADIATION	$22,276.92	$15,974.92	$12,249.78	$0.00	$36,129.76	$30,996.86	$20,988.29	$17,982.10	$16,184.05	$19,866.58	$25,424.83
PULMONARY MEDICINE	$26,268.01	$26,396.84	$16,697.28	$43,840.24	$51,828.98	$51,113.52	$29,596.68	$29,764.17	$28,385.26	$28,497.83	$51,699.64
SPINAL FUSION SURGERY	$69,977.17	$67,573.27	$41,581.14	$108,110.07	$107,483.90	$155,359.62	$50,334.75	$101,436.75	$51,922.32	$91,766.12	$0.00
SURGICAL ONCOLOGY	$21,369.35	$7,764.19	$16,032.11	$0.00	$0.00	$29,146.59	$19,051.82	$19,404.75	$0.00	$22,697.50	$0.00
THORACIC SURGERY	$67,623.79	$31,806.95	$44,718.82	$54,712.06	$105,791.59	$113,005.20	$94,978.80	$58,668.07	$51,959.28	$70,706.27	$70,978.97
TRANSPLANT	$184,276.85	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
UROLOGY MEDICINE	$22,601.99	$15,994.23	$13,845.58	$27,195.75	$34,078.48	$38,089.78	$18,313.47	$16,597.41	$12,836.05	$20,738.12	$38,599.29
UROLOGY SURGERY	$54,110.80	$36,365.80	$33,709.12	$38,778.91	$46,872.30	$73,529.28	$19,166.64	$33,586.11	$50,265.36	$43,265.30	$42,328.41
VASCULAR SURGERY	$58,230.05	$50,542.72	$38,450.99	$41,427.36	$80,760.60	$85,199.32	$55,172.30	$64,827.05	$54,611.69	$57,296.57	$93,820.92
Total Average	$44,199.74	$32,357.87	$22,195.86	$49,581.13	$58,770.87	$64,973.32	$21,603.91	$35,542.75	$39,887.15	$37,533.20	$43,625.18
Average LOS	5.86	5.01	4.02	5.13	7.18	7.20	5.27	6.01	5.45	5.50	4.64
Rank	4	9	11	3	2	1	10	8	6	7	5

Piedmont Medical Center Beds

Total licensed beds:	*288*
- Acute Medical/Surgical	268
- Psychiatric	20
- Special Care Nursery Bassinets	10

PMC.2012.00000380
PET-EX017C.0024

RECORD 004763

2010 Scholarships and Education

A. Scholarships

Paid June 1, 2010 – May 31, 2011

York Technical Community College - CAP Scholarships 1 Scholarship	$ 5,704
York Technical Community College York County Scholarship	$31,347
Winthrop University York County Scholarship	$31,347

B. Education support

1.	University of South Carolina – Nursing program support	$250,000
2.	York Technical College – Nursing program support	$ 1,705
3.	Additional education support	$238,332
Total education support		***$558,435***

C. Piedmont provides community education through the following events and publications:

1.	Healthy Hometown: Fort Mill & York events	$72,605
2.	HealthBreak media and other educational support	$182,595
Total community education		***$255,200***
Total education		***$813,635***

Piedmont Medical Center serves as a clinical practicum site for:

- Medical University of South Carolina
  - Nursing, Physician Assistant, Pharmacy
- Brookstone Academy
  - Pharmacy Techs
- University of South Carolina
  - Nursing, Pharmacy, Speech Pathology, Physical Therapy
- Winthrop University
  - Dietitian Training, Social Work, Program
- York Technical College
  - Nursing, Laboratory, Radiology, Operating Room Technician, Emergency Medical Training
- Kaplan University: Nursing
- University of Phoenix: Nursing
- Walden University: Nursing
- University of South Dakota: RN Refresher Program

PMC.2012.00000382

PET-EX017C.0026

RECORD 004765

Community Donations

1. Palmetto Volunteers in Medicine	$	70,000
2. City of Tega Cay	$	55,000
3. Baxter Community Associates Inc.	$	33,200
4. York County Council on Alcohol & Drug Abuse	$	30,000
5. Bell Sports Inc.	$	23,250
6. Chamber of Commerce/Rock Hill	$	11,800
7. Boy Scouts of America/Palmetto	$	8,000
8. Move Fort Mill Forward Inc.	$	7,500
9. Springs, Leroy Girls on the Run	$	7,500
10. Old Town Associates	$	6,500
11. Tega Cay Lions Club	$	5,000
12. City of Rock Hill	$	3,700
13. Nation Ford High School	$	3,500
14. SC Appleseed Legal	$	3,500
15. Culture & Heritage Foundation Inc.	$	2,900
16. Habitat for Humanity York County	$	2,500
17. Leukemia & Lymphoma Society	$	2,500
18. Fort Mill Rotary Foundation	$	2,500
19. Tega Cay Neighbors	$	2,500
20. Foundation for Fort Mill Schools	$	2,500
21. Young Life of York County	$	2,500
22. Girls on the Run	$	2,500
23. High Cotton Classic	$	2,500
24. Arts Council of Rock Hill	$	2,000
25. March of Dimes/SC	$	2,000
26. Westminster Catawba Christian	$	2,000
27. Leroy Springs Recreational	$	2,000
28. Civil Air Patrol/SC	$	2,000
29. Rock Hill School District #3	$	1,500
30. VIMM Fund World Missions, The	$	1,000
31. Fort Mill Lions Club	$	1,000
32. Family Connection of SC	$	1,000
33. Greater York	$	1,000
34. Good Folks of York County	$	1,000
35. Junior Welfare League	$	1,000
36. American Cancer Society	$	1,000
37. Junior Achievement of York County	$	1,000
38. Catawba Care Coalition Inc.	$	1,000
39. Hampton, Harry Memorial Wildlife Fund	$	1,000

40. Fort Mill High School Athletics	$	1,000
41. Early Learning Partnership, The	$	500
42. York County Adult Day Care Services	$	500
43. Chamber of Commerce/LakeWylie	$	500
44. Chamber of Commerce/Greater Clover	$	500
45. Mended Hearts Chapter 289	$	500
46. Nation Ford Land Trust	$	500
47. Society for Human Resources Management	$	300
48. Indian Land Rotary Club	$	250
49. Individuals Caring for the Elderly	$	150
50. Tender Hearts Girls Home Inc.	$	100
Total Community Donations	**$**	**317,650**
Total Sponsorships	**$**	**54,928**
Grand total education and donations		**$1,186,213**

Piedmont Medical Center Physician Satisfaction Survey

The last survey was conducted during third quarter 2010.

Overall hospital rating = 75.7 percent

PMC.2012.00000385
PET-EX017C.0029

RECORD 004768

Piedmont Medical Center
Continuing Education Report, FY 2010-2011

During the fiscal year 2010, Piedmont Medical Center's department of Education provided employees with many diverse opportunities to enhance their knowledge and increase skill levels. With a staff of two Educators, two Diabetes / Wound Care Educators, two Community Educators, one Patient Educator, and Education Liaisons in each department, the department provided multiple education opportunities to employees and the surrounding community.

A variety of learning formats were available for Piedmont employees, the healthcare community and the surrounding community at large. Opportunities included educational presentations, self learning modules (Written), videos, Voice activated manikin sessions, and computer assisted instruction. Additionally, the department uses Tenet's Education library and maintains a membership with Mid-Carolina Area Health Education Consortium.

Piedmont is an approved provider of Continuing Nursing Education by the South Carolina Nurses Association, an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. During the fiscal year 2010, the department provided 96 educational activities yielding 345 Continuing Education Contact Hours (CECH) to a total of 2,178 attendees. Programs included Basic Cardiac Rhythm Interpretation, 12 Lead EKG evaluation, Crisis Management, Nursing Research, Healthcare Statistics, Legal issues in Healthcare, Basic and Advanced IV therapy, Critical Thinking, Physical Assessment, Leadership development, Documentation, Mentoring, Electronic Medical Record systems and Bedside Medication reconciliation, Wound assessment, Diabetes management, Lactation training, Cardiac and Neurological assessment and monitoring, Psychiatric care and Maternal-child health related topics. Basic and Advanced levels of various programs were offered. Piedmont also provided continuing education contact hours for the South Carolina Trauma Symposium and the Perinatal division sponsored an annual Perinatal Nursing Conference, with 80 persons attending from across the Carolinas. A Nursing Summit was held in collaboration with York Technical College and University of South Carolina College of Nursing.

In addition to various educational offerings, the department also sponsors and supports the Research committee, Shared Governance program, the hospital Clinical Ladder program, and the Nursing awards promotion process sponsored by the South Carolina League of Nursing and Palmetto Gold with the South Carolina Nurses Foundation. Throughout the year , the department supported four national certification review programs: Certified Critical Care Nurse, Certified Medical Surgical Nurse, Certified Oncology Nurse and Certified Emergency Nurse. The department also sponsored two Certifications for Oncology in Chemotherapy and Biotherapy administration and management. Various program offerings were available for Registered Nurses, Licensed Practical Nurses, Nurse Technicians, Pharmacist, Imaging Technologist, Laboratory Technologist, Respiratory Care Providers, EMT's, Paramedics, Social Workers, and Physical Therapist. Many opportunities were available for Leadership and Management growth. International programs such as the Trauma Nursing Core Course, Advanced Fetal Monitoring, Crisis Prevention Intervention, and Crucial Conversations were offered throughout the year. A Director's retreat was conducted along with two team building exercises. Piedmont also updates and maintains an in-house medical library used by employees, physicians, and students from a variety of disciplines. Piedmont serves as a training facility for Nursing (BSN, ADN, LPN) , Laboratory Technology, Imaging Technology, Pharmacy, Speech Therapy, Paramedic, Emergency Medical Technician, Administrative and Surgical technology students. The department also collaborates with the University of South Dakota as a clinical site for RN Refresher students, with 2 successful completions during the 2010-2011 cycle. The Department sponsored leadership training in the Healthy Work Environment utilizing guidelines from the Association of Nurse Executives and the American Association of Critical Care Nurses.

PMC.2012.00000386

PET-EX017C.0030

RECORD 004769

Computer assisted instruction for all disciplines remained available through the Tenet Web network using .EDU, HealthStream, and Skillsoft. Available also on line is an NCLEX RN review course to assist newly graduated nurses in preparation for their licensing examination , On line Critical Care courses from the American Association of Critical Care Nursing, and Surgical Nursing programs from the Association of Operating Room Nurses. Nationally recognized continuing education credits were also provided through the Emergency Nurses Association, the Association of Women's Health, Obstetric and Neonatal Nurses (AWONH), and the Oncology Nurses Society.

The American Heart Association (AHA) recognizes Piedmont's Department of Education as a Community Training Center. Piedmont provides all available courses in Basic Life Support, Advanced Life Support, Pediatric Advanced Life Support, and Neonatal Resuscitation courses. During the fiscal year, the department provided training and verification to 1255 Piedmont Medical Center employees, Physicians, and others in the surrounding medical community and the residents. Piedmont also sponsored two mass CPR training session for the community, teaching 290 individuals. The department has started a community training program to provide Community CPR Training each month.

The Department assisted in the coordination and facilitation of the mandatory 2010-2011 Ethics and Compliance general training from Tenet and Hospital and Nursing Orientation to all new staff. The Department participated in Piedmont's community Healthy Hometown events in York and Fort Mill, providing Heart and Stroke awareness training , Hand Hygiene, and Blood sugar monitoring.

Medical Indigent Assistance Program Guidelines

Financial Eligibility Requirements

Introduction: This chapter states the criteria used to determine if the applicant's income and resources are within the MIAP limits.

301 *Determining Financial Eligibility*

In determining eligibility for the MIAP, the income and resources of the applicant's family must be considered and measured against the appropriate standards. Spouses are responsible for spouses and parents are responsible for minor children.

302 *Family*

The first step in determining the amount of income and resources available to the applicants is to establish the family composition. A family is defined as the applicant and dependents or legally responsible relatives who live in the same household.

Consideration must be given to the applicant's dependent status in determining the family composition.

A. If the applicant is legally or financially dependent upon someone else in the household, the family is composed of the following household members:

1. The applicant; and
2. The persons upon whom he is dependent (i.e., the responsible person); and
3. All persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the responsible person.

If the applicant is a minor child who lives in the home with a stepparent, the stepparent is considered a member of the family only if the stepparent claims the child as an income tax dependent.

If the applicant is an adult who is financially dependent upon someone else in the household, the applicant is considered a family member only if: the person upon whom he is dependent is a relative; and both parties agree that one is financially dependent upon the other; and one could be claimed by the other as a dependent for income tax purposes, whether or not a return is filed.

1. The applicant; and
2. The persons related to the applicant by birth, marriage, or adoption and who are legally or financially dependent upon the applicant.

If the applicant has stepchildren living in the home, the stepchildren are included as members of the family only if the stepparent claims them as income tax dependents.

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PET-EX017C.0032

RECORD 004771

Common Law Relationships. South Carolina law recognizes common-law marriages. A legally binding common law marriage is an agreement between two people to be married. Both of the individuals must be legally free to marry and they must hold themselves out to the community as a married couple. To document that a common law marriage exists, verification must be obtained that substantiates the fact that both individuals are legally free to marry. Statements are obtained from each partner indicating when the couple began living together as husband and wife and a collateral statement indicating the couple is known to the community as husband and wife. In South Carolina, common law marriages between minors are recognized when the male is at least 14 years old and the female is at least 12 years old.

Unmarried Individuals Living Together. Unmarried individuals who live together, who do not have common children and do not claim to have a common law relationship are not considered members of the same family. Ordinarily the income and resources of one would not be attributed to the other since they are not legally or financially responsible for each other. However, if both parties agree that their income is mutually available, half of the total gross annual income is attributed to the applicant.

Pregnant Women Cases. The family composition for a pregnant woman applicant is as follows:

- the pregnant woman;
- the unborn child(ren);
- the father of the unborn child (if he resides in the home); and
- persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the applicant

Family Members Recently Deceased. When a member of the applicant's family dies prior to the effective date of the application, the deceased individual is not considered a member of the family. Therefore, his income and resources are not considered in determining the applicant's eligibility unless such income and assets are available to the applicant and his family as of the effective date of the application.

When the applicant is deceased and death occurred within 30 days of the date of admission, his income is considered for only the thirteen weeks prior to the date of application and is not annualized.

When the applicant's family composition is questionable, prepare a summary of the family's circumstances and forward it to the Bureau of Eligibility and Oversight for a determination of family size.

302.1 *Minors or Students Absent from Home*

To determine the family composition for an applicant who is a minor or a student absent from his parent(s) home, consideration must be given to the student's financial dependence upon the parent(s). Examples of such minors are students or children who choose not to live with their parent(s). For the purposes of the MIAP, an applicant who is a minor child or a student who is

PMC.2012.00000389

PET-EX017C.0033

RECORD 004772

still financially dependent upon his parent(s) is considered a member of his parents(s)' household. If his parent(s) do not live in the same home, he is considered a family member in the home of the parent who holds legal custody.

A minor child is always considered a dependent of his parent(s) unless a court order exists which divests the parent(s) and the child of their rights, privileges and annuities, duties and obligations with respect to each other. If such a document exists, the child is not considered a member of the parent(s)'s family and the parent(s)' income and resources are not available to the minor child. A copy of the court order must be filed in the case record as documentation. For students over age eighteen (18), the parent(s) must be contacted to determine if the student is financially dependent upon them. If it is determined that the student is not financially dependent upon the parent(s), the student is not considered a member of their family and the parents income and resources are not available to the child.

303 ***Income Standards***

Only those persons whose gross family income is equal to or less than one hundred percent of the poverty guidelines may qualify for full payment through the MIAP. Only those persons whose gross family income is between one hundred and two hundred percent of the poverty guidelines, may qualify for partial payment through the MIAP.
(Refer to Table II through Table XXIV of this chapter for the Federal Poverty Guidelines.)

