ANNUAL REPORTS TO THE LEGISLATURE

AS OF JUNE 30, 2013

CAL-MORTGAGE LOAN INSURANCE DIVISION

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“Access to Safe, Quality Healthcare Environments that Meet California’s Diverse and Dynamic Needs”
State of California
Edmund G. Brown Jr., Governor

Health and Human Services Agency
Diana S. Dooley, Secretary

Office of Statewide Health Planning and Development
Robert P. David, Director

Cal-Mortgage Loan Insurance Division
Carl A. McLaney, Deputy Director

Advisory Loan Insurance Committee
As of June 30, 2013

Mort Raphael, Chairman
Dwayne Jones, Vice Chair
Soyla Reyna-Griffin
Jay Harris
Barbara E. Hood
David Kears
Fredric J. Prager
Robert Taylor
ANNUAL REPORT #2

BORROWERS’ COMPLIANCE
WITH THEIR
COMMUNITY SERVICE OBLIGATIONS

FOR THE FISCAL YEAR ENDED JUNE 30, 2013
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REASON FOR THE REPORT

As required by Health and Safety Code § 129075(c), the Office of Statewide Health Planning and Development (OSHPD):

“shall annually report to the Legislature the extent of borrowers' compliance with their community service obligations, pursuant to Section 129050 subdivision (j), Section 129055, and Section 129065.”

The aforementioned sections contain additional criteria for community service obligations as identified below:

- To be eligible for insurance, the health facility will be available to all persons residing or employed in the area served.
- If the borrower is a hospital, skilled nursing facility, or primary care clinic, it shall treat a reasonable proportion of Medi-Cal and Medicare patients.
- To assure availability of services to all persons, every hospital agrees to:
  - Advise patients about Medi-Cal and Medicare eligibility,
  - Distribute a list of physicians who have privileges at the hospital,
  - Advise their medical staff of the hospital's commitment to treat Medi-Cal and Medicare patients, and
  - Post notices about their community service obligation.

This is the fourteenth report as required by this statute. For more information regarding Health and Safety Code citations referenced throughout this report, please refer to Exhibit I (page 5).

COMMUNITY SERVICE OBLIGATION STATUS

The community service obligation status describes the following elements:

- Compliance Activity Summary
- Service Availability Assurance Review
- Medi-Cal and Medicare Patient Assurance Review
- Hospital Specific Requirements
- Conclusion

COMPLIANCE ACTIVITY SUMMARY

During the Fiscal Year Ended June 30, 2013 (FYE 2013), no borrower was determined to be out of compliance with their community service obligations by the Cal-Mortgage Loan Insurance Division which manages the California Health Facility Construction Loan Insurance Program (Cal-Mortgage Program). As a result, no corrective action plans were required as specified in Health and Safety Code § 129075(b). The tasks identified below further describe the processes required to determine borrower compliance with Health and Safety Code § 129050(j), § 129055, and § 129065, respectively:

- Review loan applications for eligibility as it pertains to availability of services
- Monitor borrowers for provision of services to Medi-Cal and Medicare patients
- Assure that hospitals comply with the community service obligation
SERVICE AVAILABILITY ASSURANCE REVIEW

Cal-Mortgage Program staff review borrowers’ compliance with Health and Safety Code § 129050(j). Loan insurance eligibility requires that all borrowers offer reasonable assurance regarding the specified health facility service availability. Services must be available to persons residing or employed in the service area of the borrower.

NEW APPLICANTS
During the reporting period, twelve (12) loans were added to the portfolio. Each new borrower provided assurances that its services are available to all persons residing or employed in the area serviced by the project, depending on the medical needs of the patient. Cal-Mortgage Program staff evaluate these assurances during their due diligence review. The results are included in the Project Summary & Feasibility Analysis (PS&FA) which are submitted to the Advisory Loan Insurance Committee (ALIC) and OSHPD Director. ALIC reviews the PS&FA and borrower materials, then makes recommendations to the OSHPD Director. Lastly, the OSHPD Director reviews the Cal-Mortgage Program and ALIC recommendations before deciding upon each loan insurance request. For additional information regarding new applicants, please refer to Exhibit II (page 7).

CURRENT BORROWERS
Cal-Mortgage Program staff conduct site visits as part of its ongoing project monitoring. During FYE 2013, staff visited 45 sites and no discriminatory practices were observed during these visits. Furthermore, staff maintain contact via periodic meetings with various State agencies such as the Department of Health Care Services and Department of Public Health. Through these valuable partnerships, the staff remains aware of licensing deficiencies and borrower discriminatory practice findings.

MEDI-CAL AND MEDICARE PATIENTS ASSURANCE REVIEW

Hospitals, skilled nursing facilities, and primary care clinics are the facilities which are certified for reimbursement for cost of care under Chapter 7 of Part 3 of Division 9 of the Welfare and Institutions Code (Medi-Cal) and Title XVIII of the Federal Social Security Act (Medicare). These types of borrowers must comply with Health and Safety Code § 129055 and demonstrate that the facility is used by persons for whom the cost of care is reimbursed by Medi-Cal and Medicare patients in the community served by the borrower.

NEW APPLICANTS
Among the new borrowers, listed in Exhibit II (page 7), there is one primary care clinic and four hospitals. Within the loan insurance application submitted to OSHPD, each borrower provided data about its proportions of Medi-Cal and Medicare utilization. As described in the prior section related to Health and Safety Code § 129050(j), Cal-Mortgage Program staff used the same due diligence to validate the information and the same process was used by ALIC and the OSHPD Director to approve the request for loan insurance.
CURRENT BORROWERS
Among the current borrowers, there are 14 hospitals, 2 skilled nursing facilities, and 23 primary care clinics. The proportion of Medi-Cal and Medicare utilization for each borrower was calculated from OSHPD’s Healthcare Information Division data reports. The data was derived from mandatory reports by the healthcare facilities. These utilization percentages were then compared to the percentage of Medi-Cal eligibles and Medicare beneficiaries within each borrower’s county. Facility utilization rates demonstrate that borrowers offered a reasonable proportion of services to both Medi-Cal eligibles and Medicare beneficiaries in their respective service areas. For more information regarding Medi-Cal and Medicare utilization rates by facility type, please refer to the following:

- Exhibits III (page 8), IV (page 9), V (page 10), and VI (page 11) display combined Medi-Cal and Medicare utilization rates for hospitals, skilled nursing facilities, and primary care clinics, respectively.
- Exhibits VII (page 12), VIII (page 13), IX (page 14), and X (page 15) display Medi-Cal utilization rates for hospitals, skilled nursing facilities, and primary care clinics, respectively.
- Exhibits XI (page 16), XII (page 17), XIII (page 18), and XIV (page 19) display Medicare utilization rates for hospitals, skilled nursing facilities, and primary care clinics, respectively.

