REPORT ON THE AUDIT OF
RATE DEVELOPMENT SCHEDULES

PIONEERS MEMORIAL HEALTHCARE DISTRICT
BRAWLEY, CALIFORNIA
NATIONAL PROVIDER IDENTIFIER: 1073519443

FISCAL PERIOD ENDED
JUNE 30, 2009

Audits Section—San Diego
Financial Audits Branch
Audits and Investigations
Department of Health Care Services

Section Chief: Patricia M. Fox
Audit Supervisor: Sergio Gonzalez
Auditor: Jing H. Zhang

State of California—Health and Human Services Agency
Department of Health Care Services

TOBY DOUGLAS
DIRECTOR

EDMUND G. BROWN JR.
GOVERNOR

May 11, 2012

Administrator
Pioneers Memorial Healthcare District
207 West Legion Road
Brawley, CA 92227

PIONEERS MEMORIAL HEALTHCARE DISTRICT
NATIONAL PROVIDER IDENTIFIER (NPI) 1073519443
FISCAL PERIOD ENDED JUNE 30, 2009

We have examined the Rate Development Schedules for the above-referenced fiscal period. Our examination was made under the authority of Section 14170 of the Welfare and Institutions Code. The data for the schedules was obtained from provider records during a field audit.

In our opinion, the audited data presented in the Rate Development Schedules represents a proper determination of audited cost, patient days, and direct labor cost in accordance with applicable programs.

This audit report includes the:

1. Rate Development Schedules
2. Audit Adjustments Schedule
3. Medi-Cal Discharges

The results of this examination may be used to determine the Medi-Cal Peer Grouping Inpatient Reimbursement Limitation (PIRL) rate calculations. This will be determined by the Benefits, Waiver Analysis and Rates Division pursuant to California Code of Regulations (CCR), Title 22, Sections 51545 through 51556. These regulations may be viewed at www.oal.ca.gov.

Financial Audits Branch/Audits Section—San Diego
7575 Metropolitan Drive, Suite 102, San Diego, CA 92108-4421
(619) 688-3200/(619) 688-3218 fax
Internet Address: www.dhcs.ca.gov

If you disagree with the decision of the Department, you may appeal by writing to:

Chief
Department of Health Care Services
Office of Administrative Hearings and Appeals
1029 J Street, Suite 200
Sacramento, CA 95814
(916) 322-5603
The written notice of disagreement must be received by the Department within 60 calendar days from the day you receive this letter. A copy of this notice should be sent to:

United States Postal Service (USPS)
Assistant Chief Counsel
Department of Health Care Services
Office of Legal Services
MS 0010
PO Box 997413
Sacramento, CA 95899

Courier (UPS, FedEx, etc.)
Assistant Chief Counsel
Department of Health Care Services
Office of Legal Services
MS 0010
1501 Capitol Avenue, Suite 71.5001
Sacramento, CA 95814
(916) 440-7700

The procedures that govern an appeal are contained in Welfare and Institutions Code, Section 14171, and California Code of Regulations, Title 22, Section 51016, et seq.

If you have questions regarding this report, you may call the Audits Section—San Diego at (619) 688-3200.

Originally Signed by:

Patricia M. Fox, Chief
Audits Section—San Diego
Financial Audits Branch

Certified

RATE DEVELOPMENT SCHEDULES

PROVIDER NAME	**PIONEERS MEMORIAL HEALTHCARE DISTRICT**
NPI	**1073519443**
FISCAL PERIOD	**JULY 1, 2008 THROUGH JUNE 30, 2009**
CONTRACT PERIOD	**N/A**

