

**REPORT  
ON THE  
COST REPORT REVIEW**

**UCSF MEDICAL CENTER  
SAN FRANCISCO, CALIFORNIA  
PROVIDER NUMBER: HSC/ZZR00454W AND  
NPI NUMBERS: 1457450116 AND 1497847552**

**FISCAL PERIOD ENDED  
JUNE 30, 2009**

**Audits Section - Richmond  
Financial Audits Branch  
Audits and Investigations  
Department of Health Care Services**

**Section Chief: Louise Wong  
Audit Supervisor: David Mui  
Auditor: Philip Chang**



TOBY DOUGLAS  
DIRECTOR

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



EDMUND G. BROWN JR.  
GOVERNOR

December 21, 2011

Charlotte Canari  
Director of Reimbursement  
UCSF Medical Center  
Reimbursement Services  
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2300 Harrison Street, 3<sup>rd</sup> Floor  
Campus Box 0824  
San Francisco, CA 94143-0824

PROVIDER: UCSF MEDICAL CENTER  
PROVIDER NUMBERS: HSC/ZZR00454W  
NPI NUMBERS: 1457450116 AND 1497847552  
FISCAL PERIOD ENDED JUNE 30, 2009

We have examined the provider's Medi-Cal Cost Report for the above-referenced fiscal period. Our examination was made under the authority of Section 14170 of the Welfare and Institutions Code and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the audited combined settlement for the fiscal period due the State in the amount of \$21,042 and the audited costs presented in the Summary of Findings represent a proper determination in accordance with the reimbursement principles of applicable programs.

This audit report includes the:

1. Summary of Findings
2. Computation of California Children Services Program Settlement (NONCONTRACT Schedules)
3. Computation of Medi-Cal Cost (DESIG PUB HOSP Schedules)
4. Audit Adjustments Schedule

The audited settlement will be incorporated into a Statement of Account Status, which may reflect tentative retroactive adjustment determinations, payments from the provider, and other financial transactions initiated by the Department. The Statement of Account Status will be forwarded to the provider by the State's fiscal intermediary. Instructions regarding payment will be included with the Statement of Account Status.

The audited cost data will be incorporated into the Workbook for purposes of determining final settlement in accordance with the Special Terms and Conditions Funding and Reimbursement Protocol. This final settlement will be determined by the Safety Net Financing Division and transmitted to you under separate cover

Notwithstanding this audit report, overpayments to the provider are subject to recovery pursuant to Section 51458.1, Article 6 of Division 3, Title 22, California Code of Regulations.

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

John Melton, Chief  
Office of Administrative Appeals and Hearings  
1029 J Street, Suite 200  
MS 0017  
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  
P.O. Box 997413  
Sacramento, CA 95899-7413

**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 95814-5005  
(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.

Charlotte Canari  
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If you have questions regarding this report, you may call the Audits Section - Richmond at (510) 620-3100.

Original Signed by

Louise Wong, Chief  
Audits Section - Richmond  
Financial Audits Branch

Certified

**SUMMARY OF FINDINGS**

**Provider Name:**  
UCSF MEDICAL CENTER

**Fiscal Period Ended:**  
JUNE 30, 2009

		SETTLEMENT	COST
<b>1. Medi-Cal Noncontract Settlement (SCHEDULE 1)</b> <b>Provider No. ZZR00454W</b>	Reported Amount Due Provider (State)	\$ 0	
	Net Change	\$ (21,042)	
	Audited Amount Due Provider (State)	\$ (21,042)	
<b>2. _____ (SCHEDULE 1-1)</b> <b>Provider No.</b>	Reported Amount Due Provider (State)	\$ 0	
	Net Change	\$ 0	
	Audited Amount Due Provider (State)	\$ 0	
<b>3. _____ (SCHEDULE 1-2)</b> <b>Provider No.</b>	Reported Amount Due Provider (State)	\$ 0	
	Net Change	\$ 0	
	Audited Amount Due Provider (State)	\$ 0	
<b>4. Designated Public Hospital Cost (DPH SCH 1)</b> <b>Provider No. HSC00454W</b>	Reported Cost		\$ 169,632,039
	Net Change		\$ (477,833)
	Audited Cost		\$ 169,154,205
	Audited Amount Due Provider (State)	\$ 0	
<b>5. Distinct Part Nursing Facility (DPNF SCH 1)</b> <b>Provider No.</b>	Reported Cost Per Day		\$ 0.00
	Net Change		\$ 0.00
	Audited Cost Per Day		\$ 0.00
	Audited Amount Due Provider (State)	\$ 0	
<b>6. Distinct Part Nursing Facility (DPNF SCH 1-1)</b> <b>Provider No.</b>	Reported Cost Per Day		\$ 0.00
	Net Change		\$ 0.00
	Audited Cost Per Day		\$ 0.00
	Audited Amount Due Provider (State)	\$ 0	
<b>7. Adult Subacute (ADULT SUBACUTE SCH 1)</b> <b>Provider No.</b>	Reported Cost Per Day		\$ 0.00
	Net Change		\$ 0.00
	Audited Cost Per Day		\$ 0.00
	Audited Amount Due Provider (State)	\$ 0	
<b>8. Total Medi-Cal Settlement Due Provider (State) - (Lines 1 through 7)</b>		\$ (21,042)	
<b>9. Total Medi-Cal Cost</b>			\$ 169,154,205