Below are several explanations regarding group variances:

- For skilled nursing facilities, Medicare benefits include a 60-day lifetime limit, which affects the Medicare utilization rate. As a result, some insured skilled nursing facilities show low levels of Medicare utilization.
- Some primary care clinics provide services focused on Medi-Cal and uninsured populations. These services include immunizations, pediatrics, prenatal, and well-baby visits which are primary care focused. Elderly Medicare patients generally need specialty medical services and utilize community physicians. As a result, these clinics have a low level of Medicare utilization.

HOSPITAL SPECIFIC REQUIREMENTS
Health and Safety Code § 129065 states that each of the 14 general acute care hospitals in the portfolio, shown in Exhibit XV (page 20), must perform the following tasks as statutorily mandated:

- Advise patients about eligibility
- Distribute a list of physicians who have privileges at the hospital
- Advise its medical staff of the hospital’s commitment to treat Medi-Cal and Medicare patients
- Post notices about its community service obligation

During site visits, Cal-Mortgage Program staff validate whether or not the facility complied with Health and Safety Code § 129065.
CONCLUSION

With reference to Health and Safety Code § 129050(j), all applicants for new loans in FYE 2013 made reasonable assurances that their services are available to all persons in its service area based on the medical needs of the patient. It was determined that all currently insured borrowers met their obligation to be available to all persons in its service area.

With reference to Health and Safety Code § 129055, hospitals, skilled nursing facilities, and primary care clinics are the borrowers in the portfolio that provide services to Medi-Cal eligibles and Medicare beneficiaries. A review of utilization of services at each hospital, skilled nursing facility, and primary care clinic demonstrated that the borrower was providing a reasonable proportion of services to Medi-Cal eligibles and Medicare beneficiaries in the service area.

With reference to Health and Safety Code § 129065, all hospitals in the portfolio provided proper notifications to their patients and medical staff relating to their community service obligation requirements.

Based upon this review, no borrower was determined to be out of compliance with their community service obligations.
Exhibit I

HEALTH AND SAFETY CODE CITATIONS

SECTION 129045
The office shall annually report to the Legislature the financial status of the program and its insured portfolio, including the status of all borrowers in each stage of default and the office's efforts to collect from borrowers that have defaulted on their debt service payments.

SECTION 129050
A loan shall be eligible for insurance under this chapter if all of the following conditions are met:

****
(j) The borrower shall offer reasonable assurance that the services of the health facility will be made available to all persons residing or employed in the area served by the facility.

****

SECTION 129055
In order to comply with subdivision (j) of Section 129050, any borrower that is certified for reimbursement for cost of care under Chapter 7 (commencing with Section 14000) of Part 3 of Division 9 of the Welfare and Institutions Code shall demonstrate that its facility is used by persons for whom the cost of care is reimbursed under that chapter, in a proportion that is reasonable based upon the proportion of Medi-Cal patients in the community served by the borrower and by persons for whom the costs of care is reimbursed under Title XVIII of the federal Social Security Act in a proportion that is reasonable based upon the proportion of Medicare patients in the community served by the borrower.

For the purposes of this chapter, the community means the service areas or patient populations for which the health facility provides health care services, unless the office determines that, or the borrower demonstrates to the satisfaction of the office that, a different definition is more appropriate for the borrower’s facility.

SECTION 129065
As part of its assurance under subdivision (j) of Section 129050, any borrower that is a general acute care hospital or acute psychiatric hospital shall agree to the following actions:

(a) To advise each person seeking services at the borrower's facility as to the person's potential eligibility for Medi-Cal and Medicare benefits or benefits from other governmental third party payers.

(b) To make available to the office and to any interested person a list of physicians with staff privileges at the borrower's facility, that includes:

(1) Name
(2) Specialty
(3) Language spoken
(4) Whether takes Medi-Cal and Medicare patients
(5) Business address and phone number
(c) To inform in writing on a periodic basis all practitioners of the healing arts having staff privileges in the borrower's facility as to the existence of the facility's community service obligation. The required notice to practitioners shall contain a statement, as follows:

"This hospital has agreed to provide a community service and to accept Medi-Cal and Medicare patients. The administration and enforcement of this agreement is the responsibility of the Office of Statewide Health Planning and Development and this facility."

(d) To post notices in the following form, that shall be multilingual where the borrower serves a multilingual community, in appropriate areas within the facility, including but not limited to, admissions offices, emergency rooms, and business offices:

**NOTICE OF COMMUNITY SERVICE OBLIGATION**

"This facility has agreed to make its services available to all persons residing or employed in this area. This facility is prohibited by law from discriminating against Medi-Cal and Medicare patients. Should you believe you may be eligible for Medi-Cal or Medicare, you should contact our business office (or designated person or office) for assistance in applying. You should also contact our business office (or designated person or office) if you are in need of a physician to provide you with services at this facility. If you believe that you have been refused services at this facility in violation of the community service obligation you should inform (designated person or office) and the Office of Statewide Health Planning and Development."

The borrower shall provide copies of this notice for posting to all welfare offices in the county where the borrower's facility is located.

**SECTION 129075**

(a) Each borrower shall provide any reports as may be required of it by Part 5 (commencing with Section 128675), from which the office shall determine the borrower’s compliance with subdivision (j) of Section 129050.

(b) If a report indicates noncompliance with subdivision (j) of Section 129050, Section 129055, or Section 129065, the office shall require the borrower to submit a plan detailing the steps and timetables the borrower will take to bring the facility into compliance.

(c) The office shall annually report to the Legislature the extent of the borrowers’ compliance with their community service obligations pursuant to subdivision (j) of Section 129050, Section 129055, and Section 129065.
### Exhibit II

**Loans Insured During FY 2012–2013**

(Sorted by Date Loan Insured)