ACUTE CARE ONLY*	Noncontract Cost Services	Medi-Cal For Contract Services	Medi-Cal Total For Fiscal Period
A. Medi-Cal Net Cost of Covered** Services Plus Hospital-Based Physician Costs, Excluding Return on Equity (Schedule 1, Line 1) (Adj 1)	$ 14,750,286	$	$ 14,750,286
B. Deductibles and Coinsurance (Third Party Liability) (Schedule 3, Lines 9 and 10) (Adj 2)	$ 145,070	$	$ 145,070
C. Medi-Cal Inpatient Days (Adjs 3-7) (Schedules 4 and 4A)			
1. Routine (Adults and Pediatrics)	3,612.75		3,612.75
2. ICU	693.00		693.00
3. CCU			
4. Level II Nursery	248.00		248.00
5. NICU	0.00		0.00
6. Other (Specify)			
a. LDRP	2,100.75		2,100.75
b.			
D. Total Hospital Discharges***	N/A	N/A	5,511
E. Total Medi-Cal Discharges*** (Adj 8)	2,088		2,088
F. Total Medi-Cal Inpatient Charges (Schedule 2, Line 4) (Adj 9)	$ 38,158,419	$	$ 38,158,419

* Data for NF or Administrative Days are not included.

** The Audited Net Cost of Covered Services is Net of Deductibles and Coinsurance and is from a source different than used on the filed report.

*** Data for newborns that were born in the hospital are not included.

RATE DEVELOPMENT SCHEDULES

PROVIDER NAME	**PIONEERS MEMORIAL HEALTHCARE DISTRICT**
NPI	**1073519443**
FISCAL PERIOD	**JULY 1, 2008 THROUGH JUNE 30, 2009**
CONTRACT PERIOD	**N/A**

	REFERENCE		
A. EXPENSE PASS-THROUGH DATA			
1. Depreciation Expense: (Adj 10)	8810 - 8813, and/or .71, .72, .73 and .74	$	3,762,599
2. Rent and Lease Expense:	8820-8822, and/or .75 and .76	$	661,376
3. Interest Expense:	8860, 8870	$	1,401,146
4. Property Taxes and License Fees: (Adj 11)	8850 and/or .83	$	115,844
5. Utility Expense: (Adj 12)	.77, .78, .79, and .80	$	1,336,349
6. Malpractice Insurance Expense:	8830 and/or .81	$	1,393,878
B. GROSS OPERATING EXPENSES (Adj 13)	Sch 10, line 101, col. 3	$	72,195,597
C. STUDENT AND PHYSICIANS COMPENSATION			
1. Salaries and Wages (include benefits) (Adj 14)	.07, 8210.09 - 8290.09	$	269,709
2. Professional Fees	.20	$	3,208,270
D. PHARMACY NONLABOR EXPENSE (Adj 15)	8390.37 and 8390.38	$	2,366,228
E. FOOD SERVICES NONLABOR EXPENSE (Adj 16)	8320, 8330 and 8340 and/or .42 and .43	$	547,358
F. DIRECT OPERATING COSTS			
1. Salaries and Wages (Adj 17)	.00 - .09, .91, .95	$	26,172,970
2. Employee Benefits (Adj 18)	.10 - .19, .92, .96	$	11,432,486
3. Other Professional Fees	.21 - .29	$	438,548
4. Purchased Services (Adj 19)	.61 - .69	$	11,429,254
5. Supplies (Adj 20)	.31 - .36, .39 - .41 .44 - .50, .93, .97	$	10,057,387
6. Other Direct Operating Expense (Adj 21)	.85 - .90	$	1,223,379

RATE DEVELOPMENT SCHEDULES

PROVIDER NAME	**PIONEERS MEMORIAL HEALTHCARE DISTRICT**
NPI	**1073519443**
FISCAL PERIOD	**JULY 1, 2008 THROUGH JUNE 30, 2009**
CONTRACT PERIOD	**N/A**