**SUMMARY OF FINDINGS**

**Provider Name:**  
UCSF MEDICAL CENTER

**Fiscal Period Ended:**  
JUNE 30, 2009

	SETTLEMENT	COST
<b>10. Subacute (SUBACUTE SCH 1-1) Provider No.</b>		
Reported Cost Per Day		\$ 0.00
Net Change		\$ 0.00
Audited Cost Per Day		\$ 0.00
Audited Amount Due Provider (State)	\$ 0	
<b>11. Rural Health Clinics (RHC SCH 1) Provider No.</b>		
Reported Amount Due Provider (State)	\$ 0	
Net Change	\$ 0	
Audited Amount Due Provider (State)	\$ 0	
<b>12. Rural Health Clinics (RHC 95-210 SCH 1) Provider No.</b>		
Reported Amount Due Provider (State)	\$ 0	
Net Change	\$ 0	
Audited Amount Due Provider (State)	\$ 0	
<b>13. Rural Health Clinics (RHC 95-210 SCH 1-1) Provider No.</b>		
Reported Amount Due Provider (State)	\$ 0	
Net Change	\$ 0	
Audited Amount Due Provider (State)	\$ 0	
<b>14. County Medical Services Prog. (CMSP SCH 1) Provider No.</b>		
Reported Amount Due Provider (CMSP)	\$ 0	
Net Change	\$ 0	
Audited Amount Due Provider (CMSP)	\$ 0	
<b>15. Transitional (TC SCH 1) Provider No.</b>		
Reported Cost Per Day		\$ 0.00
Net Change		\$ 0.00
Audited Cost Per Day		\$ 0.00
Audited Amount Due Provider (State)	\$ 0	
<b>16. Total Other Settlement Due Provider - (Lines 10 through 15)</b>	\$ 0	
<b>17. Total Combined Audited Settlement Due Provider (State/CMSP/RHC) - (Line 8 + Line 16)</b>	\$ (21,042)	

COMPUTATION OF  
MEDI-CAL REIMBURSEMENT SETTLEMENT

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No.  
ZZR00454W

	REPORTED	AUDITED
1. Net Cost of Covered Services Rendered to Medi-Cal Patients (Schedule 3)	\$ 0	\$ 30,454
2. Excess Reasonable Cost Over Charges (Schedule 2)	\$ 0	\$ 0
3. Medi-Cal Inpatient Hospital Based Physician Services	\$	N/A
4.	\$	\$ 0
5. TOTAL COST-Reimbursable to Provider (Lines 1 through 4)	\$ 0	\$ 30,454
6. Interim Payments (Adj 15)	\$ 0	\$ (51,496)
7. Balance Due Provider (State)	\$ 0	\$ (21,042)
8. Duplicate Payments (Adj )	\$	\$ 0
9.	\$	\$ 0
10	\$ 0	\$ 0
11. TOTAL MEDI-CAL SETTLEMENT Due Provider (State)	\$ 0	\$ (21,042)

(To Summary of Findings)

COMPUTATION OF LESSER OF  
MEDI-CAL REASONABLE COST OR CUSTOMARY CHARGESProvider Name:  
UCSF MEDICAL CENTERFiscal Period Ended:  
JUNE 30, 2009Provider No.  
ZZR00454W

REPORTED	AUDITED
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## REASONABLE COST OF MEDI-CAL INPATIENT SERVICES

1. Cost of Covered Services (Schedule 3)	\$ <u>0</u>	\$ <u>30,454</u>
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## CHARGES FOR MEDI-CAL INPATIENT SERVICES

2. Inpatient Routine Service Charges (Adj 14)	\$ <u>0</u>	\$ <u>15,435</u>
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3. Inpatient Ancillary Service Charges (Adj 14)	\$ <u>0</u>	\$ <u>87,556</u>
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4. Total Charges - Medi-Cal Inpatient Services	\$ <u>0</u>	\$ <u>102,991</u>
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5. Excess of Customary Charges Over Reasonable Cost (Line 4 minus Line 1) *	\$ <u>0</u>	\$ <u>72,537</u>
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6. Excess of Reasonable Cost Over Customary Charges (Line 1 minus Line 4)	\$ <u>0</u>	\$ <u>0</u>
	(To Schedule 1)	

\* If charges exceed reasonable cost, no further calculation necessary for this schedule.