<table>
<thead>
<tr>
<th>Borrower Name</th>
<th>Facility City</th>
<th>Facility Type</th>
<th>Date Loan Insured</th>
<th>Original Insured Amount</th>
<th>Loan Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marshall Medical Center</td>
<td>Placerville</td>
<td>HOSP</td>
<td>09/26/2012</td>
<td>$17,805,000</td>
<td>Refinance</td>
</tr>
<tr>
<td>Hope Services</td>
<td>San Jose</td>
<td>ADC-DD</td>
<td>09/28/2012</td>
<td>$3,185,000</td>
<td>Refinance</td>
</tr>
<tr>
<td>Odd Fellows Home of California</td>
<td>Saratoga</td>
<td>MULTI-CCRC</td>
<td>10/25/2012</td>
<td>$98,550,000</td>
<td>Refinance plus¹</td>
</tr>
<tr>
<td>The Help Group</td>
<td>Culver City</td>
<td>CLINIC-MH</td>
<td>11/02/2012</td>
<td>$6,210,000</td>
<td>New</td>
</tr>
<tr>
<td>Chinese Hospital</td>
<td>San Francisco</td>
<td>HOSP</td>
<td>11/08/2012</td>
<td>$65,000,000</td>
<td>New</td>
</tr>
<tr>
<td>Ararat Home of Los Angeles, Inc.</td>
<td>Mission Hills</td>
<td>MULTI-OTH</td>
<td>11/26/2012</td>
<td>$2,990,000</td>
<td>Refinance</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>Lompoc</td>
<td>HOSP-DIST</td>
<td>03/07/2013</td>
<td>$18,875,000</td>
<td>New</td>
</tr>
<tr>
<td>Centro de Salud de la Comunidad de San Ysidro</td>
<td>San Diego</td>
<td>CLINIC-PC</td>
<td>03/19/2013</td>
<td>$37,730,000</td>
<td>New</td>
</tr>
<tr>
<td>San Benito Health Care District</td>
<td>Hollister</td>
<td>HOSP-DIST</td>
<td>03/19/2013</td>
<td>$24,915,000</td>
<td>New</td>
</tr>
<tr>
<td>Northern California Retired Officers Community</td>
<td>Fairfield</td>
<td>MULTI-CCRC</td>
<td>04/04/2013</td>
<td>$32,315,000</td>
<td>Refinance</td>
</tr>
<tr>
<td>Becoming Independent</td>
<td>Santa Rosa</td>
<td>ADC-DD</td>
<td>04/30/2013</td>
<td>$4,865,000</td>
<td>Refinance</td>
</tr>
<tr>
<td>O’Connor Woods Holding Company</td>
<td>Stockton</td>
<td>MULTI-OTH</td>
<td>06/12/2013</td>
<td>$49,115,000</td>
<td>New</td>
</tr>
</tbody>
</table>

**Total Loans Insured**

| 12 | $361,555,000 |

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**Footnotes:**

¹ Refinanced an existing loan plus received an additional loan.

---

### Facility Type

<table>
<thead>
<tr>
<th>Facility Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADC-DD</td>
</tr>
<tr>
<td>ADHC</td>
</tr>
<tr>
<td>CDRF</td>
</tr>
<tr>
<td>CLINIC-AIDS</td>
</tr>
<tr>
<td>CLINIC-MH</td>
</tr>
<tr>
<td>CLINIC-MULTI</td>
</tr>
<tr>
<td>CLINIC-PC</td>
</tr>
<tr>
<td>GH-DD</td>
</tr>
<tr>
<td>GH-DD/MD</td>
</tr>
<tr>
<td>GH-MD</td>
</tr>
<tr>
<td>HOSP</td>
</tr>
<tr>
<td>HOSP-DIST</td>
</tr>
<tr>
<td>HOSP-PSYCH</td>
</tr>
<tr>
<td>HOSPICE</td>
</tr>
<tr>
<td>MULTI-CCRC</td>
</tr>
<tr>
<td>MULTI-OTH</td>
</tr>
<tr>
<td>SNF</td>
</tr>
</tbody>
</table>
### Exhibit III

**Hospitals**

Combined Medicare and Medi-Cal Services Provided Compared to Medicare Beneficiaries and Medi-Cal Eligibles within Applicable County

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Combined Medicare &amp; Medi-Cal Services Provided</th>
<th>Medicare Beneficiaries&lt;sup&gt;2&lt;/sup&gt; &amp; Medi-Cal Eligibles&lt;sup&gt;3&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Patient Days</td>
<td>Discharges</td>
</tr>
<tr>
<td>Chinese Hospital</td>
<td>94%</td>
<td>93%</td>
</tr>
<tr>
<td>Corcoran District Hospital</td>
<td>45%</td>
<td>52%</td>
</tr>
<tr>
<td>El Centro Regional Medical Center</td>
<td>80%</td>
<td>74%</td>
</tr>
<tr>
<td>Enloe Medical Center</td>
<td>75%</td>
<td>70%</td>
</tr>
<tr>
<td>Hazel Hawkins Memorial Hospital</td>
<td>91%</td>
<td>68%</td>
</tr>
<tr>
<td>Henry Mayo Newhall Memorial Hospital</td>
<td>61%</td>
<td>61%</td>
</tr>
<tr>
<td>Kern Valley Healthcare District</td>
<td>94%</td>
<td>88%</td>
</tr>
<tr>
<td>Lodi Memorial Hospital Association, Inc.</td>
<td>79%</td>
<td>76%</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>84%</td>
<td>69%</td>
</tr>
<tr>
<td>Marshall Medical Center</td>
<td>77%</td>
<td>76%</td>
</tr>
<tr>
<td>Mayers Memorial Hospital District</td>
<td>92%</td>
<td>72%</td>
</tr>
<tr>
<td>Mendocino Coast Health Care District</td>
<td>81%</td>
<td>76%</td>
</tr>
<tr>
<td>Mission Community Hospital</td>
<td>86%</td>
<td>81%</td>
</tr>
<tr>
<td>St. Rose Hospital</td>
<td>86%</td>
<td>86%</td>
</tr>
</tbody>
</table>

Footnotes:

1. Percentage of Combined Medicare & Medi-Cal Services Provided from the Combined Medicare & Medi-Cal Utilization Worksheet; refer to Exhibit IV.


### Exhibit IV

#### Hospitals

Combined Medicare and Medi-Cal Utilization

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Patient Days</th>
<th>Discharges</th>
<th>Outpatient Visits</th>
<th>Gross Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Combined</td>
<td>Total</td>
<td>Percent</td>
<td>Combined</td>
</tr>
<tr>
<td>Chinese Hospital</td>
<td>9,771</td>
<td>10,424</td>
<td>94%</td>
<td>1,679</td>
</tr>
<tr>
<td>Corcoran District Hospital</td>
<td>738</td>
<td>1,623</td>
<td>45%</td>
<td>277</td>
</tr>
<tr>
<td>El Centro Regional Medical Center</td>
<td>20,793</td>
<td>26,115</td>
<td>80%</td>
<td>4,988</td>
</tr>
<tr>
<td>Enloe Medical Center</td>
<td>50,194</td>
<td>66,978</td>
<td>75%</td>
<td>10,492</td>
</tr>
<tr>
<td>Hazel Hawkins Memorial Hospital</td>
<td>39,660</td>
<td>43,740</td>
<td>91%</td>
<td>1,778</td>
</tr>
<tr>
<td>Henry Mayo Newhall Memorial Hospital</td>
<td>32,838</td>
<td>53,397</td>
<td>61%</td>
<td>7,192</td>
</tr>
<tr>
<td>Kern Valley Healthcare District</td>
<td>22,500</td>
<td>23,931</td>
<td>94%</td>
<td>750</td>
</tr>
<tr>
<td>Lodi Memorial Hospital Association, Inc.</td>
<td>24,021</td>
<td>30,271</td>
<td>79%</td>
<td>4,725</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>38,211</td>
<td>45,613</td>
<td>84%</td>
<td>1,954</td>
</tr>
<tr>
<td>Marshall Medical Center</td>
<td>19,857</td>
<td>25,654</td>
<td>77%</td>
<td>4,093</td>
</tr>
<tr>
<td>Mayers Memorial Hospital District</td>
<td>26,445</td>
<td>28,823</td>
<td>92%</td>
<td>328</td>
</tr>
<tr>
<td>Mendocino Coast Health Care District</td>
<td>4,729</td>
<td>5,873</td>
<td>81%</td>
<td>1,032</td>
</tr>
<tr>
<td>Mission Community Hospital</td>
<td>31,255</td>
<td>36,149</td>
<td>86%</td>
<td>5,866</td>
</tr>
<tr>
<td>St. Rose Hospital</td>
<td>25,610</td>
<td>29,855</td>
<td>86%</td>
<td>5,780</td>
</tr>
</tbody>
</table>