A. DIRECT PAYROLL COSTS (Totals)	REFERENCE		
1. Management and Supervision			
a. Productive Salaries	.00	$	5,122,633
b. Productive Hours			121,385.00
2. Technicians and Specialists			
a. Productive Salaries	.01	$	5,048,570
b. Productive Hours			171,249.00
3. Registered Nurses			
a. Productive Salaries	.02	$	8,795,097
b. Productive Hours			236,763.00
4. Licensed Vocational Nurses			
a. Productive Salaries	.03	$	442,442
b. Productive Hours			20,132.00
5. Aides and Orderlies			
a. Productive Salaries	.04	$	1,648,729
b. Productive Hours			126,579.00
6. Physicians (Salaried)			
a. Productive Salaries	.07	$	269,709
b. Productive Hours			3,376.00
7. Nonphysician Medical Practitioners			
a. Productive Salaries	.08	$	204,174
b. Productive Hours			3,690.00
8. Environmental and Food Services			
a. Productive Salaries	.06	$	1,377,581
b. Productive Hours			110,950.00
9. Clerical and Other Administrative			
a. Productive Salaries	.05	$	3,102,334
b. Productive Hours			202,566.00
10. Other Salaries and Wages			
a. Productive Salaries	.09	$	161,701
b. Productive Hours			4,586.00
11. All Nonproductive Salaries and Wages			
a. Nonproductive Salaries	Labor Distribution	$	3,235,492
b. Nonproductive Hours	Report or Provider W/P		136,227.00
B. SUBTOTAL DIRECT PAYROLL COST			
1. Productive Salaries (lines A1a - A10a)		$	26,172,970
2. Productive Hours (lines A1b - A10b)			1,001,276.00
C. TOTAL PRODUCTIVE AND NONPRODUCTIVE SALARIES (A11a + B1)		$	29,408,462
D. TOTAL PRODUCTIVE AND NONPRODUCTIVE HOURS (A11b + B2)			1,137,503.00

Provider Name	Fiscal Period	NPI	Adjustments
PIONEERS MEMORIAL HEALTHCARE DISTRICT	JULY 1, 2008 THROUGH JUNE 30, 2009	1073519443	21

Report References							
Adj. No.	Audit Report Page	RD Schedule Page	RD Schedule Line	Explanation of Audit Adjustments	Reported	Increase (Decrease)	Adjusted
				ADJUSTMENTS TO RATE DEVELOPMENT SCHEDULES			
1	1	3	A	Medi-Cal Net Cost of Covered Services—Noncontract	$ 14,136,903	$ 613,383	$ 14,750,286
	1	3	A	Medi-Cal Net Cost of Covered Services—Contract	$	$	$
2	1	3	B	Deductibles and Coinsurance—Noncontract	$ 109,997	$ 35,073	$ 145,070
	1	3	B	Deductibles and Coinsurance—Contract	$	$	$
3	1	3	C 1	Medi-Cal Inpatient Days—Adults and Pediatrics—Noncontract	3,322.00	290.75	3,612.75
	1	3	C 1	Medi-Cal Inpatient Days—Adults and Pediatrics—Contract			
4	1	3	C 2	Medi-Cal Inpatient Days—ICU—Noncontract	591.00	102.00	693.00
	1	3	C 2	Medi-Cal Inpatient Days—ICU—Contract			
	1	3	C 3	Medi-Cal Inpatient Days—CCU—Noncontract			
	1	3	C 3	Medi-Cal Inpatient Days—CCU—Contract			
5	1	3	C 4	Medi-Cal Inpatient Days—Level II Nursery—Noncontract	0.00	248.00	248.00
	1	3	C 4	Medi-Cal Inpatient Days—Level II Nursery—Contract			
6	1	3	C 5	Medi-Cal Inpatient Days—NICU—Noncontract	231.00	(231.00)	0.00
	1	3	C 5	Medi-Cal Inpatient Days—NICU—Contract			
7	1	3	C 6 a	Medi-Cal Inpatient Days—LDRP—Noncontract	2,083.00	17.75	2,100.75
	1	3	C 6 a	Medi-Cal Inpatient Days—LDRP—Contract			
	1	3	C 6 b	Medi-Cal Inpatient Days—_____ Noncontract			
	1	3	C 6 b	Medi-Cal Inpatient Days—_____ Contract			