COMPUTATION OF  
MEDI-CAL NET COSTS OF COVERED SERVICES

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No.  
ZZR00454W

	REPORTED	AUDITED
1. Medi-Cal Inpatient Ancillary Services (Schedule 5)	\$ _____	\$ 20,933
2. Medi-Cal Inpatient Routine Services (Schedule 4)	\$ 0	\$ 9,521
3. Medi-Cal Inpatient Hospital Based Physician for Intern and Resident Services (Sch )	\$ _____	\$ 0
4.	\$ _____	\$ 0
5.	\$ _____	\$ 0
6. SUBTOTAL (Sum of Lines 1 through 5)	\$ 0	\$ 30,454
7. Medi-Cal Inpatient Hospital Based Physician for Acute Care Services (Schedule 7)	\$ (See Schedule 1)	\$ 0
8. SUBTOTAL	\$ 0	\$ 30,454
	(To Schedule 2)	
9. Coinsurance (Adj )	\$ _____	\$ 0
10. Patient and Third Party Liability (Adj )	\$ _____	\$ 0
11. Net Cost of Covered Services Rendered to Medi-Cal Inpatients	\$ 0	\$ 30,454
	(To Schedule 1)	

COMPUTATION OF  
MEDI-CAL INPATIENT ROUTINE SERVICE COST

Provider Name:  
UCSF MEDICAL CENTER  
Provider No.  
ZZR00454W

Fiscal Period Ended:  
JUNE 30, 2009

## GENERAL SERVICE UNIT NET OF SWING-BED COSTS

	REPORTED	AUDITED
<b>INPATIENT DAYS</b>		
1. Total Inpatient Days (include private & swing-bed) (Adj )	145,774	145,774
2. Inpatient Days (include private, exclude swing-bed)	145,774	145,774
3. Private Room Days (exclude swing-bed private room) (Adj )	0	0
4. Semi-Private Room Days (exclude swing-bed) (Adj )	145,774	145,774
5. Medicare NF Swing-Bed Days through Dec 31 (Adj )	0	0
6. Medicare NF Swing-Bed Days after Dec 31 (Adj )	0	0
7. Medi-Cal NF Swing-Bed Days through July 31 (Adj )	0	0
8. Medi-Cal NF Swing-Bed Days after July 31 (Adj )	0	0
9. Medi-Cal Days (excluding swing-bed) (Adj 12)	0	4

## SWING-BED ADJUSTMENT

17. Medicare NF Swing-Bed Rates through Dec 31 (Adj )	\$ 0.00	\$ 0.00
18. Medicare NF Swing-Bed Rates after Dec 31(Adj )	\$ 0.00	\$ 0.00
19. Medi-Cal NF Swing-Bed Rates through July 31(Adj )	\$ 0.00	\$ 0.00
20. Medi-Cal NF Swing-Bed Rates after July 31(Adj )	\$ 0.00	\$ 0.00
21. Total Routine Serv Cost (Sch 8, Line 25, Col 27)	\$ 222,341,676	\$ 221,813,849
22. Medicare NF Swing-Bed Cost through Dec 31 (L 5 x L 17)	\$ 0	\$ 0
23. Medicare NF Swing-Bed Cost after Dec 31 (L 6 x L 18)	\$ 0	\$ 0
24. Medi-Cal NF Swing-Bed Cost through July 31 (L 7 x L 19)	\$ 0	\$ 0
25. Medi-Cal NF Swing-Bed Cost after July 31 (L 8 x L 20)	\$ 0	\$ 0
26. Total Swing-Bed Cost (Sum of Lines 22 to 25)	\$ 0	\$ 0
27. Inpatient Routine Cost Net of Swing-Bed (L 21 minus L 26)	\$ 222,341,676	\$ 221,813,849

## PRIVATE ROOM DIFFERENTIAL ADJUSTMENT

28. Gen Inpatient Routine Serv Charges (excl swing-bed charges)	\$ 836,011,480	\$ 836,011,480
29. Private Room Charges (excluding swing-bed charges)	\$ 0	\$ 0
30. Semi-Private Room Charges (excluding swing-bed charges)	\$ 836,011,480	\$ 836,011,480
31. Gen Inpatient Routine Service Cost/Charge Ratio (L 27 / L 28)	\$ 0.265955	\$ 0.265324
32. Average Private Room Per Diem Charge (L 29 / L 3)	\$ 0.00	\$ 0.00
33. Average Semi-Private Room Per Diem Charge (L 30 / L 4)	\$ 5734.98	\$ 5734.98
34. Avg Per Diem Prvt Room Charge Differential (L 32 minus L 33)	\$ 0.00	\$ 0.00
35. Average Per Diem Private Room Cost Differential (L 31 x L 34)	\$ 0.00	\$ 0.00
36. Private Room Cost Differential Adjustment (L 35 x L 3)	\$ 0	\$ 0
37. Inpatient Rout Cost Net of Swing-Bed & Prvt Rm (L 27 minus L 36)	\$ 222,341,676	\$ 221,813,849

## PROGRAM INPATIENT OPERATING COST

38. Adjusted General Inpatient Routine Cost Per Diem (L 37 / L 2)	\$ 1,525.25	\$ 1,521.63
39. Program General Inpatient Routine Service Cost (L 9 x L 38)	\$ 0	\$ 6,087
40. Cost Applicable to Medi-Cal (Sch 4A)	\$ 0	\$ 3,434
41. Cost Applicable to Medi-Cal (Sch 4B)	\$ 0	\$ 0
42. TOTAL MEDI-CAL ROUTINE COST (Sum of Lines 39,40 & 41)	\$ 0	\$ 9,521