**Footnotes:**

1 Data from OSHPD website (http://www.oshpd.ca.gov/HID/Products/Hospitals/AnnFinanData/PivotProfiles/default.asp). File: HID - 2012 OSHPD Hospital Annual Financial Data Profile (HAFD2012pivot.xls). Percentages were calculated from the file data.

2 Inpatient and outpatient gross revenue data were combined from the above source.

3 Combined column reflects aggregate Medicare and Medi-Cal data within each facility. Total column refers to Total Patient Days, Discharges, Outpatient Visits, and Gross Revenue reported from all payor sources.
## Skilled Nursing Facilities
Combined Medicare and Medi-Cal Services Provided
Compared to
Medicare Beneficiaries and Medi-Cal Eligibles within Applicable County

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Gross Revenue(^1)</th>
<th>Medicare Beneficiaries(^2) &amp; Medi-Cal Eligibles(^3)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Combined</td>
<td>Total</td>
</tr>
<tr>
<td>Asian Community Skilled Nursing Facility</td>
<td>$7,737,781</td>
<td>$10,308,816</td>
</tr>
<tr>
<td>North Kern - South Tulare Hospital District</td>
<td>$11,022,719</td>
<td>$11,527,549</td>
</tr>
</tbody>
</table>

Footnotes:
## Exhibit VI

### Primary Care Clinics

**Combined Medicare and Medi-Cal Services Provided Compared to**

Medicare Beneficiaries and Medi-Cal Eligibles within Applicable County

<table>
<thead>
<tr>
<th>Borrower Name</th>
<th>Facility Name</th>
<th>Combined Total</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>AltaMed Health Services</td>
<td>AltaMed Medical Group - E.L.A./Whittier</td>
<td>$14,540,494</td>
<td>$21,556,170</td>
</tr>
<tr>
<td>Asian Health Services, Inc.</td>
<td>Asian Health Service</td>
<td>$6,301,173</td>
<td>$10,889,211</td>
</tr>
<tr>
<td>Centro de Salud de la Comunidad de San Ysidro (4 sites)</td>
<td>Chula Vista Family Clinic</td>
<td>$1,986,897</td>
<td>$3,346,335</td>
</tr>
<tr>
<td></td>
<td>Otay Family Health Clinic</td>
<td>$2,087,766</td>
<td>$3,435,481</td>
</tr>
<tr>
<td></td>
<td>Paradise Hills Family Clinic</td>
<td>$1,683,603</td>
<td>$2,417,579</td>
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<tr>
<td></td>
<td>South Bay Family Health Center</td>
<td>$1,120,523</td>
<td>$1,315,455</td>
</tr>
<tr>
<td>Clinicas del Camino Real, Inc. (2 sites)</td>
<td>Clinicas del Camino Real, Oxnard</td>
<td>$2,993,976</td>
<td>$5,919,760</td>
</tr>
<tr>
<td></td>
<td>Clinicas del Camino Real, Ventura</td>
<td>$1,924,511</td>
<td>$5,227,584</td>
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<tr>
<td>Community Health Centers of the Central Coast, Inc.</td>
<td>Nipomo Community Medical Center</td>
<td>$1,349,078</td>
<td>$3,356,151</td>
</tr>
<tr>
<td>Community Health Systems, Inc.</td>
<td>Bloomington Community Health Center</td>
<td>$1,536,566</td>
<td>$3,040,375</td>
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<tr>
<td>Community Medical Center, Inc.</td>
<td>Channel Medical Center</td>
<td>$6,798,092</td>
<td>$11,861,136</td>
</tr>
<tr>
<td>Del Norte Clinics, Inc. - Ampla Health (4 sites)</td>
<td>Orland Family Health Center</td>
<td>$859,997</td>
<td>$1,795,090</td>
</tr>
<tr>
<td></td>
<td>Chico Family Health Center</td>
<td>$4,044,125</td>
<td>$6,780,556</td>
</tr>
<tr>
<td></td>
<td>Gridley Family Health Center</td>
<td>$479,233</td>
<td>$945,131</td>
</tr>
<tr>
<td></td>
<td>Oroville Family Health Center</td>
<td>$3,452,213</td>
<td>$5,376,411</td>
</tr>
<tr>
<td>Family HealthCare Network</td>
<td>FamilyHealthCareNetwork</td>
<td>$13,895,600</td>
<td>$22,408,116</td>
</tr>
<tr>
<td>Golden Valley Health Centers</td>
<td>Golden Valley Health Center - West Childs</td>
<td>$7,275,167</td>
<td>$10,611,174</td>
</tr>
<tr>
<td>Hill Country Community Clinic</td>
<td>Hill Country Community Clinic</td>
<td>$1,209,958</td>
<td>$2,940,493</td>
</tr>
<tr>
<td>La Maestra Family Clinic, Inc.</td>
<td>La Maestra Family Clinic - Fairmont</td>
<td>$10,075,920</td>
<td>$13,158,692</td>
</tr>
<tr>
<td>Lifelong Medical Care, Inc.</td>
<td>Over 60 Health Center</td>
<td>$2,987,460</td>
<td>$3,623,748</td>
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<tr>
<td>Mountain Valley Health Centers (2 sites)</td>
<td>Big Valley Medical Center</td>
<td>$559,477</td>
<td>$1,539,376</td>
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<tr>
<td></td>
<td>Butte Valley Health Center</td>
<td>$396,472</td>
<td>$972,802</td>
</tr>
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<td>Native American Health Center, Inc.</td>
<td>East Bay Native American Health Center</td>
<td>$6,586,664</td>
<td>$9,352,050</td>
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<tr>
<td>Petaluma Health Center</td>
<td>Petaluma Health Center</td>
<td>$4,756,121</td>
<td>$11,189,767</td>
</tr>
<tr>
<td>Salud Para La Gente</td>
<td>Salud Para La Gente</td>
<td>$6,588,541</td>
<td>$11,805,492</td>
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<td>Santa Rosa Community Health Centers</td>
<td>Southwest Community Health Center</td>
<td>$4,659,859</td>
<td>$8,566,642</td>
</tr>
<tr>
<td>St. John's Well Child and Family Center</td>
<td>St. John's Well Child and Family Center - Dr. Louis</td>
<td>$3,347,410</td>
<td>$4,770,581</td>
</tr>
<tr>
<td>United Health Center of the San Joaquin Valley (3 sites)</td>
<td>United Health Centers of SJV - Kerman</td>
<td>$3,239,116</td>
<td>$5,358,866</td>
</tr>
<tr>
<td></td>
<td>United Health Centers of SJV - Mendota</td>
<td>$3,894,116</td>
<td>$5,088,463</td>
</tr>
<tr>
<td></td>
<td>United Health Centers of SJV - Parlier</td>
<td>$3,266,273</td>
<td>$7,309,435</td>
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<tr>
<td>Valley Community Clinic</td>
<td>Valley Community Clinic</td>
<td>$3,341,581</td>
<td>$11,041,572</td>
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<tr>
<td>Valley Health Team, Inc.</td>
<td>San Joaquin Health Center</td>
<td>$2,197,743</td>
<td>$3,633,139</td>
</tr>
<tr>
<td>West Oakland Health Council, Inc.</td>
<td>East Oakland Health Center</td>
<td>$468,945</td>
<td>$1,998,134</td>
</tr>
</tbody>
</table>