304 ***Computation of Income***

The gross annual income of the individual and his family is measured against the annual poverty guidelines for the appropriate size family. Gross annual income should be representative of the family's average earnings. For this reason, the method of calculating gross annual income will vary depending on the employment status of the family members. In all cases, the applicant must be carefully interviewed to determine his/her employment status. *(Refer to 306.2 for the treatment of income when a family member is self-employed.)*

304.1 ***Methods of Verification and Computation***

The following describes methods of verifying and computing gross annual income based on the manner in which the income is received.

1. **Fixed Income** is a set benefit or a set income for work performed. An example is someone receiving Social Security benefits or a teacher. If the income is a fixed monthly amount, the income received in the preceding or current month must be verified. The verified monthly income is multiplied by twelve (12) to determine gross annual income. If the income is a fixed amount received semi-monthly, bi-monthly,

etc., the income for the appropriate pay period must be verified and multiplied by the number of pay periods in a year.

2. **Hourly/Salaried with Bonuses, Commissions and Overtime** is income received regularly and is based on the number of hours worked or a salary, which is subject to additional earnings due to overtime, commissions or bonuses. Income received in this manner is usually variable. Therefore, it must be verified for the four (4) weeks prior to the effective date of the application.

   If income verification is available for the entire four (4) week period, the income received is multiplied by thirteen (13) to determine gross annual income. If income verification is available for a longer period of time, the income received should be converted to an average weekly income and multiplied by fifty-two (52).

   If the applicant does not have four (4) weeks of income (earned or unearned), verify the total amount of income received in the four (4) week period and multiply by thirteen (13) to determine the gross annual income.

3. **Irregular Income** is income which varies from week to week or month to month. An example is people who work odds jobs. The method for verifying and computing income is the same as stated in number 2 above.

4. **Self-Employment Income** is income derived from an individuals' own business. Examples are farmers, beauticians, "shade tree" mechanics, loggers, etc.

   In this situation, determine gross annual income based on income received in the four (4) weeks prior to the effective date of application, multiplied by thirteen (13). If the person does not report income on a weekly or bi-weekly basis, determine gross annual income based on the prior year's income tax return. Deductions are allowed for self-employment income for the cost of doing business. Refer to Chapter 3 Section 306.2 for a list of allowed deductions.

For self-employed individuals who do not file income tax returns or maintain employment records, a signed affidavit regarding their earnings should be obtained.

Example A. The applicant has worked odd jobs all his life, but those jobs have been routinely performed for the same individuals who know the applicant and who are known by the applicant. In this situation, the applicant should be asked to sign release of information forms. These forms give you, as the designee, permission to obtain necessary documentation.

The applicant should be able to provide you with the names and addressed of individuals for who he has worked. With the release of information form, the

employers can then be asked to furnish a statement regarding the frequency of employment, such as one (1) day per week and the amount paid.

Example B. The applicant has worked odd jobs all his life but those jobs have been a matter of "pick-up" work here and there. The applicant does not know the names of the individuals for whom he worked.

In this type of situation, the applicant's statement of gross annual earnings can be accepted. The case record should contain dictation regarding the applicant's statement and the reason it was accepted.

5. **Seasonal Income** is income, which is generally received only part of the year. If an individual or family has no other sources of income, the amount received during the most recent "season" must be verified and considered to be annual income. If an individual has other income, the amount received during the "season" is combined with the other income to determine gross annual income.

   Most recent season is defined as a season that occurred in the twelve (12) months prior to the effective date of the application.

   It should be noted for migrants work all during the year. Therefore, their income should be determined based on the method stated in number 2 of this section.

   Note: *If the earnings of the applicant and his/her family do not conform to the aforementioned description, contact the Bureau of Eligibility Policy and Oversight for assistance.*

   For non-emergency applications, income is verified based on the income received prior to the effective date of the application. For emergency admissions and retroactive applications, income is verified based on income received prior to the date of admission rather than the effective date of the application.

305 *Unearned Income – Definitions and Types*

Unearned income is any income, which does not meet the definition of earned income. The following payments are considered unearned income (this list is not all inclusive):

1. Unemployment Compensation and Workmen's Compensation
2. Assistance Payments Based on Need – Family Independence (FI), SSI, and other cash payments
3. Pensions and Benefits – Annuities, pensions, retirement, veteran's or disability benefits, Social Security benefits, and other such pensions and benefits

4. Strike benefits

5. Support and Alimony – Support or alimony payments from non-household members

6. Contributions – Any cash contribution made to any member of the family by a non-family member (gift or loan)

7. Interest Payments – Payments from government-sponsored programs, dividends, interest, royalties and all other money payments from any source considered a gain or benefit

8. Trust Funds – When a family member receives monies from trust funds, the monies are treated as unearned income

9. Savings, Mortgages, Annuities, Insurance, and Other Investments – Dividends and interest from investments, such as stocks, bonds and savings, and payments of interest on mortgaged, annuities, insurance, etc. are unearned income. A payment of principal on a mortgage or loan may or may not be unearned income depending on whether or not the applicant loaned the money.

10. Lump Sum Payments – Any lump sum payment is considered unearned income in the month received an becomes a resource if retained to the following month. **EXCEPTION:** Federal and state income tax refunds are excluded from income.

11. Educational Loans, Grants and Scholarships – Any portion of loans, grants, and scholarships which may be used to meet the person's current living expenses (food, clothing or shelter) is counted as income. Any portion, which is clearly designated for tuition, is excluded from income.

12. Capital Gains Income – Any gain received from the sale of an asset is counted as income.

306 ***Earned Income-Definition and Types***

Earned income includes all income in cash earned by an individual through the receipt of wages, salary, commissions, or profit from activities in which he/she is engaged as a self-employed individual or as an employee. This earned income may be derived from his/her own employment, such as a business enterprise or farming, or derived from wages or salary received as an employee.

306.1 ***Earned Income Credit (EIC)***

The EIC is a provision of the Federal tax laws that allows the earnings of many individuals and couples to be supplemented either in advance or in a lump sum. This supplement (Earned Income Credit) is counted as earned income.

306.2 ***Income of Self-Employment***

Self-employment income is allowed deductions for the cost of doing business. The applicant must provide a record of expenses incurred in the production of the income. Examples of self-employment are beauticians, makeup sales, etc. Allowable costs for producing self-employment income are:

1. Identifiable costs of labor, such as salaries, employer share of Social Security, insurance, etc.
2. Stock, raw materials, seed and fertilizer, feed for livestock used in producing income
3. Rent and costs of maintenance for the business building
4. Business telephone costs
5. Costs of operating a motor vehicle when required in connection with the operation of the business
6. Insurance premiums and taxes paid on the business
7. Costs of feed for work stock
8. Costs of meals for children when day care is provided in the applicant's home
9. Interest paid to purchase income-producing property

The following items are not considered as a cost of producing self-employment income:

1. Payments on the principle of the purchase price of income producing real estate and capital assets, equipment, machinery and other durable goods;
2. Net losses from previous providers;
3. Federal, state and local income taxes, money set aside for retirement purposes, and other work related expenses are accounted for by the earned income deduction.
4. Costs of producing home produce intended for family consumption;
5. Family living expenses
6. Personal debts
7. Entertainment expenses
8. Depreciation expense

After the self-employment income is given the cost of doing business deduction, it is added to any other earned income.

306.3 ***Boarder or Lodger Income***

The worker must verify and document the income received from the boarder or lodger and then exclude the verified actual costs incurred in providing room and/or board. Examples of costs incurred are the additional utilities, cost of food provided, laundry expenses, etc.

If the applicant is unable to provide records that substantiate the costs of providing lodging and/or board, a standard deduction of $60 monthly may be given for lodging and board and a standard $20 monthly may be given for lodging only. Any income received in excess of the standard amounts is added to other earned income prior to granting the standard earned income disregards.

After this exclusion, the remaining income is considered earned income and is added to other earned income.

307 ***Income Verification***

All income must be verified and the method, amount and date of verification must be documented. The following documents that can be used to verify earned income:

1. Pay stubs
2. Employee's W-2 Forms
3. Wage tax receipts
4. Federal income tax return
5. Self-employment bookkeeping records
6. Sales and expenditures records
7. Employer's wage records
8. Statements from employer
9. Employment Security Office.

The following are documents that can be used to verify other types of income:

1. Social Security award letter (changes in benefits will not always be reflected)
2. Benefit payment check
3. Unemployment Compensation award letter;
4. Pensions award notice;
5. Veterans Administration award notice;
6. Correspondence on benefits;
7. Income tax records;
8. Railroad award letter;
9. Support and alimony papers evidenced by court order, divorce or separation papers, contribution check;
10. Social Security Administration records and letters;
11. Employment Security Commission;
12. Union records;

13. Workmen's Compensation records;
14. Veterans Administration records and letters;
15. Insurance company records;
16. Tax records;
17. Railroad Retirement Board records; and
18. Department of Social Services Letter of Notification

Note: *If the applicant claims to have no income, you may accept his/her statement; however, he should be carefully interviewed to determine how he obtains food, clothing, and shelter given such circumstances. This information should be included in the case record dictation. If you question the accuracy of his statement, you may request that the applicant go to the Employment Security Commission to obtain the most recent quarterly wage information.*

308 ***Resource Standards***

Total countable resources must be within the limits described below:

1. **Home property.** The value of a farm of 50 acres or less on which the applicant or his family resides and has resided for at least twenty-five (25) years is excluded from the resources computation. The equity value of home property other than a family farm cannot exceed $35,000.

2. **Non-home real property and taxable personal property.** The applicant's or family's total equity interest in non-home real property and taxable personal property such as motor vehicles may not exceed $6,000. Real property used in a business enterprise is included in the resource determination. Work-related equipment being used in a business enterprise is excluded from the resource determinations.

3. **Household effects.** Household effects such as furniture, kitchen utensils, etc., are not considered in the resource computation.

4. **Liquid assets.** The applicant or family's total liquid assets may not exceed $500.

   For non-emergency admissions, the value of liquid assets must be determined as of the effective date of the application. For emergency admissions and retroactive determination, the value of liquid assets must be determined as of the date the applicant entered the hospital

   If an applicant claims that he/she and his/her family members do not own any liquid assets, you may accept his statement. The case record should contain a notation that the applicant's statement was accepted.

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RECORD 004779

1) If the total value of all liquid assets owned by the applicant and his/her family members does not exceed the limit, the liquid asset test is met.

2) An applicant with excess liquid assets may establish eligibility if he/she and/or other members of his/her family spend the excess amount over $500 toward payment of valid debts.

For the purpose of meeting this spend-down requirement, valid debts are defined as:

Rent or Mortgage Payment - The actual amount of rent or mortgage on the primary residence not to exceed maximum allowable deductions of $500 per month, per household.

Utilities - The actual amount for utility bills (i.e., electric, gas, oil, kerosene, wood, etc.) not to exceed a maximum allowable deduction of $150 per month, per household.

Medical Expenses - The actual amount paid for the cost of medical care, i.e., doctor bills, hospital charges, durable medical equipment, prescription drugs, etc. for each family members which were incurred within thirty (30) days prior to the effective date of application or for the applicant, during the period of hospitalization for which assistance is requested.

The applicant must be advised that he/she must spend-down his excess liquid assets **before** he can qualify for assistance through the fund. The applicant should be advised that the spend-down of excess liquid assets must occur after the effective date of application in order for the expense to be deducted from excess resources and that spend-down may be accomplished in the following way:

The applicant must present paid receipts that verify that the excess amount was used toward the payment of these valid debts which were incurred within thirty (30) days prior to the effective date of application or during the period of hospitalization for which assistance is requested. Spend-down must be accomplished within thirty (30) days of the effective date of the application.

For retroactive applications, the spend-down must be accomplished within thirty (30) days of the date of verification that the value of liquid assets exceeded the limit, if the applicant still owns the excess liquid assets. If the applicant no longer owns the excess liquid assets, the excess amount must have been spent on valid debts in accordance with the above stated procedure.

309 *Non-Liquid Resources*

The equity interest of non-liquid resources must be considered in the resources computation. Equity interest is the value of the applicant's and/or his family's ownership interest in the

resources less any legal indebtedness. To determine a person's equity interest in a non-liquid resource, the following factors must be considered:

1. **Ownership Interest.** The value of a person's ownership interest in property must be considered. A person may have sole ownership. In this case, the equity value in the entire piece of property must be considered a resource and measured against the appropriate standard.

   If the person, jointly owns property with one or more other persons, only the equity value of the applicant's and/or his family's interest in the property is considered a resource and measured against the appropriate standards.

   In addition to joint or sole ownership of property, a person may own the right to use real property. These rights might be in the form of:

   - $ *Timber Rights* - Timber rights permit an individual to cut and remove free standing trees from property owned by another as designated by contract with the person holding title to the land on which the timber stands. In this case, the value of the timber rights would be considered and measured against the appropriate standards.
   - $ *Mineral Rights* - A mineral right is an ownership interest in certain natural resources such as coal, sulfur, petroleum, sand natural gas, etc. which are usually obtained from the ground. Only the value of the mineral right is considered a resource.
   - $ *Remainder Interest/Life Estate* - A person may also hold a life estate or remainder interest in property. A life estate conveys upon an individual or individuals for his lifetime, certain rights in property. Its duration is measured by the lifetime of the tenant or of another person, or by the occurrence of some specific events, such as remarriage of the tenant. The owner of a life estate has the right of possession, the right to use the property, the right to obtain profits from the property and the right to sell his life estate interest. (However, the contract establishing the life estate may restrain one or more rights of the individual.) He does not have title to the property and he does not have the right to sell the property. He may not usually pass it on to his heirs in the form of an inheritance. See Table 1 in this chapter for the chart used to determine the value of a person's life estate interest in property.

     Where an individual owner conveys property to another person for life (life estate holder) and to a second person (the remainder man) upon the death of the life estate holder, both a life estate interest and a remainder interest have been created in the property. Upon the death of the life estate holder, the remainder man will hold full title in fee simple. An owner of real property may designate several individuals as remainder men who would hold ownership jointly or in common by will or agreement.

Example: *Mr. Heath, who is now deceased, conveyed a life estate to his wife in home property that he owned in fee simple both before and after his marriage to Mrs. Heath. Mrs. Heath has the right to live there for the rest of her life. On her death, the property will pass to her two sons who own a remainder interest in the property. The will designated that the sons will then own the property as joint tenants. The property is not considered a resource to the remainder man until the property is actually passed on to him.*

$ Unprobated Estates (Heir Property) - If an individual who owns property dies without making a will, and the estate has not been settled and the property is divided among heirs, the property is called intestate property. If an applicant is an heir, the value of such property must be developed. An heir would not be able to sell the property itself, but he would be able to sell his interest legally without court action and without permission of the other heirs.

The South Carolina Law concerning Descent and Distribution was changed by Act 539 of 1986. The new law is entitled Intestate Succession and Wills and is found at Section 62-2-101, et sec, S.C. Code of Laws, 1976, as amended. The law provides that the estate of an individual who dies intestate will be divided as follows:

$ If the deceased has no children, the widow (er) inherits the entire estate.
$ Regardless of the number of children surviving the deceased, the widow(er) inherits ½ of the estate and the remaining ½ is divided equally among the children of the deceased.
$ If any of the children of the deceased are not living, but at least one child survives the deceased, the ½ of the estate, which is inherited by the children, is still divided as though all children survived the parent. The portion to which the child who dies before his parent was entitled, will then be divided amongst his/her heirs according to law.
$ If there is no widow (er), the estate would then be divided equally among the children.
$ If the deceased were a joint owner of any real property, that portion to which he/she is entitled by law would become a part of his estate and would be divided according to the provisions of the law.

Note: *Any situation, which is not covered in this section, should be referred to the Bureau of Eligibility Administration*

Evidence of ownership of property can be obtained by checking the deed, the will or property and tax records in the county Courthouse. A deed does not have to be recorded to be valid. Tax records can be used only as a guide to other resources of documentation, as the person(s) listed on the tax records is not necessarily the true owner. Adverse possession, which occurs when someone lives on a parcel of land, pays the taxes, and then claims ownership

to the property, is not considered legal ownership unless legal title has been conferred by court order.