( To Schedule 3 )

COMPUTATION OF  
MEDI-CAL INPATIENT ROUTINE SERVICE COSTProvider Name:  
UCSF MEDICAL CENTERFiscal Period Ended:  
JUNE 30, 2009Provider No.  
ZZR00454W

	REPORTED	AUDITED
<b>SPECIAL CARE AND/OR NURSERY UNITS</b>		
<b>NURSERY</b>		
1. Total Inpatient Routine Cost (Sch 8, Line 33, Col 27)	\$ 2,737,740	\$ 2,738,789
2. Total Inpatient Days (Adj )	3,723	3,723
3. Average Per Diem Cost	\$ 735.36	\$ 735.64
4. Medi-Cal Inpatient Days (Adj )		0
5. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>INTENSIVE CARE UNIT</b>		
6. Total Inpatient Routine Cost (Sch 8, Line 26, Col 27)	\$ 66,421,728	\$ 66,313,810
7. Total Inpatient Days (Adj )	19,313	19,313
8. Average Per Diem Cost	\$ 3,439.22	\$ 3,433.64
9. Medi-Cal Inpatient Days (Adj 4)	0	1
10. Cost Applicable to Medi-Cal	\$ 0	\$ 3,434
<b>CORONARY CARE UNIT</b>		
11. Total Inpatient Routine Cost (Sch 8, Line 27, Col 27)	\$ 16,068,607	\$ 16,076,585
12. Total Inpatient Days (Adj )	4,930	4,930
13. Average Per Diem Cost	\$ 3,259.35	\$ 3,260.97
14. Medi-Cal Inpatient Days (Adj )		0
15. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>NEUROSURGERY ICU</b>		
16. Total Inpatient Routine Cost (Sch 8, Line 28.01, Col 27)	\$ 15,416,668	\$ 15,422,763
17. Total Inpatient Days (Adj )	5,297	5,297
18. Average Per Diem Cost	\$ 2,910.45	\$ 2,911.60
19. Medi-Cal Inpatient Days (Adj )		0
20. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>NURSERY ICU</b>		
21. Total Inpatient Routine Cost (Sch 8, Line 29.01, Col 27)	\$ 36,645,333	\$ 36,585,954
22. Total Inpatient Days (Adj )	15,737	15,737
23. Average Per Diem Cost	\$ 2,328.61	\$ 2,324.84
24. Medi-Cal Inpatient Days (Adj )		0
25. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>ADMINISTRATIVE DAYS</b>		
26. Per Diem Rate (Adj )	\$	\$ 0.00
27. Medi-Cal Inpatient Days (Adj )		0
28. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>ADMINISTRATIVE DAYS</b>		
29. Per Diem Rate (Adj )	\$	\$ 0.00
30. Medi-Cal Inpatient Days (Adj )		0
31. Cost Applicable to Medi-Cal	\$ 0	\$ 0
32. Medi-Cal Routine Cost (Sum of Lines 5,10,15,20,25,28,31)	\$ 0	\$ 3,434

(To Schedule 4)

COMPUTATION OF  
MEDI-CAL INPATIENT ROUTINE SERVICE COST

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No.  
ZZR00454W

	REPORTED	AUDITED
<b>SPECIAL CARE UNITS</b>		
<b>PEDIATRIC INTENSIVE CARE UNIT</b>		
1. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
2. Total Inpatient Days (Adj )	0	0
3. Average Per Diem Cost	\$ 0.00	\$ 0.00
4. Medi-Cal Inpatient Days (Adj )	0	0
5. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>NEONATAL INTENSIVE CARE UNIT</b>		
6. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
7. Total Inpatient Days (Adj )	0	0
8. Average Per Diem Cost	\$ 0.00	\$ 0.00
9. Medi-Cal Inpatient Days (Adj )	0	0
10. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
11. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
12. Total Inpatient Days (Adj )	0	0
13. Average Per Diem Cost	\$ 0.00	\$ 0.00
14. Medi-Cal Inpatient Days (Adj )	0	0
15. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
16. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
17. Total Inpatient Days (Adj )	0	0
18. Average Per Diem Cost	\$ 0.00	\$ 0.00
19. Medi-Cal Inpatient Days (Adj )	0	0
20. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
21. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
22. Total Inpatient Days (Adj )	0	0
23. Average Per Diem Cost	\$ 0.00	\$ 0.00
24. Medi-Cal Inpatient Days (Adj )	0	0
25. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
26. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
27. Total Inpatient Days (Adj )	0	0
28. Average Per Diem Cost	\$ 0.00	\$ 0.00
29. Medi-Cal Inpatient Days (Adj )	0	0
30. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
31. Medi-Cal Routine Cost (Sum of Lines 5,10,15,20,25,30)	\$ 0	\$ 0

(To Schedule 4)

## SCHEDULE OF MEDI-CAL ANCILLARY COSTS

Provider Name:  
UCSF MEDICAL CENTERFiscal Period Ended:  
JUNE 30, 2009Provider No:  
ZZR00454W