Provider Name	Fiscal Period	NPI	Adjustments
PIONEERS MEMORIAL HEALTHCARE DISTRICT	JULY 1, 2008 THROUGH JUNE 30, 2009	1073519443	21

Report References							
Adj. No.	Audit Report Page	RD Schedule Page	RD Schedule Line	Explanation of Audit Adjustments	Reported	Increase (Decrease)	Adjusted
	1	3	D	Total Hospital Discharges			
8	1	3	E	Total Medi-Cal Discharges—Acute—Noncontract	2,208	(120)	2,088
	1	3	E	Total Medi-Cal Discharges—Acute—Contract			
9	1	3	F	Total Medi-Cal Inpatient Charges—Noncontract	$ 33,501,029	$ 4,657,390	$ 38,158,419
	1	3	F	Total Medi-Cal Inpatient Charges—Contract	$	$	$
10	2	4	A 1	Depreciation Expense	$ 3,811,234	$ (48,635)	$ 3,762,599
	2	4	A 2	Rent and Lease Expense	$	$	$
	2	4	A 3	Interest Expense	$	$	$
11	2	4	A 4	Property Taxes and License Fees	$ 86,922	$ 28,922	$ 115,844
12	2	4	A 5	Utility Expense	$ 1,198,738	$ 137,611	$ 1,336,349
	2	4	A 6	Malpractice Insurance Expense	$	$	$
13	2	4	B	Gross Operating Expenses	$ 76,265,273	$ (4,069,676)	$ 72,195,597
14	2	4	C 1	Student and Physicians Compensation—Salaries and Wages	$ 37,605,455	$ (37,335,746)	$ 269,709
	2	4	C 2	Student and Physicians Compensation—Professional Fees	$	$	$
15	2	4	D	Pharmacy Nonlabor Expense	$ 2,355,720	$ 10,508	$ 2,366,228

Provider Name	Fiscal Period	NPI	Adjustments
PIONEERS MEMORIAL HEALTHCARE DISTRICT	JULY 1, 2008 THROUGH JUNE 30, 2009	1073519443	21

Report References							
Adj. No.	Audit Report Page	RD Schedule Page	RD Schedule Line	Explanation of Audit Adjustments	Reported	Increase (Decrease)	Adjusted
16	2	4	E	Food Services Nonlabor Expense	$ 832,594	$ (285,236)	$ 547,358
17	2	4	F 1	Direct Operating—Salaries and Wages	$ 29,328,354	$ (3,155,384)	$ 26,172,970
18	2	4	F 2	Direct Operating—Employee Benefits	$ 8,277,101	$ 3,155,385	$ 11,432,486
	2	4	F 3	Direct Operating—Other Professional Fees	$	$	$
19	2	4	F 4	Direct Operating—Purchased Services	$ 6,665,512	$ 4,763,742	$ 11,429,254
20	2	4	F 5	Direct Operating—Supplies	$ 12,656,228	$ (2,598,841)	$ 10,057,387
21	2	4	F 6	Direct Operating—Other Direct Operating Expense	$ 0	$ 1,223,379	$ 1,223,379
	3	5	A 1 a	Management and Supervision—Productive Salaries	$	$	$
	3	5	A 1 b	Management and Supervision—Productive Hours			
	3	5	A 2 a	Technicians and Specialists—Productive Salaries	$	$	$
	3	5	A 2 b	Technicians and Specialists—Productive Hours			
	3	5	A 3 a	Registered Nurses—Productive Salaries	$	$	$
	3	5	A 3 b	Registered Nurses—Productive Hours			
	3	5	A 4 a	Licensed Vocational Nurses—Productive Salaries	$	$	$
	3	5	A 4 b	Licensed Vocational Nurses—Productive Hours			
	3	5	A 5 a	Aides and Orderlies—Productive Salaries	$	$	$
	3	5	A 5 b	Aides and Orderlies—Productive Hours			

Provider Name	Fiscal Period	NPI	Adjustments
PIONEERS MEMORIAL HEALTHCARE DISTRICT	JULY 1, 2008 THROUGH JUNE 30, 2009	1073519443	21