2. **Tax Assessed Value** - The tax-assessed value of the resource is the current market value established by the County Tax Assessor. In addition, the current market value of a motor vehicle may be established by using either the NADA book value or the current market value established by the County Tax Assessor. When using the NADA

book to verify value, use only the current month's book and the listed "Trade-In" value. If the applicant wishes to rebut the current market value as established by the tax assessor's office or the NADA book, the following action is required:

Taxable Personal Property - The applicant may obtain an appraisal from a reputable dealer to establish a different value. If the county designee questions the reliability of the appraisal, he may require a second appraisal for another dealer.

Real Property - Rebuttal must be accomplished through an appeal to the assessor's office in the county where the property is located. A copy of the assessor's determination of value must be furnished to the designee. The value established by the assessor must be used.

3. **Legal Indebtedness** - Legal indebtedness is any legal encumbrance such as a note, mortgage or lien, which has been filed against the resource. It is the applicant's responsibility to provide verification of the current amount of the indebtedness. If the applicant fails to furnish verification of indebtedness, the tax-assessed value of the resource should be used in determining equity interest.

Examples of non-liquid resources are:

1) Real property;
2) Personal property, such as boats, vehicles, farm equipment and livestock. Personal property should not be confused with personal effects such as appliances, furniture, clothes and other similarly essential items of limited value that are necessary for day to day living, since personal effects are not counted.
3) Buildings

309.1 ***Real Property***

Real property is treated in the following manner:

1. *Home Property* - Home property is the applicant's principal place of residence. The home is defined as the home and all contiguous property. This includes all buildings on the contiguous property such as sheds, barns, garages, warehouses, or other houses. If the surrounding property is separated from the home by public rights of way, such as roads, the surrounding property is still considered

contiguous to the home. However, if the surrounding property is separated from the home by intervening property owned by others, the surrounding land is not considered contiguous to the home. A mobile home is considered as home property if it is the applicant's principal place of residence. Equity interest in home property, which does not meet the family farm exclusion, must be applied toward the $35,000.00 home resources limitation.

2. *Non-home Property* - Non-home property is any property that is owned by the applicant and/or his family which is not contiguous to the home. The applicant's and/or his family's equity interest in non-home property must be applied toward the $6,000.00 resource limitation.

309.2 ***Taxable Personal Property***

The value of the applicant's and/or his family's interest in taxable personal property must be applied toward the $6,000.00 resource limitation.

309.3 ***Buildings***

In some instances, an applicant or his family may have an ownership interest in a building but not the land on which the building is located. In such cases, the value of the interest in the building must be applied toward the $6,000 resources limitation.

310 ***Liquid Resources***

The value of the applicant's and/or his family's liquid resources must be applied toward the liquid asset resource limitation as found in Section 308.4. Examples of liquid resources are:

1. Cash on hand;
2. Checking or savings accounts in banks or other savings institutions, including credit unions;
3. Savings certificates;
4. The market value of stocks or bonds;
5. Trust accounts except when inaccessible;
6. Funds held in individual retirement accounts (IRA's). The entire cash value of the account, less the amount of any penalty for early withdrawal, is counted;
7. Pension funds that are available;
8. Federal and State Income Tax refunds;
9. Pre-need burial contracts; and
10. Cash value of life insurance. Count cash value only for each family member who has life insurance with a total face value(s) greater than $10,000.00. A separate determination must be made for each family member. For each family member who owns life insurance, determine the total face value owned by the individual. (The owner is the insured unless otherwise stipulated in the policy.) If the total

face value of all policies owned by the family member does not exceed $10,000.00, exclude the cash value of the family member's policies. If the total face value of all policies owned by the family member exceeds $10,000.00, exclude the first $1,500.00 of cash value and count the amount above $1,500.00 as liquid asset.

Note: *Term insurance does not have a cash value.*

310.1 ***Jointly Owned Liquid Resources***

When accounts (e.g. savings or checking, stocks or bonds, etc.) are owned jointly and the applicant and/or his family have access to the entire amount in the account, the entire amount is counted toward the resource limit.

To determine whether the person has access to the entire amount, the worker will need to determine if both signatures are needed for access to the resources or if only one signature is needed. One signature means the entire amount is accessible. When both signatures are needed, only a pro-rata s hare of the account is applied to the resource limit.

310.2 ***Trusts***

If an applicant and/or a member of his/her family is the beneficiary of a trust and he/she has unrestricted access to the principal of the trust, the value of the principal is counted as a resource. The value of the trust principal is measured against the liquid asset resource limitation.

If the beneficiary of the trust does not have access to the trust and the trustee either does not have the authority or refuses to make the trust principal available to the beneficiary, the trust principal is not counted as a resource. If the applicant or family member does not have access to the trust principal, only the income and/or other benefits from the trust is counted.

310.3 ***Burial Plots***

A burial plot is defined as a conventional gravesite, crypt, mausoleum, urn or other repository, which is customarily and traditionally used for the remains of a deceased person. Burial plots owned by the applicant and/or his family are excluded from resources.

311 ***Household Effects***

Clothing, household goods, personal effects and furnishings used for day-to-day living are excluded.

312 ***Resources Verification***

All resources must be verified and the method, amount and date of verification must be documented. The following are documents that can be used to verify resources:

1. Bank statements
2. Tax assessor records
3. Real estate forms
4. Insurance policies
5. Insurance agencies
6. Statement from other owner when there is joint ownership
7. Current official correspondence received by the applicant
8. Court Records - Deeds, Titles, etc.
9. Current NADA Book.

Note: *If the applicant states that he/she and/or his/her family do not own real property or taxable personal property, the courthouse records must be searched to verify his/her statement. Courthouse records do not have to be searched in the name of minor children unless there is an indication that they own real and personal property. For reapplications which are filed within six (6) months of an MIAF eligible hospital stay, it is not necessary to re-verify (i.e., search of courthouse records) the ownership and value of real and personal property unless the applicant indicates that their circumstances have changed.*

313 ***Transfer of Resources***

An applicant and/or his/her family who transferred resources without receiving full compensation within three (3) months prior to the period of hospitalization for which the application for assistance is made, may not be eligible. The application must be denied if the uncompensated value in combination with other resources exceeds the appropriate resource limitation.

Although transfer of a resource without receipt of full compensation may result in ineligibility for MIAP for up to twelve (12) months, the person may establish eligibility if it is determined that he/she later receives full market value for the transferred resource. The person may establish that full compensation was received provided the resource is returned or the applicant receives fair market value for the transferred resource, and the proceeds are used for living and/or medical expenses of the applicant to the point that the resource is reduced to within the appropriate resource limitation.

The transfer resources policy applies to:

1. Transfers made by an applicant and/or his family, or on their behalf by a person acting for and legally authorized to execute a contract for the applicant and/or his family (such as legal representative, parent of minor child, holder of power or attorney, etc.);

2. Transfers of liquid and non-liquid resources (cash, bank accounts, etc. by giving to another individual, creation of irrevocable trusts, petitioning courts to set aside funds for a specific purpose, etc.);

3. Waiver or suspension of benefits to which the individual is legally entitled, e.g. inheritance, insurance settlement and proceeds of a loan.

The transfer of resources policy does not apply to:

1. Actions take by persons not listed in #1 above (for example, policy does not apply to withdrawal of funds by another person from a bank account jointly held with the eligible applicant unless the other person is the spouse or parent of the applicant);

2. A resource that is spent or used to repay a valid debt;

3. Valid loans made by an eligible individual or eligible spouse.

314 ***Treatment of Cash Received to Replace/Repair Lost, Damaged or Stolen Resources***

Cash received from any source (e.g. insurance companies, Federal or State agencies, public or private organizations, other individuals) for the purpose of replacing or repairing a resource which is lost, damaged or stolen is not income but a resource that has changed form.

When it is determined that cash will be or is received for the purpose of replacing or repairing a resource, the total amount of such cash is excluded from the income computation for a period of six (6) months from the month of receipt. However, it is not excluded from resources it is counted as the resource it replaces would have been counted.

Cash which is received for personal injury, death or other purposes is not excluded from income or resources under this provision, even if the cash is received in conjunction with an/or from the same source as cash intended to replace or repair a resource.

315 FAMILY COMPOSITION CHART

RELATIONSHIP TO THE APPLICANT	WHERE LIVING	INCLUDED AS FAMILY MEMBER	VERIFICATION
Spouse (Includes common law)	In the home.	Yes	Applicant's Statement
Spouse	Separated and living out of the home for 30 days from effective date of the application.	No	Collateral statement from two (2) non-related family members. Example: Landlord or Neighbor
Minor Child	In the home.	Yes	Applicant's Statement
Minor Child (Applicant)	Out of the home.	Yes, unless all parental rights are terminated by court order.	Parental statement, if yes. Court order, if no.
Child over 18 years of age.	In the home or attending school.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes.
Other Relatives	In the home.	Yes, if both parties agree that one is financially dependent on the other.	Written statement from both parties and case notes which verify that one could claim the other as a dependent for income tax purposes
Non-Relatives	In the home.	No, refer to Page 3 of this chapter for treatment.	Applicant's statement
Unmarried couple with common child	In the home.	Yes	Applicant's statement or birth record.

PMC.2012.00000405

PET-EX017C.0049

RECORD 004788

Table I UNISEX LIFE ESTATE OR REMAINDER TABLE

AGE	LIFE ESTATE	REMAINDER
0	.97188	.02812
1	.98988	.01012
2	.99017	.00983
3	.99008	.00992
4	.98981	.01019
5	.98938	.01062
6	.98884	.01116
7	.98822	.01178
8	.98748	.01252
9	.98663	.01337
10	.98565	.01435
11	.98453	.01547
12	.98329	.01671
13	.98198	.01802
14	.98066	.01934
15	.97937	.02063
16	.97815	.02185
17	.97700	.02300
18	.97590	.02410
19	.97480	.0252
20	.97365	.02635
21	.97245	.02755
22	.97120	.02880
23	.96986	.03014
24	.96841	.03159
25	.96678	.03322
26	.96495	.03505
27	.96290	.03710
28	.96062	.03938
29	.95813	.04187
30	95543	04457
33	.95254	.04746
32	.94942	.05058
33	.94608	.05392
34	.94250	.05750

AGE	LIFE ESTATE	REMAINDER
35	.93868	.06132
36	.93460	.06540
37	.93026	.06974
38	.92567	.07433
39	.92083	.07917
40	..91571	..08429
41	.91030	.08970
42	.90457	.09543
43	.89855	.10145
44	.89221	.10779
45	.88558	..11442
46	.87863	.12137
47	.87137	.12863
48	.86374	.13626
49	.85578	.14422
50	.84743	.15257
51	.83674	.16126
52	.82969	.17031
53	.82028	.17972
54	.8105	.18946
55	.80046	.19954
56	.79006	.20994
57	.77931	.22069
58	.76822	.23178
59	.75675	.24325
60	.74491	.25509
61	.73267	.26733
62	.72002	.27998
63	.70696	.29304
64	.69352	.30648
65	.67970	.32030
66	.66551	.33449
67	.65098	.34902
68	.63610	.36390
69	.62086	.37914

	LIFE ESTATE	REMAINDER
75	.52149	.47851
76	.50441	.49559
77	.48742	.51258
78	.47049	.52951
79	.45357	.54643
80	.43659	.56341
81	.41967	.58033
82	.40295	.59705
83	.38642	.61358
84	.36998	.63002
85	.35359	.64641
86	.33764	.66236
87	.32262	.67738
88	.30859	.69141
89	.29526	.70474
90	.28221	..71779
91	.26955	.73045
92	.25771	.74229
93	.24692	.75308
94	.23728	.76272
95	22887	..77113
96	.22181	.77819
97	.21550	.78450
98	.21000	.79000
99	.20486	.79514
100	.19975	.80025
101	.19532	.80468
102	.19054	.80946
103	.18437	.81563
104	.17856	.82144
105	.16962	.83038
106	.15488	.84512
107	.13409	.86591
108	.10068	.89932
109	.04545	.95455

Table II:

Use this table when processing MIAP applications for hospital admissions on January 1, 1986 through April 30, 1986.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,250.00	$ 10,500.00
Two (2)	$ 7,050.00	$ 14,100.00
Three (3)	$ 8,850.00	$ 17,700.00
Four (4)	$ 10,650.00	$ 21,300.00
Five (5)	$ 12,450.00	$ 24,900.00
Six (6)	$ 14,250.00	$ 28,500.00
Seven (7)	$ 16,050.00	$ 32,100.00
Eight (8)	$ 17,850.00*	$ 35,700.00
For families with more than eight (8) persons, add $1,800 for each additional family member.		

Table III:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1986.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,380.00	$ 10,760.00
Two (2)	$ 7,240.00	$ 14,480.00
Three (3)	$ 9,120.00	$ 18,240.00
Four (4)	$ 11,000.00	$ 22,000.00
Five (5)	$ 12,880.00	$ 25,760.00
Six (6)	$ 14,760.00	$ 29,520.00
Seven (7)	$ 16,640.00	$ 33,280.00
Eight (8)	$ 18,520.00*	$ 37,040.00
For families with more than eight (8) persons, add $1,880 for each additional family member.		

Table IV:

Use this table when processing MIAP applications for hospital admissions after May 1, 1987.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,500.00	$ 11,000.00
Two (2)	$ 7,400.00	$ 14,800.00
Three (3)	$ 9,300.00	$ 18,600.00
Four (4)	$ 11,200.00	$ 22,400.00
Five (5)	$ 13,100.00	$ 26,200.00
Six (6)	$ 15,000.00	$ 30,000.00
Seven (7)	$ 16,900.00	$ 33,800.00
Eight (8)	$ 18,800.00*	$ 37,600.00
For families with more than eight (8) persons, add $1,900 for each additional family member.		

Table V:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1988.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,770.00	$ 11,540.00
Two (2)	$ 7,730.00	$ 15,460.00
Three (3)	$ 9,690.00	$ 19,380.00
Four (4)	$ 11,650.00	$ 23,300.00
Five (5)	$ 13,610.00	$ 27,220.00
Six (6)	$ 15,570.00	$ 31,140.00
Seven (7)	$ 17,530.00	$ 35,060.00
Eight (8)	$ 19,490.00*	$ 38,980.00
For families with more than eight (8) persons, add $1,960 for each additional family member.		

Table VI:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1989.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 5,980.00	$ 11,960.00
Two (2)	$ 8,020.00	$ 16,040.00
Three (3)	$ 10,060.00	$ 20,120.00
Four (4)	$ 12,100.00	$ 24,200.00
Five (5)	$ 14,140.00	$ 28,280.00
Six (6)	$ 16,180.00	$ 32,360.00
Seven (7)	$ 18,220.00	$ 36,440.00
Eight (8)	$ 20,260.00*	$ 40,520.00
For families with more than eight (8) persons, add $2,040 for each additional family member.		

Table VII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1990

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,280.00	$ 12,560.00
Two (2)	$ 8,420.00	$ 16,840.00
Three (3)	$ 10,560.00	$ 21,120.00
Four (4)	$ 12,700.00	$ 25,400.00
Five (5)	$ 14,840.00	$ 29,680.00
Six (6)	$ 16,980.00	$ 33,960.00
Seven (7)	$ 19,120.00	$ 38,240.00
Eight (8)	$ 21,260.00*	$ 42,520.00
For families with more than eight (8) persons, add $2,140 for each additional family member.		

Table VIII:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1991.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,620.00	$ 13,240.00
Two (2)	$ 8,880.00	$ 17,760.00
Three (3)	$ 11,140.00	$ 22,280.00
Four (4)	$ 13,400.00	$ 26,800.00
Five (5)	$ 15,660.00	$ 31,320.00
Six (6)	$ 17,920.00	$ 35,840.00
Seven (7)	$ 20,180.00	$ 40,360.00
Eight (8)	$ 22,440.00*	$ 44,880.00
For families with more than eight (8) persons, add $2,260 for each additional family member.		