**Footnotes:**

1. Data from OSHPD website (http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/PC_SC_UtUtilization.html). File: HID - 2012 Primary Care Clinic Annual Utilization Report (PCC12_Utl_Pivot.xlsm). Percentages were calculated from the file data.
2. Combined column reflects aggregate Medicare and Medi-Cal data within each facility. Total column refers to Gross Revenue reported from all payor sources.
### Hospitals
Medi-Cal Services Provided
Compared to
Medi-Cal Eligibles within Applicable County

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Patient Days</th>
<th>Discharges</th>
<th>O/P Visits</th>
<th>Gross Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chinese Hospital</td>
<td>8%</td>
<td>9%</td>
<td>17%</td>
<td>10%</td>
</tr>
<tr>
<td>Corcoran District Hospital</td>
<td>21%</td>
<td>26%</td>
<td>42%</td>
<td>27%</td>
</tr>
<tr>
<td>El Centro Regional Medical Center</td>
<td>28%</td>
<td>30%</td>
<td>48%</td>
<td>29%</td>
</tr>
<tr>
<td>Enloe Medical Center</td>
<td>15%</td>
<td>18%</td>
<td>17%</td>
<td>15%</td>
</tr>
<tr>
<td>Hazel Hawkins Memorial Hospital</td>
<td>69%</td>
<td>27%</td>
<td>35%</td>
<td>26%</td>
</tr>
<tr>
<td>Henry Mayo Newhall Memorial Hospital</td>
<td>12%</td>
<td>12%</td>
<td>14%</td>
<td>11%</td>
</tr>
<tr>
<td>Kern Valley Healthcare District</td>
<td>84%</td>
<td>35%</td>
<td>27%</td>
<td>39%</td>
</tr>
<tr>
<td>Lodi Memorial Hospital Association, Inc.</td>
<td>18%</td>
<td>23%</td>
<td>36%</td>
<td>20%</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>65%</td>
<td>22%</td>
<td>21%</td>
<td>25%</td>
</tr>
<tr>
<td>Marshall Medical Center</td>
<td>8%</td>
<td>9%</td>
<td>12%</td>
<td>12%</td>
</tr>
<tr>
<td>Mayers Memorial Hospital District</td>
<td>88%</td>
<td>36%</td>
<td>19%</td>
<td>38%</td>
</tr>
<tr>
<td>Mendocino Coast Health Care District</td>
<td>16%</td>
<td>19%</td>
<td>21%</td>
<td>14%</td>
</tr>
<tr>
<td>Mission Community Hospital</td>
<td>42%</td>
<td>39%</td>
<td>9%</td>
<td>27%</td>
</tr>
<tr>
<td>St. Rose Hospital</td>
<td>26%</td>
<td>27%</td>
<td>23%</td>
<td>31%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>County</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Francisco</td>
<td>16%</td>
</tr>
<tr>
<td>Kings</td>
<td>24%</td>
</tr>
<tr>
<td>Imperial</td>
<td>32%</td>
</tr>
<tr>
<td>Butte</td>
<td>23%</td>
</tr>
<tr>
<td>San Benito</td>
<td>18%</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>24%</td>
</tr>
<tr>
<td>Kern</td>
<td>28%</td>
</tr>
<tr>
<td>San Joaquin</td>
<td>26%</td>
</tr>
<tr>
<td>Santa Barbara</td>
<td>19%</td>
</tr>
<tr>
<td>El Dorado</td>
<td>10%</td>
</tr>
<tr>
<td>Shasta</td>
<td>23%</td>
</tr>
<tr>
<td>Mendocino</td>
<td>26%</td>
</tr>
<tr>
<td>Los Angeles</td>
<td>24%</td>
</tr>
<tr>
<td>Alameda</td>
<td>16%</td>
</tr>
</tbody>
</table>

Footnotes:

1. Medi-Cal Services Provided from the Medi-Cal Utilization Worksheet; refer to Exhibit VIII.
### Exhibit VIII

#### Hospitals

Medi-Cal Utilization

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Patient Days</th>
<th>Discharges</th>
<th>Outpatient Visits</th>
<th>Gross Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Medi-Cal</td>
<td>Total</td>
<td>Percent</td>
<td>Medi-Cal</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Percent</td>
<td>Total</td>
<td>Percent</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Percent</td>
<td>Total</td>
<td>Percent</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Percent</td>
<td>Total</td>
<td>Percent</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Percent</td>
<td>Total</td>
<td>Percent</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Percent</td>
<td>Total</td>
<td>Percent</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>Percent</td>
<td>Total</td>
<td>Percent</td>
</tr>
<tr>
<td>Chinese Hospital</td>
<td>815</td>
<td>10,424</td>
<td>8%</td>
<td>163</td>
</tr>
<tr>
<td>Corcoran District Hospital</td>
<td>337</td>
<td>1,623</td>
<td>21%</td>
<td>137</td>
</tr>
<tr>
<td>El Centro Regional Medical Center</td>
<td>7,306</td>
<td>26,115</td>
<td>28%</td>
<td>2,030</td>
</tr>
<tr>
<td>Enloe Medical Center</td>
<td>10,307</td>
<td>66,978</td>
<td>15%</td>
<td>2,690</td>
</tr>
<tr>
<td>Hazel Hawkins Memorial Hospital</td>
<td>29,986</td>
<td>43,740</td>
<td>69%</td>
<td>699</td>
</tr>
<tr>
<td>Henry Mayo Newhall Memorial Hospital</td>
<td>6,428</td>
<td>53,397</td>
<td>12%</td>
<td>1,414</td>
</tr>
<tr>
<td>Kern Valley Healthcare District</td>
<td>20,064</td>
<td>23,931</td>
<td>84%</td>
<td>298</td>
</tr>
<tr>
<td>Lodi Memorial Hospital Association, Inc.</td>
<td>5,516</td>
<td>30,271</td>
<td>18%</td>
<td>1,414</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>29,763</td>
<td>45,613</td>
<td>65%</td>
<td>624</td>
</tr>
<tr>
<td>Marshall Medical Center</td>
<td>2,085</td>
<td>25,654</td>
<td>8%</td>
<td>481</td>
</tr>
<tr>
<td>Mayers Memorial Hospital District</td>
<td>25,466</td>
<td>28,823</td>
<td>88%</td>
<td>167</td>
</tr>
<tr>
<td>Mendocino Coast Health Care District</td>
<td>759</td>
<td>4,729</td>
<td>16%</td>
<td>251</td>
</tr>
<tr>
<td>Mission Community Hospital</td>
<td>15,145</td>
<td>36,149</td>
<td>42%</td>
<td>2,858</td>
</tr>
<tr>
<td>St. Rose Hospital</td>
<td>7,765</td>
<td>29,855</td>
<td>26%</td>
<td>1,777</td>
</tr>
</tbody>
</table>