ANCILLARY COST CENTERS		TOTAL ANCILLARY COST *	TOTAL ANCILLARY CHARGES (Adj)	RATIO COST TO CHARGES	MEDI-CAL CHARGES (From Schedule 6)	MEDI-CAL COST
37.00	Operating Room	\$ 82,272,262	\$ 387,034,271	0.212571	\$ 45,175	\$ 9,603
38.00	Recovery Room	15,237,265	45,869,362	0.332188	3,086	1,025
39.00	Delivery Room and Labor Room	5,065,131	17,796,903	0.284607	0	0
40.00	Anesthesiology	15,427,779	106,630,503	0.144684	15,872	2,296
41.00	Radiology-Diagnostic	64,797,266	361,804,811	0.179095	537	96
42.00	Radiology-Therapeutic	20,834,194	165,548,280	0.125850	0	0
43.00	Radioisotope	10,217,592	55,069,447	0.185540	0	0
44.00	Laboratory	62,084,620	430,702,060	0.144147	1,755	253
44.01	Laboratory Path	19,220,373	51,122,931	0.375964	0	0
46.00	Whole Blood and Packed Red Blood	25,613,493	31,666,035	0.808863	0	0
49.00	Respiratory Therapy	20,136,813	85,271,487	0.236149	128	30
50.00	Physical Therapy	9,055,806	26,651,309	0.339788	471	160
52.01	Renal Room	3,507,290	20,020,093	0.175188	0	0
53.00	Electrocardiology	6,717,972	41,900,249	0.160333	0	0
53.01	Cardiac Cath	13,743,568	50,720,299	0.270968	0	0
54.00	Electroencephalography	1,911,094	18,026,152	0.106018	0	0
55.00	Medical Supplies Charged to Patients	141,251,854	339,346,611	0.416247	15,774	6,566
56.00	Drugs Charged to Patients	110,987,720	584,211,843	0.189979	4,758	904
57.00	Renal Dialysis	6,440,526	20,936,579	0.307621	0	0
58.00	ASC (Non-District Part)	7,637,276	62,439,438	0.122315	0	0
59.00	Other Special Services	13,949,681	14,646,680	0.952412	0	0
59.01	HEMO Perfusion Services	1,033,070	2,613,104	0.395342	0	0
60.01	Dermatology Clinic	7,558,022	10,457,989	0.722703	0	0
60.02	General Medicine Clinic	45,885,393	59,032,897	0.777285	0	0
60.03	Ophthalmology Clinic	6,410,313	7,337,531	0.873634	0	0
60.04	Orthopedic Clinic	8,181,236	3,440,937	2.377619	0	0
60.05	Otolaryngology/Ent Clinic	3,706,917	4,188,045	0.885119	0	0
60.06	Pediatrics Clinic	15,015,390	15,336,442	0.979066	0	0
60.07	Urology Clinic	3,291,486	1,649,744	1.995149	0	0
60.08	Cancer Center	28,532,904	23,992,812	1.189227	0	0
60.09	Lakeside Senior Medical Center	963,473	677,503	1.422094	0	0
60.10	Surgery Clinic	10,426,557	2,135,458	4.882586	0	0
60.11	OB/GYN Clinic	19,772,239	16,382,326	1.206925	0	0
60.12	Lakeshore Clinic	2,929,038	2,915,534	1.004632	0	0
60.13	Psychiatric Clinic	131	0	0.000000	0	0
60.14	Santa Rosa Clinic	254,574	110,228	2.309520	0	0
60.15	Neurology Clinic	8,348,472	4,648,595	1.795913	0	0
60.16	Valley Care Pediatric Clinic	787,770	312,570	2.520298	0	0
61.00	Emergency	20,449,234	71,498,154	0.286011	0	0
62.01	Observation Beds - Distinct	3,049,897	2,112,624	1.443653	0	0
63.00	Psoriasis Day Care	656,594	1,883,066	0.348684	0	0
64.00	Home Program Dialysis	378,776	1,509,223	0.250974	0	0
TOTAL		\$ 843,741,060	\$ 3,149,650,125		\$ 87,556	\$ 20,933

(To Schedule 3)

\* From Schedule 8, Column 25

## ADJUSTMENTS TO MEDI-CAL CHARGES

Provider Name:  
UCSF MEDICAL CENTERFiscal Period Ended:  
JUNE 30, 2009Provider No:  
ZZR00454W