Table IX:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1992.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,810.00	$ 13,620.00
Two (2)	$ 9,190.00	$ 18,380.00
Three (3)	$ 11,570.00	$ 23,140.00
Four (4)	$ 13,950.00	$ 27,900.00
Five (5)	$ 16,330.00	$ 32,660.00
Six (6)	$ 18,710.00	$ 37,420.00
Seven (7)	$ 21,090.00	$ 42,180.00
Eight (8)	$ 23,470.00*	$ 46,940.00
For families with more than eight (8) persons, add $2,380 for each additional family member.		

Table X:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1993.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 6,970.00	$ 13,940.00
Two (2)	$ 9,430.00	$ 18,860.00
Three (3)	$ 11,890.00	$ 23,780.00
Four (4)	$ 14,350.00	$ 28,700.00
Five (5)	$ 16,810.00	$ 33,620.00
Six (6)	$ 19,270.00	$ 38,540.00
Seven (7)	$ 21,730.00	$ 43,460.00
Eight (8)	$ 24,190.00*	$ 48,380.00
For families with more than eight (8) persons, add $2,460 for each additional family member.		

Table XI:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1994.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,360.00	$ 14,720.00
Two (2)	$ 9,840.00	$ 19,680.00
Three (3)	$ 12,360.00	$ 24,720.00
Four (4)	$ 14,800.00	$ 29,600.00
Five (5)	$ 17,280.00	$ 34,560.00
Six (6)	$ 19,760.00	$ 39,520.00
Seven (7)	$ 22,240.00	$ 44,480.00
Eight (8)	$ 24,720.00*	$ 49,440.00
For families with more than eight (8) persons, add $2,480 for each additional family member.		

PMC.2012.00000413

PET-EX017C.0057

RECORD 004796

Table XII:

Use this table when processing MIAP applications for hospital admissions on or after April 1, 1995.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,470.00	$ 14,940.00
Two (2)	$ 10,030.00	$ 20,060.00
Three (3)	$ 12,590.00	$ 25,180.00
Four (4)	$ 15,150.00	$ 30,130.00
Five (5)	$ 17,710.00	$ 35,420.00
Six (6)	$ 20,270.00	$ 40,540.00
Seven (7)	$ 22,830.00	$ 45,660.00
Eight (8)	$ 25,390.00*	$ 50,780.00
For families with more than eight (8) persons, add $2,560 for each additional family member.		

Table XIII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1996.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,740.00	$ 15,480.00
Two (2)	$ 10,360.00	$ 20,720.00
Three (3)	$ 12,980.00	$ 25,960.00
Four (4)	$ 15,600.00	$ 31,200.00
Five (5)	$ 18,220.00	$ 36,440.00
Six (6)	$ 20,840.00	$ 41,680.00
Seven (7)	$ 23,460.00	$ 46,920.00
Eight (8)	$ 26,080.00*	$ 52,160.00
For families with more than eight (8) persons, add $2,620 for each additional family member.		

PMC.2012.00000414

PET-EX017C.0058

RECORD 004797

Table XIV:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1997

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 7,890.00	$ 15,780.00
Two (2)	$ 10,610.00	$ 21,220.00
Three (3)	$ 13,330.00	$ 26,660.00
Four (4)	$ 16,050.00	$ 32,100.00
Five (5)	$ 18,770.00	$ 37,540.00
Six (6)	$ 21,490.00	$ 42,980.00
Seven (7)	$ 24,210.00	$ 48,420.00
Eight (8)	$ 26,930.00*	$ 53,860.00
For families with more than eight (8) persons, add $2,720 for each additional family member.		

Table XV:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1998.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,050.00	$ 16,100.00
Two (2)	$ 10,850.00	$ 21,700.00
Three (3)	$ 13,650.00	$ 27,300.00
Four (4)	$ 16,450.00	$ 32,900.00
Five (5)	$ 19,250.00	$ 38,500.00
Six (6)	$ 22,050.00	$ 44,100.00
Seven (7)	$ 24,850.00	$ 49,700.00
Eight (8)	$ 27,650.00*	$ 55,300.00
For families with more than eight (8) persons, add $2,800 for each additional family member.		

PMC.2012.00000415

PET-EX017C.0059

RECORD 004798

Table XVI:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 1999.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,240.00	$ 16,480.00
Two (2)	$ 11,250.00	$ 22,120.00
Three (3)	$ 13,880.00	$ 27,760.00
Four (4)	$ 16,700.00	$ 33,400.00
Five (5)	$ 19,520.00	$ 39,040.00
Six (6)	$ 22,340.00	$ 44,680.00
Seven (7)	$ 25,160.00	$ 50,320.00
Eight (8)	$ 27,980.00*	$ 55,960.00
For families with more than eight (8) persons, add $2,820 for each additional family member.		

Table XVII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2000.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,350.00	$ 16,700.00
Two (2)	$ 11,250.00	$ 22,500.00
Three (3)	$ 14,150.00	$ 28,300.00
Four (4)	$ 17,050.00	$ 34,100.00
Five (5)	$ 19,950.00	$ 39,900.00
Six (6)	$ 22,850.00	$ 45,700.00
Seven (7)	$ 25,750.00	$ 51,500.00
Eight (8)	$ 28,650.00*	$ 57,300.00
For families with more than eight (8) persons, add $2,900 for each additional family member.		

Table XVIII:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2001.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,590.00	$ 17,180.00
Two (2)	$ 11,610.00	$ 23,220.00
Three (3)	$ 14,360.00	$ 29,260.00
Four (4)	$ 17,650.00	$ 35,300.00
Five (5)	$ 20,670.00	$ 41,340.00
Six (6)	$ 23,690.00	$ 47,380.00
Seven (7)	$ 26,710.00	$ 53,420.00
Eight (8)	$ 29,730.00*	$ 59,460.00
For families with more than eight (8) persons, add $3,020 for each additional family member.		

Table XIX:

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2002.

POVERTY SCALE		
Family Size	**100% Gross Annual Income**	**200% Gross Annual Income**
One (1)	$ 8,860.00	$ 17,720.00
Two (2)	$ 11,940.00	$ 23,880.00
Three (3)	$ 15,020.00	$ 30,040.00
Four (4)	$ 18,100.00	$ 36,200.00
Five (5)	$ 21,180.00	$ 42,360.00
Six (6)	$ 24,250.00	$ 48,520.00
Seven (7)	$ 27,340.00	$ 54,680.00
Eight (8)	$ 30,420.00*	$ 60,840.00
For families with more than eight (8) persons, add $3,080 for each additional family member.		

Table XX

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2003.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 8,980.00	$ 17,960.00
2	$ 12,120.00	$ 24,240.00
3	$ 15,260.00	$ 30,520.00
4	$ 18,400.00	$ 36,800.00
5	$ 21,540.00	$ 43,080.00
6	$ 24,680.00	$ 49,360.00
7	$ 27,820.00	$ 55,640.00
8	$ 30,960.00	$ 61,920.00

For families with more than 8 persons, add $3,140 for each additional member.

Table XXI

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2004.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,310.00	$ 18,620.00
2	$ 12,490.00	$ 24,980.00
3	$ 15,670.00	$ 31,340.00
4	$ 18,850.00	$ 37,700.00
5	$ 22,030.00	$ 44,060.00
6	$ 25,210.00	$ 50,420.00
7	$ 28,390.00	$ 56,780.00
8	$ 31,570.00	$ 63,140.00

For families with more than 8 persons, add $3,180 for each additional member.

PMC.2012.00000418

PET-EX017C.0062

RECORD 004801

Table XXII

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2005.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,570.00	$ 19,140.00
2	$ 12,830.00	$ 25,660.00
3	$ 16,090.00	$ 32,180.00
4	$ 19,350.00	$ 38,700.00
5	$ 22,610.00	$ 45,220.00
6	$ 25,870.00	$ 51,740.00
7	$ 29,130.00	$ 58,260.00
8	$ 32,390.00	$ 64,780.00

For families with more than 8 persons, add $3,260 for each additional member.

Table XXIII

Use this table when processing MIAP applications for hospital admissions on or after May 1, 2006.

Poverty Scale

Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 9,800	$ 19,600
2	$ 13,200	$ 26,400
3	$ 16,600	$ 33,200
4	$ 20,000	$ 40,000
5	$ 23,400	$ 46,800
6	$ 26,800	$ 53,600
7	$ 30,200	$ 60,400
8	$ 33,600	$ 67,200

For families with more than 8 persons, add $2,600 for each additional member.

Table XXIV

PMC.2012.00000419

PET-EX017C.0063

RECORD 004802

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2007.

Poverty Scale		
Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,210	$ 20,420
2	$ 13,690	$ 27,380
3	$ 17,170	$ 34,340
4	$ 20,650	$ 41,300
5	$ 24,130	$ 48,260
6	$ 27,610	$ 55,220
7	$ 31,090	$ 62,180
8	$ 34,570	$ 69,140

For families with more than 8 persons, add $3,480 for each additional member.

Table XXV

Use this table when processing MIAP applications for hospital admissions on or after March 1, 2008.

Poverty Scale		
Family Size	100% Gross Annual Income	200% Gross Annual Income
1	$ 10,400	$ 20,800
2	$ 14,000	$ 28,000
3	$ 17,600	$ 35,200
4	$ 21,200	$ 42,400
5	$ 24,800	$ 49,600
6	$ 28,400	$ 56,800
7	$ 32,000	$ 64,000
8	$ 35,600	$ 71,200

For families with more than 8 persons, add $3,600 for each additional member.

Piedmont Medical Center

Tenet Healthcare System

I have reviewed the attached 2012 Annual Report to York County Council and, to the best of my knowledge, believe it to be accurate in reporting on the operations of Piedmont Medical Center as required in the sixth addendum to the York County Contract dated August 1995.

John Holland
Sr. Vice President Regional Operations

Petitioner's Trial Exhibit 017D

Table of content

Description	*page*
Mission/Vision Statement	3
Board of Governors	4
Advisory Board Members	5
Annual Financial Statement	6
Property Tax Schedule	7
Depreciation Report	8
Capital Investment	9
Equipment Purchases	10
Services to Medically Indigent	11
Resident Charity and Bad Debt	12
Services to York County Detention Center	13
Emergency Department Services	14
Physician Recruitment	15
Emergency Medical Services	16
Emergency Medical Services Response Time	17
Emergency Medical Services Accomplishments	18-19
Emergency Medical Services Equipment and Resource Allocation	20
Employee Information	21
Medicaid Cost/Charge Ratios	22
Licensed Beds	23
Pricing	24
Medpar Data	25
Scholarships, Education and Donations	26-28
Physician Satisfaction Survey Summary	29
Continuing Education Report	30-31
Medical Indigent Assistance Guidelines	32-64

PMC.2012.00000422

PET-EX017D.0002

RECORD 004805

Mission Statement

Piedmont Medical Center strives to deliver exceptional health care to every person we have the privilege to serve.

Vision Statement

Piedmont Medical Center strives to be your premier health care system.

Board of Governors for 2012

Voting Members

Joseph Duschl [1] [2] – Chair
Alex Espinal, MD
William J. Masterton, CEO – Secretary
Arun Adlakha, MD
Mark Billman, MD
John Hoitink, MD
Ted Matthews
Lynn Moody
Geri Rucker
Jay Shah, MD
Skip Tuttle[1] [3]
Karen Walto
James Welsh, MD

Non-Voting members

James Hubbard, MD – Chief of Staff
Arnie Bendet – President, Volunteer Auxiliary
Don Currier – Piedmont Vice President, Human Resources
Mary Kaye Halterman – Piedmont Vice President – Patient Care Services and Chief Nursing Officer
Miriam Chambliss – Piedmont Hospital Compliance Officer
Jay Pennisson – Piedmont Vice President, Finance and Chief Financial Officer

[1] Selected from York County nominees
[2] Resident - Western York County
[3] At-large member

Community Advisory Board Members for 2012

William Cabaniss
Amy Faulkenberry
Phyllis Fauntleroy
Arleen Fincher
Lyn Garris
Charlie Grobusky
Linda Honeycutt
Cotton Howell
Beverly Kelly
Shirley MacMillian
Kelly Macaluso
Lee Ann Marzilli
Pam Morrell
Sharlene Plyler
Barbara Robinson
Christopher Smith
Brown Simpson
Loyce Sutton
Judy Tuttle
David Williams
Dianne Woods

PMC.2012.00000425
PET-EX017D.0005

RECORD 004808

Annual Financial Statement FY '12 - Ending May 31, 2012

Funds Available	**2012** (000s)
Piedmont Medical Center Received:	
For Inpatient Services	$402,153
For Outpatient Services	$244,808
Total Revenue	$646,961
In Addition, the Medical Center Received:	
From ARRA – Non-Patient – EHR Incentive Revenue	$1,220
From Other Non-Patient Activity	$2,505
Total Non-Patient Revenue	$3,725
Piedmont did not receive full payment for services:	
From Government and Third-Party Payors	$343,757
From Those Unwilling to Pay	$32,659
From Those Unable to Pay	$24,482
From Compact with Uninsured Total	$15,594
Revenue Not Received	$416,492
Total Funds Available	$234,194
FUNDS APPLIED	
Piedmont Medical Center Applied Funds:	
To Pay Full- and Part-Time Employees	$71,168
To Provide Employee Benefits	$15,479
To Purchase Supplies, Utilities, Insurance and Other Expenses (1)	$96,791
To Pay Depreciation and Amortization	$12,797
To Pay Interest on Debt	$1,873
Total Expenses	$198,108
Pre-Tax Income	$36,086
Federal Inc Taxes	$9,568
State Inc Taxes	$1,367
State Franchise Taxes	$76
Property Taxes	$2,013
Business License Taxes	$133
Indigent Care Taxes	$6,528
Total Tax Expense	$19,685
After Tax Income	$16,401
Capital Expenditures	$13,685

(1) This amount includes corporate overhead.

Property Tax Payments Calendar Year 2011

School Operations	$	968,655
School Debt Service	$	297,648
City Operations	$	510,400
County Operations	$	258,465
County Debt Service	$	30,408
Library	$	24,777
Culture and Heritage	$	14,641
York Tec College	$	23,650
Unincorporated County Millage	$	1,836
Special Fire District	$	919
Total	$	2,131,399

Depreciation Reported for Piedmont Medical Center

Medicare Cost Report (Ending April 30, 1996)	$2,957,674
Medicare Cost Report (Ending April 30, 1997)	$3,643,810
Medicare Cost Report (Ending May 31, 1998)	$4,326,446
Medicare Cost Report (Ending May 31, 1999)	$5,047,537
Medicare Cost Report (Ending May 31, 2000)	$5,040,228
Medicare Cost Report (Ending May 31, 2001)	$6,598,342
Medicare Cost Report (Ending May 31, 2002)	$7,343,714
Medicare Cost Report (Ending May 31, 2003)	$8,458,222
Medicare Cost Report (Ending May 31, 2004)	$7,940,379
Medicare Cost Report (Ending May 31, 2005)	$7,701,444
Medicare Cost Report (Ending May 31, 2006)	$7,307,246
Medicare Cost Report (Ending May 31, 2007)	$8,067,789
Medicare Cost Report (Ending May 31, 2008)	$8,788,613
Medicare Cost Report (Ending May 31, 2009)	$9,336,025
Medicare Cost Report (Ending May 31, 2010)	$9,693,184
Medicare Cost Report (Ending May 31, 2011)	$10,360,227
Medicare Cost Report (Ending May 31, 2012)(1) (2)	$11, 642,749

(1) Unaudited

(2) PMC book depreciation prior to corporate year-end adjustments. Excludes amortization (computer software and intangible).

Calculation of Required Minimum Capital Investment

AMI (Tenet Healthcare System) agrees that in the period beginning June 1, 1995, and ending May 31, 1998, it will make investments in land or depreciable or amortizable property located in York County, South Carolina, in an aggregate amount not less than $23,000,000.