Footnotes:


Percentages were calculated from the file data.

2 Inpatient and outpatient gross revenue data were combined from the above source.

3 Total column refers to Total Patient Days, Discharges, Outpatient Visits, and Gross Revenue reported from all payor sources.
## Skilled Nursing Facilities
Medi-Cal Services Provided Compared to Medi-Cal Eligibles within Applicable County

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Gross Revenue¹</th>
<th>Medi-Cal</th>
<th>Percent</th>
<th>County</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian Community Skilled Nursing Facility</td>
<td>$4,651,418</td>
<td>$10,308,816</td>
<td>45%</td>
<td>Sacramento</td>
<td>22%</td>
</tr>
<tr>
<td>North Kern - South Tulare Hospital District</td>
<td>$9,262,216</td>
<td>$11,527,549</td>
<td>80%</td>
<td>Kern</td>
<td>28%</td>
</tr>
</tbody>
</table>

Footnotes:

¹ Data from OSHPD website (http://oshpd.ca.gov/HID/Products/LTC/AnnFinancialData/SelectedData/default.asp). File: HID - 2012 LTC Facilities Annual Financial Selected Data (Lafd1212.zip).

² Department of Health Care Services, Research & Analytics Studies Section, Medi-Cal Beneficiary Profiles by County, July 2012. Percentages calculated by dividing beneficiary data with county population figures from Department of Finance (E-1 County Population Estimates, 2013).
## Exhibit X

### Primary Care Clinics

Medi-Cal Services Provided Compared to Medi-Cal Eligibles within Applicable County

<table>
<thead>
<tr>
<th>Borrower Name</th>
<th>Facility Name</th>
<th>Medi-Cal Gross Revenue</th>
<th>Medi-Cal Eligibles</th>
</tr>
</thead>
<tbody>
<tr>
<td>AltaMed Health Services</td>
<td>AltaMed Medical Group - E.L.A./Whittier</td>
<td>$12,722,312</td>
<td>Los Angeles 24%</td>
</tr>
<tr>
<td>Asian Health Services, Inc.</td>
<td>Asian Health Service</td>
<td>$4,297,967</td>
<td>Alameda 16%</td>
</tr>
<tr>
<td>Centro de Salud de la Comunidad de San Ysidro (4 sites)</td>
<td>Chula Vista Family Clinic</td>
<td>$1,667,196</td>
<td>San Diego 14%</td>
</tr>
<tr>
<td></td>
<td>Otay Family Health Clinic</td>
<td>$1,835,146</td>
<td>San Diego 14%</td>
</tr>
<tr>
<td></td>
<td>Paradise Hills Family Clinic</td>
<td>$1,547,949</td>
<td>San Diego 14%</td>
</tr>
<tr>
<td></td>
<td>South Bay Family Health Center</td>
<td>$1,047,578</td>
<td>San Diego 14%</td>
</tr>
<tr>
<td>Clinicas del Camino Real, Inc. (2 sites)</td>
<td>Clinicas del Camino Real, Oxnard</td>
<td>$2,641,441</td>
<td>Ventura 15%</td>
</tr>
<tr>
<td></td>
<td>Clinicas del Camino Real, Ventura</td>
<td>$1,640,456</td>
<td>Ventura 15%</td>
</tr>
<tr>
<td>Community Health Centers of the Central Coast, Inc.</td>
<td>Nipomo Community Medical Center</td>
<td>$972,893</td>
<td>San Luis Obispo 12%</td>
</tr>
<tr>
<td>Community Health Systems, Inc.</td>
<td>Bloomington Community Health Center</td>
<td>$1,403,080</td>
<td>San Bernardino 23%</td>
</tr>
<tr>
<td>Community Medical Center, Inc.</td>
<td>Channel Medical Center</td>
<td>$5,862,144</td>
<td>San Joaquin 26%</td>
</tr>
<tr>
<td>Del Norte Clinics, Inc. - Ampla Health (4 sites)</td>
<td>Orland Family Health Center</td>
<td>$742,327</td>
<td>Glenn 25%</td>
</tr>
<tr>
<td></td>
<td>Chico Family Health Center</td>
<td>$2,823,252</td>
<td>Butte 23%</td>
</tr>
<tr>
<td></td>
<td>Gridley Family Health Center</td>
<td>$354,307</td>
<td>Butte 23%</td>
</tr>
<tr>
<td></td>
<td>Oroville Family Health Center</td>
<td>$2,509,177</td>
<td>Butte 23%</td>
</tr>
<tr>
<td>Family HealthCare Network</td>
<td>Family HealthCare Network</td>
<td>$12,540,063</td>
<td>Tulare 37%</td>
</tr>
<tr>
<td>Golden Valley Health Centers</td>
<td>Golden Valley Health Center - West Childs</td>
<td>$6,115,198</td>
<td>Merced 32%</td>
</tr>
<tr>
<td>Hill Country Community Clinic</td>
<td>Hill Country Community Clinic</td>
<td>$808,751</td>
<td>Shasta 23%</td>
</tr>
<tr>
<td>La Maestra Family Clinic, Inc.</td>
<td>La Maestra Family Clinic - Fairmont</td>
<td>$9,439,987</td>
<td>San Diego 14%</td>
</tr>
<tr>
<td>Lifelong Medical Care, Inc.</td>
<td>Over 60 Health Center</td>
<td>$608,382</td>
<td>Alameda 16%</td>
</tr>
<tr>
<td>Mountain Valley Health Centers (2 sites)</td>
<td>Big Valley Medical Center</td>
<td>$242,142</td>
<td>Lassen 15%</td>
</tr>
<tr>
<td></td>
<td>Butte Valley Health Center</td>
<td>$315,406</td>
<td>Siskiyou 24%</td>
</tr>
<tr>
<td>Native American Health Center, Inc.</td>
<td>East Bay Native American Health Center</td>
<td>$6,466,414</td>
<td>Alameda 16%</td>
</tr>
<tr>
<td>Petaluma Health Center</td>
<td>Petaluma Health Center</td>
<td>$3,571,393</td>
<td>Sonoma 13%</td>
</tr>
<tr>
<td>Salud Para La Gente</td>
<td>Salud Para La Gente</td>
<td>$6,371,911</td>
<td>Santa Cruz 16%</td>
</tr>
<tr>
<td>Santa Rosa Community Health Centers</td>
<td>Southwest Community Health Centers</td>
<td>$4,348,159</td>
<td>Sonoma 13%</td>
</tr>
<tr>
<td>St. John's Well Child and Family Center</td>
<td>St. John's Well Child and Family Center - Dr. Louis</td>
<td>$3,343,472</td>
<td>Los Angeles 24%</td>
</tr>
<tr>
<td>United Health Center of the San Joaquin Valley (3 sites)</td>
<td>United Health Centers of SJV - Kerman</td>
<td>$3,099,757</td>
<td>Fresno 33%</td>
</tr>
<tr>
<td></td>
<td>United Health Centers of SJV - Mendota</td>
<td>$3,826,403</td>
<td>Fresno 33%</td>
</tr>
<tr>
<td></td>
<td>United Health Centers of SJV - Parlier</td>
<td>$2,997,428</td>
<td>Fresno 33%</td>
</tr>
<tr>
<td>Valley Community Clinic</td>
<td>Valley Community Clinic</td>
<td>$3,097,186</td>
<td>Los Angeles 24%</td>
</tr>
<tr>
<td>Valley Health Team, Inc.</td>
<td>San Joaquin Health Center</td>
<td>$1,958,093</td>
<td>Fresno 33%</td>
</tr>
<tr>
<td>West Oakland Health Council, Inc.</td>
<td>East Oakland Health Center</td>
<td>$396,540</td>
<td>Alameda 16%</td>
</tr>
</tbody>
</table>