Report References							
Adj. No.	Audit Report Page	RD Schedule Page	RD Schedule Line	Explanation of Audit Adjustments	Reported	Increase (Decrease)	Adjusted
	3	5	A 6 a	Physicians (Salaried)—Productive Salaries	$	$	$
	3	5	A 6 b	Physicians (Salaried)—Productive Hours			
	3	5	A 7 a	Nonphysician Medical Practitioners—Productive Salaries	$	$	$
	3	5	A 7 b	Nonphysician Medical Practitioners—Productive Hours			
	3	5	A 8 a	Environmental and Food Services—Productive Salaries	$	$	$
	3	5	A 8 b	Environmental and Food Services—Productive Hours			
	3	5	A 9 a	Clerical and Other Administrative—Productive Salaries	$	$	$
	3	5	A 9 b	Clerical and Other Administrative—Productive Hours			
	3	5	A 10 a	Other Salaries and Wages—Productive Salaries	$	$	$
	3	5	A 10 b	Other Salaries and Wages—Productive Hours			
	3	5	A 11	Nonproductive Salaries and Wages	$	$	$
	3	5	A 11	Nonproductive Hours			
	3	5	B 1	Subtotal Productive Salaries	$	$	$
	3	5	B 2	Subtotal Productive Hours			
	3	5	C	Total Productive and Nonproductive Salaries	$	$	$
	3	5	D	Total Productive and Nonproductive Hours			

To adjust the Rate Development Schedules to agree with audit adjustments and/or provider records.
CCR, Title 22, Section 51536

MEDI-CAL DISCHARGES

PROVIDER NAME	NPI	FPE
PIONEERS MEMORIAL HEALTHCARE DISTRICT	1073519443	JUNE 30, 2009

MONTH/YR	RUN PAGE NUMBER	TOTAL LINES	ADJUSTMENTS						ADJUSTED TOTAL
			NURSERY	DB & CR ENTRIES	ZERO DAYS	30 & 31 CODES	"V" CODE	OTHER* (EXPLAIN)	
07/08	1	21		12			2		7
07/08	2	24	1	11			6		6
07/08	3	24	2	15		1			6
07/08	4	24		15					9
07/08	5	24		16		1			7
07/08	6	24		16		2			6
07/08	7	24	1	16					7
07/08	8	24	1	16					7
07/08	9	24	1	14			4		5
07/08	10	24		16		1			7
07/08	11	24		12			4		8
07/08	12	24		17					7
07/08	13	24		15			2		7
07/08	14	24		14			2		8
07/08	15	24		16					8
07/08	16	24	0	16		1			7
07/08	17	24	2	16		1			5
07/08	18	24		16					8
07/08	19	24		16					8
07/08	20	24	2	14					8
07/08	21	24		17		1			6
07/08	22	24		16		1			7
08/08	23	24		16					8
08/08	24	24		15		1			8
08/08	25	24		16		2			6
08/08	26	24		15			2		7
08/08	27	24	1	16					7
08/08	28	24		16					8
08/08	29	24		16					8
08/08	30	24		16					8
08/08	31	24		16					8
08/08	32	24		15		2			7
08/08	33	24		15					9
08/08	34	24		15			2		7
08/08	35	24		14			2		8
08/08	36	24	2	14			2		6
08/08	37	24		16					8
08/08	38	24		16					8
08/08	39	24	1	14			2		7
08/08	40	24		17					7
08/08	41	24		15			2		7
08/08	42	24		14		1	2		7
08/08	43	24		15			2		7
09/08	44	24		14			2		8
09/08	45	24		16		1			7
09/08	46	24		15			2		7
09/08	47	24		14		1	2		7
09/08	48	24		14		0	4		6
09/08	49	24	1	16		2			5