Period ending	*Capital expended*
FY96 (June 1, 1995 - May 31, 1996)	$9,037,474
FY97 (June 1, 1996 - May 31, 1997)	$20,307,000
FY98 (June 1, 1997 - May 31, 1998)	$15,296,000
FY99 (June 1, 1998 - May 31, 1999)	$8,330,000
FY00 (June 1, 1999 - May 31, 2000)	$6,286,533
FY01 (June 1, 2000 - May 31, 2001)	$19,371,848
FY02 (June 1, 2001 - May 31, 2002)	$21,186,311
FY03 (June 1, 2002 - May 31, 2003)	$14,265,756
FY04 (June 1, 2003 - May 31, 2004)	$ 5,142,463
FY05 (June 1, 2004 - May 31, 2005)	$ 8,426,403
FY06 (June I, 2005 - May 31, 2006)	$12,573,989
FY07 (June I, 2006 - May 31, 2007)	$24,200,592 (A)(B)
FY08 (June 1, 2007 - May 31, 2008)	$15,527,362 (A)
FY09 (June 1, 2008 - May 31, 2009)	$11,780,658 (A)
FY10 (June 1, 2009 - May 31, 2010)	$6,782,329 (A)
FY11 (June 1, 2010 - May 31, 2011)	$11,487,256 (A)
FY12 (June 1, 2011 - May 31, 2012)	$13,685,435 (A) (C)
Total Capital Investment to Date	***$223,687,408***

Calculations for contract year ending May 31, 2012:

1) $4,000,000.00 or,
2) 108% of $9,796,479 (average of most recent three years' depreciation) = $10,580,197 but, no less than $1,500,000.
Therefore required minimum capital for 2012 = $10,580,197.

Average actual capital spent (contract year ending May 31, 2012 and preceding two years) =	$10,651,673
Required minimum average capital spent (contract year ending May 31, 2012 and preceding two years =	$10,580,197
Requirement Excess / (Shortfall)	$71,476

Notes:

A) Amounts include operating leases as of June 1, 2006 pursuant to the Ninth Contract Addendum entered into on June 5, 2006
B) Includes land purchase of $8,581,257
C) Includes $3,983,446 in major items that were ordered but not delivered by May 31, 2012 due to unique circumstances.
For example: The new MRI required several local permits and a 4 month construction timeframe prior to going into production.
In another instance, our cardiac monitor replacement vendor was unable to install all units by May 31, 2012.

Descriptive List of Capital "Equipment" Purchased (June 1, 2011 to May 31, 2012):

A. Cost basis greater than $250,000

Item		Capital Cost
40111400	CERNER EMR LICENSES	$1,324,567
34011828	HD ENDOSCOPES & PROCESSORS	$605,626
34011931	BED FRAME REPLACEMENTS	$481,658
34011813	TELETRACKING XT CONVERSION	$441,957
34012758	CARDIAC MONITORS MAIN OR	$400,676
34011717	AMBULANCE – 2	$346,339
34011924	TELEMETRY MONITORS	$326,507
34011849	SPINAL SURGERY C-ARM	$275,463
34011779	ISOFLEX SURFACE MATTRESSES	$252,856
Total:		***$4,455,648***

B. Cost basis greater than $100,000

Item		Capital Cost
34012760	ALARIS PCA AND ALARIS ETC02 MODULES	$249,281
34012767	ECHO IE33	$248,504
34011925	GENERATOR	$247,228
34011913	NEURO MICROSCOPE	$243,423
34012772	COOLING TOWER REPLACEMENT	$230,574
34011964	OEC 9900 ELITE C-ARM	$214,663
34011843	CAREFUSION CAROUSEL	$200,134
34011914	S5 HEART LUNG PERFUSION SYSTEM	$195,325
34012768	GE LOGIQ 9	$184,427
34012814	HEART LUNG PERFUSION SYSTEM	$183,742
34011965	4TH FLOOR RENOVATIONS ARCHITECT FEES	$183,357
34012865	ED STRETCHER/MATTRESS	$177,442
34012756	CARDIAC MONITORS WT PACU	$166,083
34011929	RECLINERS	$163,645
57811714	STELLARIS COMBINED SYSTEM	$163,594
34012762	XLTEK EPILEPSY MONITORING SYSTEM	$160,383
34011741	NETWORK SWITCHES	$157,226
34011808	TIGR PATIENT EDUCATION SYSTEM	$147,140
34012749	URETEROSCOPES	$143,157
34012759	CARDIAC MONITORS WT OR	$140,179
34012794	PCU MONITORING AND TRANSPORT	$127,015
34012779	SIMULATION MANIKINS LAB	$119,308
34011970	I-STAT EQUIPMENT	$114,629
34011932	I-BEDS UPGRADE (72)	$113,821
34011916	MEDISTIM VERIQ PATENCY SYSTEM	$106,412
34011880	PORTABLE ECHO	$103,923
Total:		$4,484,615

Note: *This schedule does not include equipment valued under $100,000 or items not delivered.*

Services to the Medically Indigent (June 1, 2011 - May 31, 2012)

A.	York County Write-offs	
1.	142 Outpatient accounts	$770,731
B.	MIAP and Other Non Statutory Charity Write-Offs	
1.	995 Inpatient accounts	$20,436,472
2.	1,831 Outpatient accounts	$3,850,285
3.	CFC Charity pass through	$ -
4.	Additional Charity Reserves/(PY GL Accrual Reversal)	$ (575,065)
A - B.	*Total Charity Care*	*$24,482,423*
C.	Other Uncompensated Care (Bad Debt Provision)	$32,658,628
D.	Compact with the Uninsured Discounts	$15,594,495
E.	Indigent Care Taxes Paid	
	To State of SC	$6,077,180
	To York County	$450,984
	Total	*$6,528,164*

Calculation of required indigent services for June 1, 2011 - May 31, 2012:

$679,323 x (1.0180) = $691,551

Note: CPI increased 4.093 points or 1.800% (6/11, 225.722 and 5/12, 229.815) = 1.0180

Piedmont Medical Center

Schedule of York County Resident Charity and Bad Debts

A. Charity	
York County	$22,819,484
Other Counties or Unclassified	$4,583,994
All counties	$24,482,423
B. Bad debt *	
York County	$26,395,196
Other Counties or Unclassified	$6,263,432
All counties	$32,658,628

*Bad debt provision based on account assignments to collection agency.

Services, Assistance, and Supplies Provided to York County Detention Center

York County Detention Center Accounts

Patient Number	Total Charges	Expected Reimbursement
72802556	$1,458.17	$812.44
72984164	$604.00	$604.00
73012452	$26,222.04	$4,297.92
73243362	$2,887.18	$1,012.24
73284150	$10,165.28	$2,123.61
73520553	$437.80	$182.28
73594582	$1,956.38	$699.60
73671877	$676.80	$281.78
73817405	$595.37	$247.88
73884405	$437.80	$182.28
74049156	$3,378.27	$1,105.39
74251406	$151.91	$51.50
Total	$48,971.00	$11,600.92

Description of Emergency Department Services (June 1, 2011 - May 31, 2012)

Total Volume: 64,458
Acuity levels of patients treated in the Emergency Department (based on charge levels):

Level from least to most severe	Volume
0	1,746
I	1,500
II	4,232
III	27,046
IV	19,644
V	10,075
Critical Care	215

Physicians joining Piedmont's staff June 1, 2011 through May 31, 2012

New Practitioner	Status	Specialty
David Anschel, MD	Consulting	Telemedicine
Francisco Vega-Bermudez, MD	Consulting	Telemedicine
Derek McHaffie, MD	Consulting	Radiation Oncology
Benjamin Moeller, MD	Consulting	Radiation Oncology
Naresh Mori, MD	Active	Cardiology
Shamly Dhiman, MD	Active	General Surgery
Leona Miller, MD	Courtesy	Family Practice
Elizabeth Zimmerman, MD	Courtesy	Family Practice
Ogheneruona Apoe, MD	Active	Internal Medicine
Vamsi Kurra, MD	Active	Internal Medicine
Wuwei (Wayne) Feng, MD	Consulting	Telemedicine
Charles Outz, MD	Active	Emergency Medicine
Joel Lutterman, MD	Active	Pediatrics
Maureen Burdett, MD	Active	General Surgery
Akash Agarwal, MD	Courtesy	Neurosurgery
Paul Jaszewski, MD	Courtesy	Pain Management
Melissa Johnson, MD	Active	Emergency Medicine
Mark Romanoff, MD	Courtesy	Pain Management
Martin Ruocco, MD	Consulting	Telemedicine
Deanna Threatt, MD	Active	Pediatrics
Sharon Williams, MD	Active	General Surgery
Keith Menes, MD	Active	Vascular Surgery
Richard Crill, MD	Active	Emergency Medicine
Vito Basile, MD	Consulting	Tele-Radiology
James Viapiano, MD	Active	Anesthesiology
Khyati Shah, MD	Courtesy	Pediatrics
Julia Yaraei, MD	Active	Internal Medicine/Pediatrics
Amit Shah, MD	Consulting	Internal /Physical & Rehab Medicine
Shankar Perumal, MD	Active	Neurology
Esther Ikuru, MD	Active	Internal Medicine
Gaurav Patel, MD	Active	Internal Medicine

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PET-EX017D.0015

RECORD 004818

Emergency Medical Services

Objective: Promote educational opportunities for agencies providing Emergency Medical Services for York County.

- $ Maintain physician medical control for all agencies providing emergency medical services.
- $ Working to bring more educational opportunities for EMS providers to York County through York Technical College and Piedmont EMS.

Objective: Promote community health education and safety programs.

- $ Continue as lead agency of York County Safe Kids program.
- $ Continue to conduct child passenger safety checks at EMS headquarters on Heckle Boulevard. Explore additional locations to conduct child passenger safety checks.
- $ Conduct a study to evaluate the need for pre-hospital public education in our community. Develop and provide programs to meet those needs.

Objective: Enhance the level of pre-hospital care given in York County.

- $ Conduct research to identify best practice in pre-hospital care.
- $ Enhance protocols to provide best practice.
- $ Implement Automatic Vehicle Location System in conjunction with York County.

PMC.2012.00000436

PET-EX017D.0016

RECORD 004819

Emergency Medical Services (EMS) - Response Times (June 1, 2011-May 31, 2012)

Total EMS calls:	23,762
Total Emergency Dispatches:	17,282
Quick Response Unit's	1,191

District	Total District Calls	Total Emergency Responses
Eastern York County	16,247	11,573
Clover/Lake Wylie	2,876	2,102
City of York	2,352	1,834
Western York County	2,287	1,773

District	Contract Response Provision (in minutes)	Average Response Times (in minutes)
Eastern York County	12	7 minutes 03 seconds
Clover/Lake Wylie	18	9 minutes 32 seconds
City of York	12	6 minutes 14 seconds
Western York County	20	10 minutes 23 seconds

York County Emergency Response Districts

Eastern York County (12 minutes)	Western York County (20 minutes)
Bethesda	Bethany
City of Rock Hill	Bullock
Flint Hill	Hickory Grove
Fort Mill	McConnells
Lesslie	Sharon
Newport	Smyrna
Oakdale	York Fire District (out of city)
Riverview	
Tega Cay	

City of York: 12 minutes

Clover/Lake Wylie & Bethel - Clover Fire District: 18 minutes

Projected population FY 2012	**226,073**	**Next Trigger for New Equipment**
Eastern York County	149,355	166,500
Western York County	76,718	82,500

Emergency Medical Services Accomplishments–(June 1, 2011-May 31, 2012)

- **Response Times:** Improved average response times in all contractual zones as outlined below.
  - Eastern Zone: 15 second reduction in the average response times
  - Clover/Lake Wylie: 36 second reduction in average response times
  - City of York: 50 second reduction in average response times
  - Western Zone: 44 second reduction in average response times

- **Technology Enhancements**
  - Enhanced the real-time operations performance software to include the ability to be notified of any response outside of performance standards in real-time and to perform root cause analysis of the performance deficiency using Six Sigma CQI techniques.

  - Enhanced the real-time operations performance software to include real-time analysis of ambulance workloads and transports loads both for the system as a whole and for each individual ambulance. This allows the department to assure that its workload is dispersed in a more even manner. This assists in assuring that the paramedics are neither overworked and to assure that they are seeing enough critically ill patients to keep their clinical skill sets at a maximum performance level.

  - Enhanced our geospatial deployment planning software by including data from our patient care reporting system concerning true life threat emergency calls as opposed to looking at general non-life threatening call loads. This allows the department to specifically focus on placing ambulances in positions closer to patients with life threatening medical and traumatic conditions. This has assisted in improving our cardiac arrest patient survival rates. See item below in Process Improvement.

  - Implemented a new patient care reporting system that provides the following to the EMS department and the community:
    - Real-time access to pre-hospital data by the emergency department at Piedmont Medical Center. This allows for more accurate information for decision making for critical patients such as STEMI and Stroke patients.
    - Real-time access to critical clinical data with automated notification of management staff for any identified or potential clinical concerns or opportunities for improvement.
    - The ability to perform geospatial analysis of patient types and clinical condition types to look for trends in patient illness and injuries. This complements the ambulance positioning with regard to the placement of ambulances so that response times to the most critically ill or injured patients is minimized.

- **Process Improvements**
  - Using data from our patient care software and as outlined above we redesigned our ambulance deployment plans to place ambulances more precisely relative to calls that are true life threatening emergencies. This has helped our department improve our survival rates for patients in cardiac arrest. Our to date survival rate is now 120% above the cardiac arrest survival rates nationally.
  - Redesigned our internal clinical key performance indicator system to study our care for the following patient types:
    - Cardiac arrest, heart attack, seizure disorders, critical trauma, respiratory disorders, congestive heart failure
  - Currently redesigning the department's clinical patient care protocols to incorporate the latest clinical innovations and evidence based research into the local care of York County patients.
  - The department has begun the internal review process to prepare for national accreditation by the Commission on the Accreditation of Ambulance Services (CAAS).
- **Community Involvement**
  - Continued as the lead agency in York County for the Safe Kids program and performed education in various schools along with bicycle helmet rodeos at community events such as Summerfest in York.
  - Continued to conduct child passenger seat safety checks.
  - Implemented a customer service survey to randomly survey patients transported by Piedmont EMS about their experience with our paramedics.
- **Research**
  - Participating in a research study with the University of Kansas School of Medicine pertaining to medication administration.
  - Joining a national study of cardiac arrest conducted by Emory University and the Centers for Disease Control (CDC).

PMC.2012.00000439

PET-EX017D.0019

RECORD 004822

Emergency Medical Services Equipment/Resource Allocation

I. As required by the contract, all ambulances operate as Advanced Life Support units, 24 hours a day, 365 days a year.

II. As required by the contract, Piedmont Medical Center is required to operate ambulance stations in Eastern York County and three ambulance stations in Western York County as follows:

Eastern York County:
One unit on Heckle Boulevard
One 12-hour unit on Heckle Boulevard
One Quick Response Unit at Heckle Boulevard
One unit on Black Street
Four EMS units in Fort Mill area-Tega Cay, Baxter, northern area and downtown Fort Mill.
One unit at Exit 82/ Riverview Road
One 12-hour peek unit at Leslie Fire Department

Western York County:
One unit at Piedmont West station
One unit in Sharon at Sharon Fire Department
One unit at Clover station
One 24-hour unit at Newport Fire Department
One 24 ALS Quick Response Vehicle (QRV) at Piedmont West

Summary	Required Under Contract	Actual
Western York County:		
ALS Units	3	4
QRV	1	1
Eastern York County:		
ALS Units	5	8
QRV	1	1

Employee Information as of May 31, 2012

	Full Time	Part Time	PRN
Piedmont Medical Center	1,079	77	294
Carolina Surgical Center	20	6	6
Totals	*1,099*	*83*	*300*

Total Contracted Employees 320

Medicaid Cost/Charge Ratios:

Inpatient:	25.45%
Outpatient:	25.69%

PMC.2012.00000442
PET-EX017D.0022

RECORD 004825

Piedmont Medical Center Beds

Total licensed beds:	*288*
- Acute Medical/Surgical	268
- Psychiatric	20
- Special Care Nursery Bassinets	10

PMC.2012.00000443
PET-EX017D.0023

RECORD 004826

Contract Reporting Year Ending May 31, 2012

"Pricing"

As of the filing of this annual report, Amisub of South Carolina, d/b/a Piedmont Medical Center, is in full compliance with all requirements of Section 3.1 (e) Pricing as amended and modified by the First, Second, Third, Fourth, Fifth, Sixth, Seventh and Eighth addenda to the agreement between York County, South Carolina and Amisub.