	ANCILLARY CHARGES	REPORTED	ADJUSTMENTS (Adj 13)	AUDITED
37.00	Operating Room	\$ 0	\$ 45,175	\$ 45,175
38.00	Recovery Room	0	3,086	3,086
39.00	Delivery Room and Labor Room			0
40.00	Anesthesiology	0	15,872	15,872
41.00	Radiology-Diagnostic	0	537	537
42.00	Radiology-Therapeutic			0
43.00	Radioisotope			0
44.00	Laboratory	0	1,755	1,755
44.01	Laboratory Path			0
46.00	Whole Blood and Packed Red Blood			0
49.00	Respiratory Therapy	0	128	128
50.00	Physical Therapy	0	471	471
52.01	Renal Room			0
53.00	Electrocardiology			0
53.01	Cardiac Cath			0
54.00	Electroencephalography			0
55.00	Medical Supplies Charged to Patients	0	15,774	15,774
56.00	Drugs Charged to Patients	0	4,758	4,758
57.00	Renal Dialysis			0
58.00	ASC (Non-District Part)			0
59.00	Other Special Services			0
59.01	HEMO Perfusion Services			0
60.01	Dermatology Clinic			0
60.02	General Medicine Clinic			0
60.03	Ophthalmology Clinic			0
60.04	Orthopedic Clinic			0
60.05	Otolaryngology/Ent Clinic			0
60.06	Pediatrics Clinic			0
60.07	Urology Clinic			0
60.08	Cancer Center			0
60.09	Lakeside Senior Medical Center			0
60.10	Surgery Clinic			0
60.11	OB/GYN Clinic			0
60.12	Lakeshore Clinic			0
60.13	Psychiatric Clinic			0
60.14	Santa Rosa Clinic			0
60.15	Neurology Clinic			0
60.16	Valley Care Pediatric Clinic			0
61.00	Emergency			0
62.01	Observation Beds - Distinct			0
63.00	Psoriasis Day Care			0
64.00	Home Program Dialysis			0
TOTAL MEDI-CAL ANCILLARY CHARGES		\$ 0	\$ 87,556	\$ 87,556

(To Schedule 5)



## COMPUTATION OF MEDI-CAL CONTRACT COST

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No:  
HSC00454W

	REPORTED	AUDITED
1. Net Cost of Covered Services Rendered to Medi-Cal Patients (Contract Sch 3)	\$ 169,632,039	\$ 169,154,205
2. Excess Reasonable Cost Over Charges (Contract Sch 2)	\$ 0	\$ 0
3. Medi-Cal Inpatient Hospital Based Physician Services	\$	N/A
4.	\$	\$ 0
5. Subtotal (Sum of Lines 1 through 4)	\$ 169,632,039	\$ 169,154,205
6.	\$	\$ 0
7.	\$	\$ 0
8. Total Medi-Cal Cost (Sum of Lines 5 through 7)	\$ 169,632,039	\$ 169,154,205
	(To Summary of Findings)	
9. Interim Payments (Adjs 7,11)	\$ 0	\$ (87,372,232)
10. Medi-Cal Credit Balances (Adj )	\$	\$ 0
11.	\$	\$ 0
12.	\$	\$ 0
13. TOTAL MEDI-CAL SETTLEMENT Due Provider (State)	\$ 0	\$ 0
	(To Summary of Findings)	

**COMPUTATION OF LESSER OF  
MEDI-CAL REASONABLE COST OR CUSTOMARY CHARGES**

**Provider Name:  
UCSF MEDICAL CENTER**

**Fiscal Period Ended:  
JUNE 30, 2009**

**Provider No:  
HSC00454W**

<b>REPORTED</b>
-----------------

<b>AUDITED</b>
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**REASONABLE COST OF MEDI-CAL INPATIENT SERVICES**

1. Cost of Covered Services (Contract Sch 3)	\$ <u>169,632,039</u>	\$ <u>170,308,112</u>
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**CHARGES FOR MEDI-CAL INPATIENT SERVICES**

2. Inpatient Routine Service Charges (Adjs 6,10)	\$ <u>401,086,882</u>	\$ <u>390,735,909</u>
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3. Inpatient Ancillary Service Charges (Adjs 6,10)	\$ <u>320,231,749</u>	\$ <u>339,946,150</u>
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4. Total Charges - Medi-Cal Inpatient Services	\$ <u>721,318,631</u>	\$ <u>730,682,059</u>
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5. Excess of Customary Charges Over Reasonable Cost (Line 4 minus Line 1) *	\$ <u>551,686,592</u>	\$ <u>560,373,947</u>
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6. Excess of Reasonable Cost Over Customary Charges (Line 1 minus Line 4)	\$ <u>0</u>	\$ <u>0</u>
	(To Contract Sch 1)	

\* If charges exceed reasonable cost, no further calculation necessary for this schedule.