Footnotes:

1. Data from OSHPD website (http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/PC_SC_Utilization.html). File: HID - 2012 Primary Care Clinic Annual Utilization Report (PCC12_Util_Pivot.xlsm). Percentages were calculated from the file data.

2. Total column refers to Gross Revenue reported from all payor sources.

### Exhibit XI

#### Hospitals

Medicare Services Provided Compared to Medicare Beneficiaries within Applicable County

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Medicare Services Provided&lt;sup&gt;1&lt;/sup&gt;</th>
<th>Medicare Beneficiaries&lt;sup&gt;2&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Patient Days</td>
<td>Discharges</td>
</tr>
<tr>
<td>Chinese Hospital</td>
<td>86%</td>
<td>84%</td>
</tr>
<tr>
<td>Corcoran District Hospital</td>
<td>25%</td>
<td>27%</td>
</tr>
<tr>
<td>El Centro Regional Medical Center</td>
<td>52%</td>
<td>44%</td>
</tr>
<tr>
<td>Enloe Medical Center</td>
<td>60%</td>
<td>52%</td>
</tr>
<tr>
<td>Hazel Hawkins Memorial Hospital</td>
<td>22%</td>
<td>41%</td>
</tr>
<tr>
<td>Henry Mayo Newhall Memorial Hospital</td>
<td>49%</td>
<td>49%</td>
</tr>
<tr>
<td>Kern Valley Healthcare District</td>
<td>10%</td>
<td>53%</td>
</tr>
<tr>
<td>Lodi Memorial Hospital Association, Inc.</td>
<td>61%</td>
<td>53%</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>19%</td>
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Footnotes:

1. Medicare Services Provided from the Medicare Utilization Worksheet; refer to Exhibit XII.
### Exhibit XII

#### Hospitals

Medicare Utilization

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<th>Outpatient Visits</th>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>8,398</td>
<td>70,118</td>
<td>12%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>$314,642,302</td>
<td>$667,167,278</td>
<td>47%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Footnotes:

1 Data from OSHPD website (http://www.oshpd.ca.gov/HID/Products/Hospitals/AnnFinanData/PivotProfiles/default.asp). File: HID - 2012 OSHPD Hospital Annual Financial Data Profile (HAFD2012pivot.xls). Percentages were calculated from the file data.

2 Inpatient and outpatient gross revenue data were combined from the above source.

3 Total column refers to Total Patient Days, Discharges, Outpatient Visits, and Gross Revenue reported from all payor sources.
### Skilled Nursing Facilities

Medicare Services Provided Compared to Medicare Beneficiaries within Applicable County

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Gross Revenue</th>
<th>Medicare</th>
<th>Total</th>
<th>Percent</th>
<th>Medicare Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>County</td>
</tr>
<tr>
<td>Asian Community Skilled Nursing Facility</td>
<td>$ 3,086,363</td>
<td>$ 10,308,816</td>
<td>30%</td>
<td>Sacramento</td>
<td>14%</td>
</tr>
<tr>
<td>North Kern - South Tulare Hospital District</td>
<td>$ 1,760,503</td>
<td>$ 11,527,549</td>
<td>15%</td>
<td>Kern</td>
<td>11%</td>
</tr>
</tbody>
</table>

Footnotes:


## Exhibit XIV

**Primary Care Clinics**

Medicare Services Provided Compared to Medicare Beneficiaries within Applicable County