Attached is the MedPar report reflecting Medicare inpatient charge data for the federal year beginning October 1, 2010 and ending September 30, 2011.

PMC.2012.00000444

PET-EX017D.0024

RECORD 004827

MEDPAR DATA

Federal Fiscal Year October 1, 2010 Through September 30, 2011

Medicare Inpatient Data

Hospital Comparison using 2011 Medpar Data by Specialty

Name and Outliers	Piedmont Medical Center (34018)	Piedmont Medical Center Atlanta (340040)	Piedmont Newnan Hospital (340066)	North Fulton Regional Hospital (340012)	Northside Hospital Gwinnett (340016)	Piedmont Athens Regional (340019)	Piedmont Fayette Hospital (340026)	Piedmont Henry Hospital (340028)	Piedmont Mountainside Hospital (340063)	Piedmont Rockdale Hospital (340065)	Piedmont Walton Hospital (340067)
CARDIOVASCULAR MEDICINE	$21,070.09	$19,608.04	$17,094.65	$34,582.32	$44,924.77	$36,378.63	$22,442.13	$19,887.00	$18,015.27	$29,582.00	$35,282.40
GASTRO	$58,660.68	$52,495.78	$57,530.16	$76,005.85	$67,022.69	$72,801.85	$49,660.09	$50,412.40	$55,894.39	$54,250.36	$84,610.36
GERIATRY	$18,329.60	$15,777.69	$19,894.99	$38,711.07	$34,915.24	$35,400.88	$20,932.12	$17,803.10	$13,595.78	$20,397.73	$38,672.29
NEUROLOGY MEDICINE	$20,091.68	$17,653.83	$13,900.80	$28,436.90	$30,700.18	$33,019.86	$20,828.57	$17,420.12	$13,436.51	$23,874.66	$33,701.11
NEUROSURGERY	$43,617.29	$27,742.67	$21,063.06	$0.00	$59,207.00	$70,209.92	$24,795.65	$35,789.42	$0.00	$34,306.36	$0.00
ENT SURGERY	$16,153.22	$14,324.67	$12,731.27	$33,115.39	$0.00	$25,338.69	$18,067.67	$13,737.53	$14,878.42	$18,196.28	$32,695.40
ENT SURGERY	$92,258.20	$0.00	$0.00	$0.00	$0.00	$71,570.08	$0.00	$0.00	$0.00	$55,436.45	$0.00
GASTROINTESTINAL MEDICINE	$26,190.82	$21,857.46	$17,595.66	$32,851.00	$34,672.37	$42,031.81	$21,312.05	$22,033.40	$18,058.66	$24,833.68	$40,478.45
GENERAL SURGERY	$17,507.47	$14,859.35	$12,207.85	$36,357.59	$31,180.95	$27,240.09	$13,356.06	$13,918.31	$11,184.60	$18,680.18	$35,617.78
GENERAL SURGERY	$99,815.10	$88,117.36	$83,559.48	$85,820.65	$95,796.87	$209,796.65	$57,145.80	$88,833.59	$75,021.61	$81,000.44	$109,124.86
GYNECOLOGY	$37,088.80	$24,658.50	$18,501.90	$29,924.91	$30,748.97	$42,466.64	$22,861.78	$32,009.06	$0.00	$28,477.10	$69,016.94
HEMATOLOGY	$28,677.67	$20,842.00	$15,815.51	$53,580.54	$45,696.66	$45,819.30	$20,089.50	$21,143.49	$13,834.32	$25,149.76	$35,702.48
HIV INFECTIONS	$38,661.31	$18,808.71	$45,899.00	$0.00	$0.00	$88,757.02	$0.00	$0.00	$0.00	$49,511.48	$0.00
INFECTIOUS DISEASES	$32,169.27	$41,480.42	$32,096.19	$88,504.76	$66,706.99	$114,886.03	$42,580.40	$46,284.76	$40,977.68	$42,885.89	$92,075.82
MAJOR TRAUMA	$30,554.21	$0.00	$19,487.80	$0.00	$32,409.47	$77,619.87	$21,447.03	$28,887.30	$20,997.38	$38,177.80	$0.00
NEPHROLOGY	$22,666.56	$22,219.35	$17,397.23	$35,864.37	$40,100.52	$36,122.68	$20,352.60	$24,195.82	$20,675.23	$25,456.62	$45,623.19
NEUROLOGICAL MEDICINE	$26,049.20	$24,333.32	$18,928.98	$41,649.40	$42,134.48	$43,788.13	$23,727.55	$25,112.65	$18,464.04	$28,854.22	$45,985.65
NEUROLOGY	$70,787.57	$59,913.08	$39,574.89	$27,422.92	$76,310.31	$125,115.40	$28,268.19	$48,345.28	$46,019.44	$51,979.38	$0.00
OBSTETRICS - DELIVERY	$26,214.17	$0.00	$8,358.00	$0.00	$13,450.24	$0.00	$0.00	$20,013.28	$0.00	$10,824.94	$0.00
OBSTETRICS - NON DELIVERY	$16,108.59	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
ONCOLOGY MEDICINE	$36,625.79	$26,078.86	$21,832.44	$55,993.31	$66,297.39	$73,381.60	$26,917.78	$37,788.45	$25,268.49	$38,236.26	$44,206.59
ONCOLOGY SURGERY	$53,717.33	$0.00	$38,032.09	$0.00	$67,306.21	$71,836.91	$30,749.78	$40,121.26	$0.00	$38,926.06	$0.00
OPEN HEART	$137,837.53	$130,882.40	$108,071.51	$0.00	$67,559.50	$240,098.11	$86,041.88	$134,067.14	$82,988.11	$122,978.76	$0.00
ORTHOPEDICS	$16,041.37	$0.00	$0.00	$0.00	$0.00	$36,833.79	$0.00	$0.00	$0.00	$0.00	$0.00
ORTHOPEDIC MEDICINE	$23,198.25	$17,891.11	$15,214.41	$28,801.05	$30,992.71	$37,712.89	$18,218.78	$17,470.74	$14,994.58	$24,072.63	$36,727.87
ORTHOPEDIC SURGERY	$52,119.91	$52,067.91	$32,987.48	$68,788.89	$68,083.12	$67,970.66	$34,714.70	$32,481.43	$41,537.30	$43,070.74	$75,237.67
PLASTIC SURGERY	$52,302.94	$55,301.04	$21,856.38	$0.00	$114,213.83	$86,079.09	$0.00	$27,671.43	$37,898.25	$50,971.62	$40,146.99
POISONING/DRUG TOXICITY, OR TX	$25,824.31	$23,328.12	$18,261.67	$23,633.00	$42,328.55	$35,294.69	$16,545.61	$18,437.84	$23,005.66	$28,429.87	$31,854.00
PSYCHIATRY	$21,010.09	$21,880.45	$14,339.27	$0.00	$41,273.89	$28,936.93	$23,744.00	$19,125.61	$0.00	$21,474.44	$38,893.44
PULMONARY MEDICINE	$29,840.51	$24,551.52	$22,589.28	$41,000.75	$58,853.77	$53,760.92	$26,529.49	$25,885.41	$24,670.22	$27,262.66	$57,680.12
RENAL FAILURE	$93,126.58	$74,274.63	$45,649.82	$160,067.77	$121,497.07	$102,661.75	$49,466.06	$107,634.18	$54,614.10	$59,274.60	$0.00
REHABILITATION	$22,579.20	$8,442.11	$11,057.43	$0.00	$0.00	$29,458.33	$19,507.50	$20,958.17	$0.00	$25,480.10	$0.00
THORACIC SURGERY	$76,302.46	$62,652.47	$41,957.19	$0.00	$111,403.24	$129,193.67	$52,405.58	$70,219.96	$60,377.41	$69,920.32	$83,283.10
TRANSPLANT	-$177,049.83	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
UROLOGY MEDICINE	$22,354.22	$17,830.74	$15,034.89	$29,190.87	$34,788.19	$33,926.65	$18,618.78	$21,618.24	$13,429.83	$21,226.33	$36,641.14
UROLOGY SURGERY	$52,602.98	$35,422.98	$38,598.63	$51,394.80	$44,907.89	$61,615.48	$25,041.57	$42,303.51	$70,289.25	$40,852.04	$48,975.26
VASCULAR SURGERY	$39,883.91	$33,161.56	$40,411.05	$82,934.89	$80,934.44	$96,172.11	$42,961.17	$67,533.64	$51,578.14	$82,182.68	$79,210.10
Total Average	$46,112.48	$35,568.17	$26,495.10	$46,580.95	$60,955.50	$69,551.12	$30,074.50	$37,487.50	$37,269.40	$39,229.89	$60,217.03
Average MS	5.09	4.92	4.35	4.86	7.50	7.35	5.12	0.00	5.62	5.04	4.76
Rank	5	9	11	4	2	1	10	7	8	6	3

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2012 Scholarships and Education

A. Scholarships

Paid June 1, 2011 – May 31, 2012

York Technical Community College - CAP Scholarships 1 Scholarship	$ 6,926
York Technical Community College York County Scholarship	$16,395
Winthrop University York County Scholarship	$16,395

B. Education support

1.	Clemson University – Nurse Betty Scholarship	$ 5,000
2.	York Technical College – Nursing program support	$ -
3.	Additional education support	$ 38,254
Total education support		***$ 82,970***

C. Piedmont provides community education through the following events and publications:

1.	Healthy Hometown: Fort Mill & York events	$38,686
2.	Educational materials and support	$126,132
Total community education		***$164,818***
Total education		***$247,788***

Piedmont Medical Center serves as a clinical practicum site for:

- Medical University of South Carolina
  - Nursing, Physician Assistant, Pharmacy
- Brookstone Academy
  - Pharmacy Techs
- University of South Carolina
  - Nursing, Pharmacy, Speech Pathology, Physical Therapy
- Winthrop University
  - Dietitian Training, Social Work, Program
- York Technical College
  - Nursing, Laboratory, Radiology, Operating Room Technician, Emergency Medical Training
- Kaplan University: Nursing
- University of Phoenix: Nursing
- Walden University: Nursing
- University of South Dakota: RN Refresher Program
- University of Alabama: Nursing

Community Donations and Sponsorships

1.	CITY OF TEGA CAY	$ 65,000.00
2.	ROCK HILL SCHOOL DISTRICT #3	$ 49,738.59
3.	CITY OF ROCK HILL	$ 32,000.00
4.	OLD TOWN ASSOC	$ 27,500.00
5.	TEGA CAY NEIGHBORS	$ 27,500.00
6.	TOWN OF FORT MILL	$ 27,500.00
7.	PALMETTO VOLUNTEERS IN MEDICINE	$ 25,500.00
8.	WINTHROP UNIVERSITY	$ 20,000.00
9.	YORK SCHOOL DISTRICT ONE	$ 18,542.94
10.	PMC - MEDICAL STAFF	$15,000.00
11.	BAXTER COMMUNITY ASSOC INC	$ 15,000.00
12.	GIRLS ON THE RUN	$ 10,000.00
13.	CHAMBER OF COMMERCE/ROCK HILL	$ 9,749.00
14.	REINDEER ROMP	$ 7,885.20
15.	CLEAR SPRINGS DEVELOPMENT CO LLC	$ 7,500.00
16.	YORK COUNTY COUNCIL ON ALCOHOL & AGING	$ 7,500.00
17.	AMERICAN RED CROSS/YORK	$ 5,000.00
18.	GREATER YORK	$ 3,085.00
19.	HIGH COTTON CLASSIC	$ 3,000.00
20.	CHILDRENS TRUST FUND OF SC	$ 2,850.00
21.	UNITED WAY OF YORK COUNTY SC	$ 2,500.00
22.	FORT MILL ROTARY FOUNDATION	$ 2,500.00
23.	YORK COUNTY MEDICAL SOCIETY AUX	$ 2,500.00
24.	CHAMBER OF COMMERCE/YORK COUNTY	$ 1,500.00
25.	BOYS & GIRLS CLUBS/ROCK HILL	$ 1,250.00
26.	HAMPTON, HARRY MEM WILDLIFE FUND	$ 1,000.00
27.	A PLACE FOR HOPE	$ 1,000.00
28.	AMER CANCER SOCIETY	$ 1,000.00
29.	ST PHILIP NERI CATHOLIC CHURCH	$ 1,000.00
30.	MARCH OF DIMES/SC	$ 1,000.00
31.	WESTMINSTER CATAWBA CHRISTIAN	$ 1,000.00
32.	GOOD FOLKS OF YORK CO	$ 1,000.00
33.	FAMILY CONNECTION OF SC	$ 1,000.00
34.	JUNIOR WELFARE LEAGUE	$ 1,000.00
35.	ALZHEIMERS ASSOC	$ 1,000.00
36.	YORK CO SAFE KIDS	$ 986.44
37.	YOUNG LIFE OF YORK COUNTY	$ 850.00
38.	NATION FORD LAND TRUST	$ 750.00
39.	PEOPLES FIRST INSURANCE	$ 600.00
40.	KIWANIS CLUB OF ROCK HILL	$ 500.00
41.	FT MILL LIONS CLUB	$ 500.00
42.	DRAVET SYNDROME FOUNDATION	$ 500.00
43.	MENDED HEARTS CHAPTER 289	$ 500.00
44.	NAACP	$ 500.00
45.	BETHESDA VOLUNTEER FIRE DEPT	$ 500.00
46.	TEGA CAY VETERANS ASSOC	$ 500.00
47.	ARTS COUNCIL OF ROCK HILL	$ 500.00
48.	EARLY LEARNING PARTNERSHIP, THE	$ 500.00
49.	SHERIFFS FOUNDATION OF YORK CO	$ 420.00
50.	CHAMBER OF COMMERCE/GREATER CLOVER	$ 300.00
51.	CHAMBER OF COMMERCE/LAKE WYLIE	$ 200.00
52.	CITY OF ROCK HILL/FREEDOM SPONSORSHIP	$ 200.00
53.	JUNIOR ACHIEVEMENT OF YORK CO	$ 189.00
54.	SHRINERS CRIPPLED CHILDRENS HOSP	$ 100.00
55.	BOY SCOUTS OF AMERICA/PALMETTO	$ 100.00
56.	YORK COMPREHENSIVE HIGH SCHOOL	$ 100.00
Total Community Donations and Sponsorships		**$ 409,396**
Grand total education and donations		**$ 657,184**

Piedmont Medical Center Physician Satisfaction Survey

The last survey was conducted during fourth quarter 2011.

Overall hospital rating = 67.1 percent

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Piedmont Medical Center
Continuing Education Report, FY 2011-2012

During the calendar year 2011, Piedmont Medical Center's department of Education provided employees with many diverse opportunities to enhance their knowledge and increase skill levels. With a staff of two Educators, two Diabetes / Wound Care Educators, two Community Educators, one part time Educator, and Education Liaisons in each department, the department provided multiple education opportunities to employees and the surrounding community.

A variety of learning formats were available for Piedmont employees, the healthcare community and the surrounding community at large. Opportunities included educational presentations, self learning modules (Written), videos, Voice activated manikin sessions, and computer assisted instruction. Additionally, the department uses Tenet's Education library and maintains a membership with Mid-Carolina Area Health Education Consortium.