**COMPUTATION OF  
MEDI-CAL NET COST OF COVERED SERVICES**

**Provider Name:  
UCSF MEDICAL CENTER**

**Fiscal Period Ended:  
JUNE 30, 2009**

**Provider No:  
HSC00454W**

	<b>REPORTED</b>	<b>AUDITED</b>
1. Medi-Cal Inpatient Ancillary Services (Contract Sch 5)	\$ <u>75,318,951</u>	\$ <u>80,406,250</u>
2. Medi-Cal Inpatient Routine Services (Contract Sch 4)	\$ <u>94,313,088</u>	\$ <u>89,993,142</u>
3. Medi-Cal Inpatient Hospital Based Physician for Intern and Resident Services (Sch )	\$ _____	\$ _____ 0
4. Late Billing Cost Reductions (Adj 16)	\$ _____ 0	\$ _____ (91,280)
5.	\$ _____	\$ _____ 0
6. SUBTOTAL (Sum of Lines 1 through 5)	\$ <u>169,632,039</u>	\$ <u>170,308,112</u>
7. Medi-Cal Inpatient Hospital Based Physician for Acute Care Services (Contract Sch 7)	( See \$ <u>Contract Sch 1)</u>	\$ _____ 0
8. SUBTOTAL	\$ <u>169,632,039</u>	\$ <u>170,308,112</u> (To Contract Sch 2)
9. Coinsurance (Adjs 7,11)	\$ _____ 0	\$ _____ (1,071,895)
10. Patient and Third Party Liability (Adjes 7,11)	\$ _____ 0	\$ _____ (82,012)
11. Net Cost of Covered Services Rendered to Medi-Cal Inpatients	\$ <u><u>169,632,039</u></u>	\$ <u><u>169,154,205</u></u> (To Contract Sch 1)

**COMPUTATION OF  
MEDI-CAL INPATIENT ROUTINE SERVICE COST**

**Provider Name:**  
**UCSF MEDICAL CENTER**

**Fiscal Period Ended:**  
**JUNE 30, 2009**

**Provider No:**  
**HSC00454W**

**GENERAL SERVICE UNIT NET OF SWING-BEDS COSTS**

REPORTED	AUDITED
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**INPATIENT DAYS**

1. Total Inpatient Days (include private & swing-bed) (Adj )	145,774	145,774
2. Inpatient Days (include private, exclude swing-bed)	145,774	145,774
3. Private Room Days (exclude swing-bed private room) (Adj )	0	0
4. Semi-Private Room Days (exclude swing-bed) (Adj )	145,774	145,774
5. Medicare NF Swing-Bed Days through Dec 31 (Adj )	0	0
6. Medicare NF Swing-Bed Days after Dec 31 (Adj )	0	0
7. Medi-Cal NF Swing-Bed Days through July 31 (Adj )	0	0
8. Medi-Cal NF Swing-Bed Days after July 31 (Adj )	0	0
9. Medi-Cal Days (excluding swing-bed) (Adjs 4, 8)	31,811	30,283

**SWING-BED ADJUSTMENT**

17. Medicare NF Swing-Bed Rates through Dec 31 (Adj )	\$ 0.00	\$ 0.00
18. Medicare NF Swing-Bed Rates after Dec 31(Adj )	\$ 0.00	\$ 0.00
19. Medi-Cal NF Swing-Bed Rates through July 31(Adj )	\$ 0.00	\$ 0.00
20. Medi-Cal NF Swing-Bed Rates after July 31(Adj )	\$ 0.00	\$ 0.00
21. Total Routine Serv Cost (Sch 8, Part I, Line 25, Col 27)	\$ 222,341,676	\$ 221,813,849
22. Medicare NF Swing-Bed Cost through Dec 31 (L 5 x L 17)	\$ 0	\$ 0
23. Medicare NF Swing-Bed Cost after Dec 31 (L 6 x L 18)	\$ 0	\$ 0
24. Medi-Cal NF Swing-Bed Cost through July 31 (L 7 x L 19)	\$ 0	\$ 0
25. Medi-Cal NF Swing-Bed Cost after July 31 (L 8 x L 20)	\$ 0	\$ 0
26. Total Swing-Bed Cost (Sum of Lines 22 to 25)	\$ 0	\$ 0
27. Inpatient Routine Cost Net of Swing-Bed (L 21 minus L 26)	\$ 222,341,676	\$ 221,813,849

**PRIVATE ROOM DIFFERENTIAL ADJUSTMENT**

28. Gen Inpatient Routine Serv Charges (excl swing-bed charges)(Adj )	\$ 836,011,480	\$ 836,011,480
29. Private Room Charges (excluding swing-bed charges)(Adj )	\$ 0	\$ 0
30. Semi-Private Room Charges (excluding swing-bed charges)(Adj )	\$ 836,011,480	\$ 836,011,480
31. Gen Inpatient Routine Service Cost/Charge Ratio (L 27 / L 28)	\$ 0.265955	\$ 0.265324
32. Average Private Room Per Diem Charge (L 29 / L 3)	\$ 0.00	\$ 0.00
33. Average Semi-Private Room Per Diem Charge (L 30 / L 4)	\$ 5734.98	\$ 5734.98
34. Avg Per Diem Prvt Room Charge Differential (L 32 minus L 33)	\$ 0.00	\$ 0.00
35. Average Per Diem Private Room Cost Differential (L 31 x L 34)	\$ 0.00	\$ 0.00
36. Private Room Cost Differential Adjustment (L 35 x L 3)	\$ 0	\$ 0
37. Inpatient Rout Cost Net of Swing-Bed & Prvt Rm (L 27 minus L 36)	\$ 222,341,676	\$ 221,813,849