<table>
<thead>
<tr>
<th>Borrower Name</th>
<th>Facility Name</th>
<th>Gross Revenue</th>
<th>Medicare Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>AltaMed Health Services</td>
<td>AltaMed Medical Group - E.L.A./Whittier</td>
<td>$1,818,182</td>
<td>Los Angeles 12%</td>
</tr>
<tr>
<td>Asian Health Services, Inc.</td>
<td>Asian Health Service</td>
<td>$2,003,206</td>
<td>Alameda 13%</td>
</tr>
<tr>
<td>Centro de Salud de la Comunidad de San Ysidro (4 sites)</td>
<td>Chula Vista Family Clinic</td>
<td>$319,701</td>
<td>San Diego 13%</td>
</tr>
<tr>
<td></td>
<td>Otay Family Health Clinic</td>
<td>$252,620</td>
<td>San Diego 13%</td>
</tr>
<tr>
<td></td>
<td>Paradise Hills Family Clinic</td>
<td>$135,654</td>
<td>San Diego 13%</td>
</tr>
<tr>
<td></td>
<td>South Bay Family Health Center</td>
<td>$72,945</td>
<td>San Diego 13%</td>
</tr>
<tr>
<td>Clinicas del Camino Real, Inc. (2 sites)</td>
<td>Clinicas del Camino Real, Oxnard</td>
<td>$352,535</td>
<td>Ventura 14%</td>
</tr>
<tr>
<td></td>
<td>Clinicas del Camino Real, Ventura</td>
<td>$284,055</td>
<td>Ventura 14%</td>
</tr>
<tr>
<td>Community Health Centers of the Central Coast, Inc.</td>
<td>Nipomo Community Medical Center</td>
<td>$376,185</td>
<td>San Luis Obispo 18%</td>
</tr>
<tr>
<td>Community Health Systems, Inc.</td>
<td>Bloomington Community Health Center</td>
<td>$133,486</td>
<td>San Bernardino 11%</td>
</tr>
<tr>
<td>Community Medical Center, Inc.</td>
<td>Channel Medical Center</td>
<td>$935,948</td>
<td>San Joaquin 13%</td>
</tr>
<tr>
<td>Del Norte Clinics, Inc. - Ampla Health (4 sites)</td>
<td>Orland Family Health Center</td>
<td>$117,670</td>
<td>Glenn 17%</td>
</tr>
<tr>
<td></td>
<td>Chico Family Health Center</td>
<td>$1,220,873</td>
<td>Butte 20%</td>
</tr>
<tr>
<td></td>
<td>Gridley Family Health Center</td>
<td>$124,926</td>
<td>Butte 20%</td>
</tr>
<tr>
<td></td>
<td>Oroville Family Health Center</td>
<td>$943,036</td>
<td>Butte 20%</td>
</tr>
<tr>
<td>Family HealthCare Network</td>
<td>Family HealthCare Network</td>
<td>$1,355,537</td>
<td>Tulare 12%</td>
</tr>
<tr>
<td>Golden Valley Health Centers</td>
<td>Golden Valley Health Centers - West Childs</td>
<td>$1,159,969</td>
<td>Merced 12%</td>
</tr>
<tr>
<td>Hill Country Community Clinic</td>
<td>Hill Country Community Clinic</td>
<td>$401,207</td>
<td>Shasta 23%</td>
</tr>
<tr>
<td>La Maestra Family Clinic, Inc.</td>
<td>La Maestra Family Clinic - Fairmont</td>
<td>$635,933</td>
<td>San Diego 13%</td>
</tr>
<tr>
<td>Lifelong Medical Care, Inc.</td>
<td>Over 60 Health Center</td>
<td>$2,379,078</td>
<td>Alameda 13%</td>
</tr>
<tr>
<td>Mountain Valley Health Centers (2 sites)</td>
<td>Big Valley Medical Center</td>
<td>$317,335</td>
<td>Lassen 13%</td>
</tr>
<tr>
<td></td>
<td>Butte Valley Health Center</td>
<td>$81,066</td>
<td>Siskiyou 25%</td>
</tr>
<tr>
<td>Native American Health Center, Inc.</td>
<td>East Bay Native American Health Center</td>
<td>$120,250</td>
<td>Alameda 13%</td>
</tr>
<tr>
<td>Petaluma Health Center</td>
<td>Petaluma Health Center</td>
<td>$1,184,728</td>
<td>Sonoma 17%</td>
</tr>
<tr>
<td>Salud Para La Gente</td>
<td>Salud Para La Gente</td>
<td>$216,630</td>
<td>Santa Cruz 14%</td>
</tr>
<tr>
<td>Santa Rosa Community Health Centers</td>
<td>Southwest Community Health Centers</td>
<td>$311,700</td>
<td>Sonoma 17%</td>
</tr>
<tr>
<td>St. John's Well Child and Family Center</td>
<td>St. John's Well Child and Family Center - Dr. Louis</td>
<td>$3,938</td>
<td>Los Angeles 12%</td>
</tr>
<tr>
<td>United Health Center of the San Joaquin Valley (3 sites)</td>
<td>United Health Centers of SJV - Kerman</td>
<td>$139,359</td>
<td>Fresno 12%</td>
</tr>
<tr>
<td></td>
<td>United Health Centers of SJV - Mendota</td>
<td>$67,713</td>
<td>Fresno 12%</td>
</tr>
<tr>
<td></td>
<td>United Health Centers of SJV - Parlier</td>
<td>$268,845</td>
<td>Fresno 12%</td>
</tr>
<tr>
<td>Valley Community Clinic</td>
<td>Valley Community Clinic</td>
<td>$244,395</td>
<td>Los Angeles 12%</td>
</tr>
<tr>
<td>Valley Health Team, Inc.</td>
<td>San Joaquin Health Center</td>
<td>$239,650</td>
<td>Fresno 12%</td>
</tr>
<tr>
<td>West Oakland Health Council, Inc.</td>
<td>East Oakland Health Center</td>
<td>$72,405</td>
<td>Alameda 13%</td>
</tr>
</tbody>
</table>

Footnotes:

1. Data from OSHPD website (http://www.oshpd.ca.gov/hid/Products/Hospitals/Utilization/PC_SC_Utilization.html). File: HID - 2012 Primary Care Clinic Annual Utilization Report (PCC12_Util_Pivot.xlsm). Percentages were calculated from the file data.
2. Total column refers to Gross Revenue reported from all payor sources.
## Exhibit XV

### Hospital Listing

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chinese Hospital</td>
<td>San Francisco</td>
</tr>
<tr>
<td>Corcoran District Hospital</td>
<td>Corcoran</td>
</tr>
<tr>
<td>El Centro Regional Medical Center</td>
<td>El Centro</td>
</tr>
<tr>
<td>Enloe Medical Center</td>
<td>Chico</td>
</tr>
<tr>
<td>Hazel Hawkins Memorial Hospital (San Benito Health Care District)</td>
<td>Hollister</td>
</tr>
<tr>
<td>Henry Mayo Newhall Memorial Hospital</td>
<td>Valencia</td>
</tr>
<tr>
<td>Kern Valley Healthcare District</td>
<td>Mountain Mesa</td>
</tr>
<tr>
<td>Lodi Memorial Hospital Association, Inc.</td>
<td>Lodi</td>
</tr>
<tr>
<td>Lompoc District Hospital</td>
<td>Lompoc</td>
</tr>
<tr>
<td>Marshall Medical Center</td>
<td>Placerville</td>
</tr>
<tr>
<td>Mayers Memorial Hospital District</td>
<td>Fall River Mills</td>
</tr>
<tr>
<td>Mendocino Coast Health Care District</td>
<td>Fort Bragg</td>
</tr>
<tr>
<td>Mission Community Hospital (San Fernando Community Hospital)</td>
<td>Panorama City</td>
</tr>
<tr>
<td>St. Rose Hospital</td>
<td>Hayward</td>
</tr>
</tbody>
</table>
Additional copies of this report may be obtained by contacting:

Office of Statewide Health Planning and Development
Cal-Mortgage Loan Insurance Division
400 R Street, Suite 470
Sacramento, CA 95811
(916) 319-8800 FAX (916) 445-2837
E-mail: cminsure@oshpd.ca.gov