MEDI-CAL DISCHARGES

PROVIDER NAME	NPI	FPE
PIONEERS MEMORIAL HEALTHCARE DISTRICT	1073519443	JUNE 30, 2009

MONTH/YR	RUN PAGE NUMBER	TOTAL LINES	ADJUSTMENTS						ADJUSTED TOTAL
			NURSERY	DB & CR ENTRIES	ZERO DAYS	30 & 31 CODES	"V" CODE	OTHER* (EXPLAIN)	
09/08	50	24	2	15		1			6
09/08	51	24		15		1			8
09/08	52	24		16		0			8
09/08	53	24		16		1			7
09/08	54	24	1	16					7
09/08	55	24	0	14		1	2		7
09/08	56	24	1	16		0	2		5
09/08	57	24		16		2			6
09/08	58	24		12			6		6
09/08	59	24		12			6		6
09/08	60	24		13			4		7
09/08	61	24		13		1	4		6
09/08	62	24	0	15		3			6
09/08	63	24	2	15					7
09/08	64	24	2	16					6
09/08	65	24		16					8
09/08	66	24		14					10
09/08	67	24		13			4		7
09/08	68	24		14		1	2		7
09/08	69	24		16			2		6
09/08	70	24		16					8
09/08	71	24	1	13		2			8
10/08	72	24	0	14			4		6
10/08	73	24	1	15		1			7
10/08	74	24		13	0	3			8
10/08	75	24		15		1	2		6
10/08	76	24	1	16		1			6
10/08	77	24		14					10
10/08	78	24		15			2		7
10/08	79	24		16					8
10/08	80	24		16					8
10/08	81	24		14			2		8
10/08	82	24		16		1			7
10/08	83	24		16		2			6
10/08	84	24		16		1			7
10/08	85	24		16		1			7
10/08	86	24		16					8
10/08	87	24		14			2		8
10/08	88	24		17					7
10/08	89	24		16		1			7
10/08	90	24		16		1			7
10/08	91	24	2	14			1		7
10/08	92	24		13		2	4		5
10/08	93	24		12		1	4		7
10/08	94	24		16		1			7
10/08	95	24	2	12			4		6
10/08	96	24		15			2		7
10/08	97	24	1	14					9
11/08	98	24		16					8

MEDI-CAL DISCHARGES

PROVIDER NAME	NPI	FPE
PIONEERS MEMORIAL HEALTHCARE DISTRICT	1073519443	JUNE 30, 2009

MONTH/YR	RUN PAGE NUMBER	TOTAL LINES	ADJUSTMENTS						ADJUSTED TOTAL
			NURSERY	DB & CR ENTRIES	ZERO DAYS	30 & 31 CODES	"V" CODE	OTHER* (EXPLAIN)	
11/08	99	24		16		1			7
11/08	100	24		15					9
11/08	101	24	1	16					7
11/08	102	24		16		1			7
11/08	103	24		16		0			8
11/08	104	24		15		2			7
11/08	105	24	1	15		2			6
11/08	106	24		14			2		8
11/08	107	24		16		2			6
11/08	108	24		15			2		7
11/08	109	24	1	15			2		6
11/08	110	24		16					8
11/08	111	24	1	12			2		9
11/08	112	24	2	14			3		5
11/08	113	24		12			4		8
11/08	114	24		14			2		8
11/08	115	24		14		1	2		7
11/08	116	24		14			2		8
11/08	117	24	1	14		2			7
12/08	118	24		12			4		8
12/08	119	24		15		2			7
12/08	120	24		13			2		9
12/08	121	24		14		1	2		7
12/08	122	24		15					9
12/08	123	24		15					9
12/08	124	24	1	14		0			9
12/08	125	24		16		2			6
12/08	126	24		16					8
12/08	127	24		15					9
12/08	128	24	1	15		2	2		4
12/08	129	24	1	12			2		9
12/08	130	24		15					9
12/08	131	24	1	15					8
12/08	132	24		14			2		8
12/08	133	24		12			6		6
12/08	134	24		14		1	2		7
12/08	135	24	1	11			4		8
12/08	136	24		14			2		8
12/08	137	24		14			2		8
12/08	138	24		12		3	2		7
12/08	139	24	1	15					8
12/08	140	24	1	14		1			8
12/08	141	24		15					9
12/08	142	24	1	13			4		6
12/08	143	24		14			2		8
01/09	144	24		14			2		8
01/09	145	24		15			2		7
01/09	146	24	1	15					8
01/09	147	24		14					10