Piedmont is an approved provider of Continuing Nursing Education by the South Carolina Nurses Association, an accredited provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation. During 2011, the department provided 98 educational activities yielding 380 Continuing Education Contact Hours (CECH) to a total of 2,006 attendees. Programs included Basic Cardiac Rhythm Interpretation, 12 Lead EKG evaluation, Crisis Management, Nursing Research, Healthcare Statistics, Legal issues in Healthcare, Basic and Advanced IV therapy, Critical Thinking, Physical Assessment, Leadership development, Documentation, Mentoring, Electronic Medical Record systems and Bedside Medication reconciliation, Wound assessment, Diabetes management, Lactation training, Cardiac and Neurological assessment and monitoring, Psychiatric care and Maternal-child health related topics. Basic and Advanced levels of various programs were offered. Piedmont also provided continuing education contact hours for the South Carolina Trauma Symposium and the Perinatal division sponsored an annual Perinatal Nursing Conference, with 46 persons attending from across the Carolinas. A Nursing Summit was held in collaboration with York Technical College and University of South Carolina College of Nursing.

In addition to various educational offerings, the department also sponsors and supports the Research committee, Shared Governance program, the hospital Clinical Ladder program, and the Nursing awards promotion process with the Palmetto Gold program with the South Carolina Nurses Foundation. Throughout the year , the department supported four national certification review programs: Certified Critical Care Nurse, Certified Medical Surgical Nurse, Certified Oncology Nurse and Certified Emergency Nurse. The department also sponsored two Certifications for Oncology in Chemotherapy and Biotherapy administration and management. Various program offerings were available for Registered Nurses, Licensed Practical Nurses, Nurse Technicians, Pharmacist, Imaging Technologist, Laboratory Technologist, Respiratory Care Providers, EMT's, Paramedics, Social Workers, and Physical Therapist. Many opportunities were available for Leadership and Management growth. International programs such as the Trauma Nursing Core Course, Advanced Fetal Monitoring, Crisis Prevention Intervention, and Crucial Conversations were offered throughout the year. A Director's retreat was conducted along with two team building exercises. Piedmont also updates and maintains an in-house medical library used by employees, physicians, and students from a variety of disciplines. Piedmont serves as a training facility for Nursing (BSN, ADN, LPN) , Laboratory Technology, Imaging Technology, Pharmacy, Speech Therapy, Paramedic, Emergency Medical Technician, Administrative

and Surgical technology students. The department also collaborates with the University of South Dakota as a clinical site for RN Refresher students, with 1 successful completions during the 2011 cycle.

Computer assisted instruction for all disciplines remained available through the Tenet Web network using .EDU, HealthStream, and Skillsoft. Available also on line is an NCLEX RN review course to assist newly graduated nurses in preparation for their licensing examination , On line Critical Care courses from the American Association of Critical Care Nursing, and Surgical Nursing programs from the Association of Operating Room Nurses. Nationally recognized continuing education credits were also provided through the Emergency Nurses Association, the Association of Women's Health, Obstetric and Neonatal Nurses (AWONH), and the Oncology Nurses Society.

The American Heart Association (AHA) recognizes Piedmont's Department of Education as a Community Training Center. Piedmont provides all available courses in Basic Life Support, Advanced Life Support, Pediatric Advanced Life Support, and Neonatal Resuscitation courses. During the fiscal year, the department provided training and verification to 1,102 Piedmont Medical Center employees, Physicians, and others in the surrounding medical community and the residents.

The Department assisted in the coordination and facilitation of the mandatory 2011 Ethics and Compliance general training from Tenet and Orientation to all new staff. The Department participated in Piedmont's community Healthy Hometown events in York and Fort Mill, providing Heart and Stroke awareness training, Hand Hygiene, Blood sugar monitoring, and colon health education.

Medical Indigent Assistance Program Guidelines

Financial Eligibility Requirements

Introduction: This chapter states the criteria used to determine if the applicant's income and resources are within the MIAP limits.

301 *Determining Financial Eligibility*

In determining eligibility for the MIAP, the income and resources of the applicant's family must be considered and measured against the appropriate standards. Spouses are responsible for spouses and parents are responsible for minor children.

302 *Family*

The first step in determining the amount of income and resources available to the applicants is to establish the family composition. A family is defined as the applicant and dependents or legally responsible relatives who live in the same household.

Consideration must be given to the applicant's dependent status in determining the family composition.

A. If the applicant is legally or financially dependent upon someone else in the household, the family is composed of the following household members:

1. The applicant; and
2. The persons upon whom he is dependent (i.e., the responsible person); and
3. All persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the responsible person.

If the applicant is a minor child who lives in the home with a stepparent, the stepparent is considered a member of the family only if the stepparent claims the child as an income tax dependent.

If the applicant is an adult who is financially dependent upon someone else in the household, the applicant is considered a family member only if: the person upon whom he is dependent is a relative; and both parties agree that one is financially dependent upon the other; and one could be claimed by the other as a dependent for income tax purposes, whether or not a return is filed.

1. The applicant; and
2. The persons related to the applicant by birth, marriage, or adoption and who are legally or financially dependent upon the applicant.

If the applicant has stepchildren living in the home, the stepchildren are included as members of the family only if the stepparent claims them as income tax dependents.

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Common Law Relationships. South Carolina law recognizes common-law marriages. A legally binding common law marriage is an agreement between two people to be married. Both of the individuals must be legally free to marry and they must hold themselves out to the community as a married couple. To document that a common law marriage exists, verification must be obtained that substantiates the fact that both individuals are legally free to marry. Statements are obtained from each partner indicating when the couple began living together as husband and wife and a collateral statement indicating the couple is known to the community as husband and wife. In South Carolina, common law marriages between minors are recognized when the male is at least 14 years old and the female is at least 12 years old.

Unmarried Individuals Living Together. Unmarried individuals who live together, who do not have common children and do not claim to have a common law relationship are not considered members of the same family. Ordinarily the income and resources of one would not be attributed to the other since they are not legally or financially responsible for each other. However, if both parties agree that their income is mutually available, half of the total gross annual income is attributed to the applicant.

Pregnant Women Cases. The family composition for a pregnant woman applicant is as follows:

- the pregnant woman;
- the unborn child(ren);
- the father of the unborn child (if he resides in the home); and
- persons related to the applicant by blood, marriage or adoption who are also legally or financially dependent upon the applicant

Family Members Recently Deceased. When a member of the applicant's family dies prior to the effective date of the application, the deceased individual is not considered a member of the family. Therefore, his income and resources are not considered in determining the applicant's eligibility unless such income and assets are available to the applicant and his family as of the effective date of the application.

When the applicant is deceased and death occurred within 30 days of the date of admission, his income is considered for only the thirteen weeks prior to the date of application and is not annualized.

When the applicant's family composition is questionable, prepare a summary of the family's circumstances and forward it to the Bureau of Eligibility and Oversight for a determination of family size.

302.1 ***Minors or Students Absent from Home***

To determine the family composition for an applicant who is a minor or a student absent from his parent(s) home, consideration must be given to the student's financial dependence upon the parent(s). Examples of such minors are students or children who choose not to live with their parent(s). For the purposes of the MIAP, an applicant who is a minor child or a student who is still financially dependent upon his parent(s) is

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considered a member of his parents(s)' household. If his parent(s) do not live in the same home, he is considered a family member in the home of the parent who holds legal custody.

A minor child is always considered a dependent of his parent(s) unless a court order exists which divests the parent(s) and the child of their rights, privileges and annuities, duties and obligations with respect to each other. If such a document exists, the child is not considered a member of the parent(s)'s family and the parent(s)' income and resources are not available to the minor child. A copy of the court order must be filed in the case record as documentation. For students over age eighteen (18), the parent(s) must be contacted to determine if the student is financially dependent upon them. If it is determined that the student is not financially dependent upon the parent(s), the student is not considered a member of their family and the parents income and resources are not available to the child.

303 ***Income Standards***

Only those persons whose gross family income is equal to or less than one hundred percent of the poverty guidelines may qualify for full payment through the MIAP. Only those persons whose gross family income is between one hundred and two hundred percent of the poverty guidelines, may qualify for partial payment through the MIAP. (Refer to Table II through Table XXIV of this chapter for the Federal Poverty Guidelines.)

304 ***Computation of Income***

The gross annual income of the individual and his family is measured against the annual poverty guidelines for the appropriate size family. Gross annual income should be representative of the family's average earnings. For this reason, the method of calculating gross annual income will vary depending on the employment status of the family members. In all cases, the applicant must be carefully interviewed to determine his/her employment status. *(Refer to 306.2 for the treatment of income when a family member is self- employed.)*

304.1 ***Methods of Verification and Computation***

The following describes methods of verifying and computing gross annual income based on the manner in which the income is received.

1. **Fixed Income** is a set benefit or a set income for work performed. An example is someone receiving Social Security benefits or a teacher. If the income is a fixed monthly amount, the income received in the preceding or current month must be verified. The verified monthly income is multiplied by twelve (12) to determine gross annual income. If the income is a fixed amount received semi-monthly, bi-monthly, etc., the income for the appropriate pay period must be verified and multiplied by the number of pay periods in a year.

2. **Hourly/Salaried with Bonuses, Commissions and Overtime** is income received regularly and is based on the number of hours worked or a salary, which is subject to additional earnings due to overtime, commissions or bonuses. Income received

in this manner is usually variable. Therefore, it must be verified for the four (4) weeks prior to the effective date of the application.

If income verification is available for the entire four (4) week period, the income received is multiplied by thirteen (13) to determine gross annual income. If income verification is available for a longer period of time, the income received should be converted to an average weekly income and multiplied by fifty-two (52).

If the applicant does not have four (4) weeks of income (earned or unearned), verify the total amount of income received in the four (4) week period and multiply by thirteen (13) to determine the gross annual income.

3. **Irregular Income** is income which varies from week to week or month to month. An example is people who work odds jobs. The method for verifying and computing income is the same as stated in number 2 above.

4. **Self-Employment Income** is income derived from an individuals' own business. Examples are farmers, beauticians, "shade tree" mechanics, loggers, etc.

   In this situation, determine gross annual income based on income received in the four (4) weeks prior to the effective date of application, multiplied by thirteen (13). If the person does not report income on a weekly or bi-weekly basis, determine gross annual income based on the prior year's income tax return. Deductions are allowed for self-employment income for the cost of doing business. Refer to Chapter 3 Section 306.2 for a list of allowed deductions.

For self-employed individuals who do not file income tax returns or maintain employment records, a signed affidavit regarding their earnings should be obtained.

Example A. The applicant has worked odd jobs all his life, but those jobs have been routinely performed for the same individuals who know the applicant and who are known by the applicant. In this situation, the applicant should be asked to sign release of information forms. These forms give you, as the designee, permission to obtain necessary documentation.

The applicant should be able to provide you with the names and addressed of individuals for who he has worked. With the release of information form, the employers can then be asked to furnish a statement regarding the frequency of employment, such as one (1) day per week and the amount paid.

Example B. The applicant has worked odd jobs all his life but those jobs have been a matter of "pick-up" work here and there. The applicant does not know the names of the individuals for whom he worked.

In this type of situation, the applicant's statement of gross annual earnings can be accepted. The case record should contain dictation regarding the applicant's statement and the reason it was accepted.

5. **Seasonal Income** is income, which is generally received only part of the year. If an individual or family has no other sources of income, the amount received during the most recent "season" must be verified and considered to be annual income. If an individual has other income, the amount received during the "season" is combined with the other income to determine gross annual income.

   Most recent season is defined as a season that occurred in the twelve (12) months prior to the effective date of the application.

   It should be noted for migrants work all during the year. Therefore, their income should be determined based on the method stated in number 2 of this section.

   Note: *If the earnings of the applicant and his/her family do not conform to the aforementioned description, contact the Bureau of Eligibility Policy and Oversight for assistance.*

   For non-emergency applications, income is verified based on the income received prior to the effective date of the application. For emergency admissions and retroactive applications, income is verified based on income received prior to the date of admission rather than the effective date of the application.

305 ***Unearned Income – Definitions and Types***

Unearned income is any income, which does not meet the definition of earned income. The following payments are considered unearned income (this list is not all inclusive):

1. Unemployment Compensation and Workmen's Compensation
2. Assistance Payments Based on Need – Family Independence (FI), SSI, and other cash payments
3. Pensions and Benefits – Annuities, pensions, retirement, veteran's or disability benefits, Social Security benefits, and other such pensions and benefits
4. Strike benefits
5. Support and Alimony – Support or alimony payments from non-household members
6. Contributions – Any cash contribution made to any member of the family by a non-family member (gift or loan)
7. Interest Payments – Payments from government-sponsored programs, dividends, interest, royalties and all other money payments from any source considered a gain or benefit
8. Trust Funds – When a family member receives monies from trust funds, the monies are treated as unearned income

9. Savings, Mortgages, Annuities, Insurance, and Other Investments – Dividends and interest from investments, such as stocks, bonds and savings, and payments of interest on mortgaged, annuities, insurance, etc. are unearned income. A payment of principal on a mortgage or loan may or may not be unearned income depending on whether or not the applicant loaned the money.

10. Lump Sum Payments – Any lump sum payment is considered unearned income in the month received an becomes a resource if retained to the following month. **EXCEPTION:** Federal and state income tax refunds are excluded from income.

11. Educational Loans, Grants and Scholarships – Any portion of loans, grants, and scholarships which may be used to meet the person's current living expenses (food, clothing or shelter) is counted as income. Any portion, which is clearly designated for tuition, is excluded from income.

12. Capital Gains Income – Any gain received from the sale of an asset is counted as income.

306 ***Earned Income-Definition and Types***

Earned income includes all income in cash earned by an individual through the receipt of wages, salary, commissions, or profit from activities in which he/she is engaged as a self-employed individual or as an employee. This earned income may be derived from his/her own employment, such as a business enterprise or farming, or derived from wages or salary received as an employee.

306.1 ***Earned Income Credit (EIC)***

The EIC is a provision of the Federal tax laws that allows the earnings of many individuals and couples to be supplemented either in advance or in a lump sum. This supplement (Earned Income Credit) is counted as earned income.

306.2 ***Income of Self-Employment***

Self-employment income is allowed deductions for the cost of doing business. The applicant must provide a record of expenses incurred in the production of the income. Examples of self-employment are beauticians, makeup sales, etc. Allowable costs for producing self-employment income are:

1. Identifiable costs of labor, such as salaries, employer share of Social Security, insurance, etc.
2. Stock, raw materials, seed and fertilizer, feed for livestock used in producing income
3. Rent and costs of maintenance for the business building
4. Business telephone costs
5. Costs of operating a motor vehicle when required in connection with the operation of the business
6. Insurance premiums and taxes paid on the business
7. Costs of feed for work stock

8. Costs of meals for children when day care is provided in the applicant's home
9. Interest paid to purchase income-producing property

The following items are not considered as a cost of producing self-employment income:
Payments on the principle of the purchase price of income producing real estate and capital assets, equipment, machinery and other durable goods;

1. Net losses from previous providers;
2. Federal, state and local income taxes, money set aside for retirement purposes, and other work related expenses are accounted for by the earned income deduction.
3. Costs of producing home produce intended for family consumption;
4. Family living expenses
5. Personal debts
6. Entertainment expenses
7. Depreciation expense

After the self-employment income is given the cost of doing business deduction, it is added to any other earned income.

306.3 ***Boarder or Lodger Income***

The worker must verify and document the income received from the boarder or lodger and then exclude the verified actual costs incurred in providing room and/or board. Examples of costs incurred are the additional utilities, cost of food provided, laundry expenses, etc.

If the applicant is unable to provide records that substantiate the costs of providing lodging and/or board, a standard deduction of $60 monthly may be given for lodging and board and a standard $20 monthly may be given for lodging only. Any income received in excess of the standard amounts is added to other earned income prior to granting the standard earned income disregards.

After this exclusion, the remaining income is considered earned income and is added to other earned income.