MEDI-CAL DISCHARGES

PROVIDER NAME	NPI	FPE
PIONEERS MEMORIAL HEALTHCARE DISTRICT	1073519443	JUNE 30, 2009

MONTH/YR	RUN PAGE NUMBER	TOTAL LINES	ADJUSTMENTS						ADJUSTED TOTAL
			NURSERY	DB & CR ENTRIES	ZERO DAYS	30 & 31 CODES	"V" CODE	OTHER* (EXPLAIN)	
01/09	148	24		16		1			7
01/09	149	24		14		1		1	8
01/09	150	24		14					10
01/09	151	24		12			4		8
01/09	152	24	1	14			4		5
01/09	153	24		14					10
01/09	154	24	1	12					11
01/09	155	24		15					9
01/09	156	24	1	9			4		10
01/09	157	24		12			4		8
01/09	158	24		12			4		8
01/09	159	24		12		1	2		9
01/09	160	24		14					10
01/09	161	24		15					9
01/09	162	24	1	10		2			11
01/09	163	24		13		1			10
01/09	164	24		13					11
01/09	165	24		10		3		1	10
02/09	166	24		8		1	4		11
02/09	167	24	1	7		2	4		10
02/09	168	24	1	9					14
02/09	169	24	1	10		2	2	1	8
02/09	170	24		10		1			13
02/09	171	24		7			2		15
02/09	172	24		12					12
02/09	173	24		12					12
02/09	174	24	2	9		3			10
02/09	175	24		8			4		12
02/09	176	24		11					13
02/09	177	24		9		1	2		12
02/09	178	24		10		1	4		9
02/09	179	24	2	7			5		10
02/09	180	24		10		1			13
03/09	181	24		12					12
03/09	182	24	1	10		1	2		10
03/09	183	24		9			2		13
03/09	184	24		8		2			14
03/09	185	24	2	11					11
03/09	186	24		10			2		12
03/09	187	24		11		1	2		10
03/09	188	24		2			12		10
03/09	189	24	1	6		1	2		14
03/09	190	24		13					11
03/09	191	24		15					9
03/09	192	24		10					14
03/09	193	24		4			2		18
04/09	194	24					2		22
04/09	195	24	2						22
04/09	196	24					2		22

MEDI-CAL DISCHARGES

PROVIDER NAME	NPI	FPE
PIONEERS MEMORIAL HEALTHCARE DISTRICT	1073519443	JUNE 30, 2009

MONTH/YR	RUN PAGE NUMBER	TOTAL LINES	ADJUSTMENTS						ADJUSTED TOTAL
			NURSERY	DB & CR ENTRIES	ZERO DAYS	30 & 31 CODES	"V" CODE	OTHER* (EXPLAIN)	
04/09	197	24							24
04/09	198	24							24
04/09	199	24	2						22
04/09	200	24					2		22
04/09	201	24				1	4		19
05/09	202	24	2				2		20
05/09	203	24					2		22
05/09	204	24		2		1			21
05/09	205	24				2			22
05/09	206	24					2		22
05/09	207	24					4		20
05/09	208	24	1				4		19
05/09	209	24	1			1	2		20
06/09	210	24	2			1	4		17
06/09	211	24	1				2		21
06/09	212	24	1						23
06/09	213	24				1	4		19
06/09	214	24	1			1	2		20
06/09	215	24	1				2		21
06/09	216	24						1	23
06/09	217	24	2	2		4	4		12
06/09	218	24	0				1		23
06/09	219	1							1
TOTALS			**78**	**2,664**	**0**	**110**	**286**	**4**	**2,088**

* Administrative Days and Zero Paid Days