307 ***Income Verification***

All income must be verified and the method, amount and date of verification must be documented. The following documents that can be used to verify earned income;

1. Pay stubs
2. Employee's W-2 Forms
3. Wage tax receipts
4. Federal income tax return
5. Self-employment bookkeeping records
6. Sales and expenditures records
7. Employer's wage records

8. Statements from employer
9. Employment Security Office.

The following are documents that can be used to verify other types of income:

1. Social Security award letter (changes in benefits will not always be reflected)
2. Benefit payment check
3. Unemployment Compensation award letter;
4. Pensions award notice;
5. Veterans Administration award notice;
6. Correspondence on benefits;
7. Income tax records;
8. Railroad award letter;
9. Support and alimony papers evidenced by court order, divorce or separation papers, contribution check;
10. Social Security Administration records and letters;
11. Employment Security Commission;
12. Union records;
13. Workmen's Compensation records;
14. Veterans Administration records and letters;
15. Insurance company records;
16. Tax records;
17. Railroad Retirement Board records; and
18. Department of Social Services Letter of Notification

Note: *If the applicant claims to have no income, you may accept his/her statement; however, he should be carefully interviewed to determine how he obtains food, clothing, and shelter given such circumstances. This information should be included in the case record dictation. If you question the accuracy of his statement, you may request that the applicant go to the Employment Security Commission to obtain the most recent quarterly wage information.*

308 ***Resource Standards***

Total countable resources must be within the limits described below:

1. **Home property.** The value of a farm of 50 acres or less on which the applicant or his family resides and has resided for at least twenty-five (25) years is excluded from the resources computation. The equity value of home property other than a family farm cannot exceed $35,000.

2. **Non-home real property and taxable personal property.** The applicant's or family's total equity interest in non-home real property and taxable personal property such as motor vehicles may not exceed $6,000. Real property used in a business enterprise is included in the resource determination. Work-related equipment being used in a business enterprise is excluded from the resource determinations.

3. **Household effects.** Household effects such as furniture, kitchen utensils, etc., are not considered in the resource computation.

4. **Liquid assets.** The applicant or family's total liquid assets may not exceed $500.

For non-emergency admissions, the value of liquid assets must be determined as of the effective date of the application. For emergency admissions and retroactive determination, the value of liquid assets must be determined as of the date the applicant entered the hospital

If an applicant claims that he/she and his/her family members do not own any liquid assets, you may accept his statement. The case record should contain a notation that the applicant's statement was accepted.

1) If the total value of all liquid assets owned by the applicant and his/her family members does not exceed the limit, the liquid asset test is met.

2) An applicant with excess liquid assets may establish eligibility if he/she and/or other members of his/her family spend the excess amount over $500 toward payment of valid debts.

For the purpose of meeting this spend-down requirement, valid debts are defined as:

Rent or Mortgage Payment - The actual amount of rent or mortgage on the primary residence not to exceed maximum allowable deductions of $500 per month, per household.

Utilities - The actual amount for utility bills (i.e., electric, gas, oil, kerosene, wood, etc.) not to exceed a maximum allowable deduction of $150 per month, per household.

Medical Expenses - The actual amount paid for the cost of medical care, i.e., doctor bills, hospital charges, durable medical equipment, prescription drugs, etc. for each family members which were incurred within thirty (30) days prior to the effective date of application or for the applicant, during the period of hospitalization for which assistance is requested.

The applicant must be advised that he/she must spend-down his excess liquid assets **before** he can qualify for assistance through the fund. The applicant should be advised that the spend-down of excess liquid assets must occur after the effective date of application in order for the expense to be deducted from excess resources and that spend-down may be accomplished in the following way:

The applicant must present paid receipts that verify that the excess amount was used toward the payment of these valid debts which were incurred within thirty (30) days prior to the effective date of application or during the period of hospitalization for which assistance is requested. Spend-down must be accomplished within thirty (30) days of the effective date of the application.

For retroactive applications, the spend-down must be accomplished within thirty (30) days of the date of verification that the value of liquid assets exceeded the limit, if the applicant still owns the excess liquid assets. If the applicant no longer owns the excess liquid assets, the excess amount must have been spent on valid debts in accordance with the above stated procedure.

309 *Non-Liquid Resources*

The equity interest of non-liquid resources must be considered in the resources computation. Equity interest is the value of the applicant's and/or his family's ownership interest in the resources less any legal indebtedness. To determine a person's equity interest in a non-liquid resource, the following factors must be considered:

1. **Ownership Interest.** The value of a person's ownership interest in property must be considered. A person may have sole ownership. In this case, the equity value in the entire piece of property must be considered a resource and measured against the appropriate standard.

   If the person, jointly owns property with one or more other persons, only the equity value of the applicant's and/or his family's interest in the property is considered a resource and measured against the appropriate standards.

   In addition to joint or sole ownership of property, a person may own the right to use real property. These rights might be in the form of:

   - $ *Timber Rights* - Timber rights permit an individual to cut and remove free standing trees from property owned by another as designated by contract with the person holding title to the land on which the timber stands. In this case, the value of the timber rights would be considered and measured against the appropriate standards.
   - $ *Mineral Rights* - A mineral right is an ownership interest in certain natural resources such as coal, sulfur, petroleum, sand natural gas, etc. which are usually obtained from the ground. Only the value of the mineral right is considered a resource.
   - $ *Remainder Interest/Life Estate* - A person may also hold a life estate or remainder interest in property. A life estate conveys upon an individual or individuals for his lifetime, certain rights in property. Its duration is measured by the lifetime of the tenant or of another person, or by the occurrence of some specific events, such as remarriage of the tenant. The owner of a life estate has the right of possession, the right to use the property, the right to obtain profits from the property and the right to sell his life estate interest. (However, the contract establishing the life estate may restrain one or more rights of the individual.) He does not have title to the property and he does not have the right to sell the property. He may not usually pass it on to his heirs in the form of an inheritance. See Table 1 in this chapter for the chart used to determine the value of a person's life estate interest in property.

Where an individual owner conveys property to another person for life (life estate holder) and to a second person (the remainder man) upon the death of the life estate holder, both a life estate interest and a remainder interest have been created in the property. Upon the death of the life estate holder, the remainder man will hold full title in fee simple. An owner of real property may designate several individuals as remainder men who would hold ownership jointly or in common by will or agreement.

Example: *Mr. Heath, who is now deceased, conveyed a life estate to his wife in home property that he owned in fee simple both before and after his marriage to Mrs. Heath. Mrs. Heath has the right to live there for the rest of her life. On her death, the property will pass to her two sons who own a remainder interest in the property. The will designated that the sons will then own the property as joint tenants. The property is not considered a resource to the remainder man until the property is actually passed on to him.*

$ Unprobated Estates (Heir Property) - If an individual who owns property dies without making a will, and the estate has not been settled and the property is divided among heirs, the property is called intestate property. If an applicant is an heir, the value of such property must be developed. An heir would not be able to sell the property itself, but he would be able to sell his interest legally without court action and without permission of the other heirs.

The South Carolina Law concerning Descent and Distribution was changed by Act 539 of 1986. The new law is entitled Intestate Succession and Wills and is found at Section 62-2-101, et sec, S.C. Code of Laws, 1976, as amended. The law provides that the estate of an individual who dies intestate will be divided as follows:

$ If the deceased has no children, the widow (er) inherits the entire estate.

$ Regardless of the number of children surviving the deceased, the widow(er) inherits ½ of the estate and the remaining ½ is divided equally among the children of the deceased.

$ If any of the children of the deceased are not living, but at least one child survives the deceased, the ½ of the estate, which is inherited by the children, is still divided as though all children survived the parent. The portion to which the child who dies before his parent was entitled, will then be divided amongst his/her heirs according to law.

$ If there is no widow (er), the estate would then be divided equally among the children.

$ If the deceased were a joint owner of any real property, that portion to which he/she is entitled by law would become a part of his estate and would be divided according to the provisions of the law.

Note: *Any situation, which is not covered in this section, should be referred to the Bureau of Eligibility Administration*

Evidence of ownership of property can be obtained by checking the deed, the will or property and tax records in the county Courthouse. A deed does not have to be recorded to be valid. Tax records can be used only as a guide to other resources of documentation, as the person(s) listed on the tax records is not necessarily the true owner. Adverse possession, which occurs when someone lives on a parcel of land, pays the taxes, and then claims ownership to the property, is not considered legal ownership unless legal title has been conferred by court order.

2. **Tax Assessed Value** - The tax-assessed value of the resource is the current market value established by the County Tax Assessor. In addition, the current market value of a motor vehicle may be established by using either the NADA book value or the current market value established by the County Tax Assessor. When using the NADA

book to verify value, use only the current month's book and the listed "Trade-In" value. If the applicant wishes to rebut the current market value as established by the tax assessor's office or the NADA book, the following action is required:

Taxable Personal Property - The applicant may obtain an appraisal from a reputable dealer to establish a different value. If the county designee questions the reliability of the appraisal, he may require a second appraisal for another dealer.

Real Property - Rebuttal must be accomplished through an appeal to the assessor's office in the county where the property is located. A copy of the assessor's determination of value must be furnished to the designee. The value established by the assessor must be used.

3. **Legal Indebtedness** - Legal indebtedness is any legal encumbrance such as a note, mortgage or lien, which has been filed against the resource. It is the applicant's responsibility to provide verification of the current amount of the indebtedness. If the applicant fails to furnish verification of indebtedness, the tax-assessed value of the resource should be used in determining equity interest.

Examples of non-liquid resources are:

1) Real property;
2) Personal property, such as boats, vehicles, farm equipment and livestock. Personal property should not be confused with personal effects such as appliances, furniture, clothes and other similarly essential items of limited value that are necessary for day to day living, since personal effects are not counted.
3) Buildings

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PET-EX017D.0043

RECORD 004846

309.1 ***Real Property***

Real property is treated in the following manner:

1. *Home Property* - Home property is the applicant's principal place of residence. The home is defined as the home and all contiguous property. This includes all buildings on the contiguous property such as sheds, barns, garages, warehouses, or other houses. If the surrounding property is separated from the home by public rights of way, such as roads, the surrounding property is still considered contiguous to the home. However, if the surrounding property is separated from the home by intervening property owned by others, the surrounding land is not considered contiguous to the home. A mobile home is considered as home property if it is the applicant's principal place of residence. Equity interest in home property, which does not meet the family farm exclusion, must be applied toward the $35,000.00 home resources limitation.

2. *Non-home Property* - Non-home property is any property that is owned by the applicant and/or his family which is not contiguous to the home. The applicant's and/or his family's equity interest in non-home property must be applied toward the $6,000.00 resource limitation.

309.2 ***Taxable Personal Property***

The value of the applicant's and/or his family's interest in taxable personal property must be applied toward the $6,000.00 resource limitation.

309.3 ***Buildings***

In some instances, an applicant or his family may have an ownership interest in a building but not the land on which the building is located. In such cases, the value of the interest in the building must be applied toward the $6,000 resources limitation.

310 ***Liquid Resources***

The value of the applicant's and/or his family's liquid resources must be applied toward the liquid asset resource limitation as found in Section 308.4. Examples of liquid resources are:

1. Cash on hand;
2. Checking or savings accounts in banks or other savings institutions, including credit unions;
3. Savings certificates;
4. The market value of stocks or bonds;
5. Trust accounts except when inaccessible;
6. Funds held in individual retirement accounts (IRA's). The entire cash value of the account, less the amount of any penalty for early withdrawal, is counted;
7. Pension funds that are available;

8. Federal and State Income Tax refunds;
9. Pre-need burial contracts; and
10. Cash value of life insurance. Count cash value only for each family member who has life insurance with a total face value(s) greater than $10,000.00. A separate determination must be made for each family member. For each family member who owns life insurance, determine the total face value owned by the individual. (The owner is the insured unless otherwise stipulated in the policy.) If the total face value of all policies owned by the family member does not exceed $10,000.00, exclude the cash value of the family member's policies. If the total face value of all policies owned by the family member exceeds $10,000.00, exclude the first $1,500.00 of cash value and count the amount above $1,500.00 as liquid asset.

Note: *Term insurance does not have a cash value.*

310.1 ***Jointly Owned Liquid Resources***

When accounts (e.g. savings or checking, stocks or bonds, etc.) are owned jointly and the applicant and/or his family have access to the entire amount in the account, the entire amount is counted toward the resource limit.

To determine whether the person has access to the entire amount, the worker will need to determine if both signatures are needed for access to the resources or if only one signature is needed. One signature means the entire amount is accessible. When both signatures are needed, only a pro-rata s hare of the account is applied to the resource limit.

310.2 ***Trusts***

If an applicant and/or a member of his/her family is the beneficiary of a trust and he/she has unrestricted access to the principal of the trust, the value of the principal is counted as a resource. The value of the trust principal is measured against the liquid asset resource limitation.

If the beneficiary of the trust does not have access to the trust and the trustee either does not have the authority or refuses to make the trust principal available to the beneficiary, the trust principal is not counted as a resource. If the applicant or family member does not have access to the trust principal, only the income and/or other benefits from the trust is counted.

310.3 ***Burial Plots***

A burial plot is defined as a conventional gravesite, crypt, mausoleum, urn or other repository, which is customarily and traditionally used for the remains of a deceased person. Burial plots owned by the applicant and/or his family are excluded from resources.

311 ***Household Effects***

Clothing, household goods, personal effects and furnishings used for day-to-day living are excluded.

312 ***Resources Verification***

All resources must be verified and the method, amount and date of verification must be documented. The following are documents that can be used to verify resources:

1. Bank statements
2. Tax assessor records
3. Real estate forms
4. Insurance policies
5. Insurance agencies
6. Statement from other owner when there is joint ownership
7. Current official correspondence received by the applicant
8. Court Records - Deeds, Titles, etc.
9. Current NADA Book.

Note: *If the applicant states that he/she and/or his/her family do not own real property or taxable personal property, the courthouse records must be searched to verify his/her statement. Courthouse records do not have to be searched in the name of minor children unless there is an indication that they own real and personal property. For reapplications which are filed within six (6) months of an MIAF eligible hospital stay, it is not necessary to re-verify (i.e., search of courthouse records) the ownership and value of real and personal property unless the applicant indicates that their circumstances have changed.*

313 ***Transfer of Resources***

An applicant and/or his/her family who transferred resources without receiving full compensation within three (3) months prior to the period of hospitalization for which the application for assistance is made, may not be eligible. The application must be denied if the uncompensated value in combination with other resources exceeds the appropriate resource limitation.

Although transfer of a resource without receipt of full compensation may result in ineligibility for MIAP for up to twelve (12) months, the person may establish eligibility if it is determined that he/she later receives full market value for the transferred resource. The person may establish that full compensation was received provided the resource is returned or the applicant receives fair market value for the transferred resource, and the proceeds are used for living and/or medical expenses of the applicant to the point that the resource is reduced to within the appropriate resource limitation.

The transfer resources policy applies to:

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RECORD 004849

1. Transfers made by an applicant and/or his family, or on their behalf by a person acting for and legally authorized to execute a contract for the applicant and/or his family (such as legal representative, parent of minor child, holder of power or attorney, etc.);

2. Transfers of liquid and non-liquid resources (cash, bank accounts, etc. by giving to another individual, creation of irrevocable trusts, petitioning courts to set aside funds for a specific purpose, etc.);

3. Waiver or suspension of benefits to which the individual is legally entitled, e.g. inheritance, insurance settlement and proceeds of a loan.

The transfer of resources policy does not apply to:

1. Actions take by persons not listed in #1 above (for example, policy does not apply to withdrawal of funds by another person from a bank account jointly held with the eligible applicant unless the other person is the spouse or parent of the applicant);

2. A resource that is spent or used to repay a valid debt;

3. Valid loans made by an eligible individual or eligible spouse.

314 ***Treatment of Cash Received to Replace/Repair Lost, Damaged or Stolen Resources***

Cash received from any source (e.g. insurance companies, Federal or State agencies, public or private organizations, other individuals) for the purpose of replacing or repairing a resource which is lost, damaged or stolen is not income but a resource that has changed form.

When it is determined that cash will be or is received for the purpose of replacing or repairing a resource, the total amount of such cash is excluded from the income computation for a period of six (6) months from the month of receipt. However, it is not excluded from resources it is counted as the resource it replaces would have been counted.

Cash which is received for personal injury, death or other purposes is not excluded from income or resources under this provision, even if the cash is received in conjunction with an/or from the same source as cash intended to replace or repair a resource.