**PROGRAM INPATIENT OPERATING COST**

38. Adjusted General Inpatient Routine Cost Per Diem (L 37 / L 2)	\$ 1,525.25	\$ 1,521.63
39. Program General Inpatient Routine Service Cost (L 9 x L 38)	\$ 48,519,728	\$ 46,079,521
40. Cost Applicable to Medi-Cal (Contract Sch 4A)	\$ 45,793,360	\$ 43,913,621
41. Cost Applicable to Medi-Cal (Contract Sch 4B)	\$ 0	\$ 0
42. TOTAL MEDI-CAL ROUTINE COST (Sum of Lines 39, 40 & 41)	\$ 94,313,088	\$ 89,993,142

(To Contract Sch 3)

**COMPUTATION OF  
MEDI-CAL INPATIENT ROUTINE SERVICE COST**

**Provider Name:**  
**UCSF MEDICAL CENTER**

**Fiscal Period Ended:**  
**JUNE 30, 2009**

**Provider No:**  
**HSC00454W**

<b>SPECIAL CARE AND/OR NURSERY UNITS</b>	<b>REPORTED</b>	<b>AUDITED</b>
<b>NURSERY</b>		
1. Total Inpatient Routine Cost (Sch 8, Line 33, Col 27)	\$ 2,737,740	\$ 2,738,789
2. Total Inpatient Days (Adj )	3,723	3,723
3. Average Per Diem Cost	\$ 735.36	\$ 735.64
4. Medi-Cal Inpatient Days (Adj 4)	560	524
5. Cost Applicable to Medi-Cal	\$ 411,802	\$ 385,475
<b>INTENSIVE CARE UNIT</b>		
6. Total Inpatient Routine Cost (Sch 8, Line 26, Col 27)	\$ 66,421,728	\$ 66,313,810
7. Total Inpatient Days (Adj )	19,313	19,313
8. Average Per Diem Cost	\$ 3,439.22	\$ 3,433.64
9. Medi-Cal Inpatient Days (Adj 4)	5,487	6,052
10. Cost Applicable to Medi-Cal	\$ 18,871,000	\$ 20,780,389
<b>CORONARY CARE UNIT</b>		
11. Total Inpatient Routine Cost (Sch 8, Line 27, Col 27)	\$ 16,068,607	\$ 16,076,585
12. Total Inpatient Days (Adj )	4,930	4,930
13. Average Per Diem Cost	\$ 3,259.35	\$ 3,260.97
14. Medi-Cal Inpatient Days (Adj 4)	844	1,073
15. Cost Applicable to Medi-Cal	\$ 2,750,891	\$ 3,499,021
<b>NEUROSURGERY ICU</b>		
16. Total Inpatient Routine Cost (Sch 8, Line 28.01, Col 27)	\$ 15,416,668	\$ 15,422,763
17. Total Inpatient Days (Adj )	5,297	5,297
18. Average Per Diem Cost	\$ 2,910.45	\$ 2,911.60
19. Medi-Cal Inpatient Days (Adj 4)	974	145
20. Cost Applicable to Medi-Cal	\$ 2,834,778	\$ 422,182
<b>NURSERY ICU</b>		
21. Total Inpatient Routine Cost (Sch 8, Line 29.01, Col 27)	\$ 36,645,333	\$ 36,585,954
22. Total Inpatient Days (Adj )	15,737	15,737
23. Average Per Diem Cost	\$ 2,328.61	\$ 2,324.84
24. Medi-Cal Inpatient Days (Adj 4)	8,986	8,098
25. Cost Applicable to Medi-Cal	\$ 20,924,889	\$ 18,826,554
<b>SURGICAL ICU-8</b>		
26. Total Inpatient Routine Cost (Sch 8, Line___ , Col 27)	\$ 0	\$ 0
27. Total Inpatient Days (Adj )	0	0
28. Average Per Diem Cost	\$ 0.00	\$ 0.00
29. Medi-Cal Inpatient Days (Adj )	0	0
30. Cost Applicable to Medi-Cal	\$ 0	\$ 0
31. Medi-Cal Routine Cost (Sum of Lines 5,10,15,20,25,30)	\$ 45,793,360	\$ 43,913,621

(To Contract Sch 4)

COMPUTATION OF  
MEDI-CAL INPATIENT ROUTINE SERVICE COST

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No:  
HSC00454W

	REPORTED	AUDITED
<b>SPECIAL CARE UNITS</b>		
<b>PEDIATRIC INTENSIVE CARE UNIT</b>		
1. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
2. Total Inpatient Days (Adj)	0	0
3. Average Per Diem Cost	\$ 0.00	\$ 0.00
4. Medi-Cal Inpatient Days (Adj)	0	0
5. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<b>NEONATAL INTENSIVE CARE UNIT</b>		
6. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
7. Total Inpatient Days (Adj)	0	0
8. Average Per Diem Cost	\$ 0.00	\$ 0.00
9. Medi-Cal Inpatient Days (Adj)	0	0
10. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
11. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
12. Total Inpatient Days (Adj)	0	0
13. Average Per Diem Cost	\$ 0.00	\$ 0.00
14. Medi-Cal Inpatient Days (Adj)	0	0
15. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
16. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
17. Total Inpatient Days (Adj)	0	0
18. Average Per Diem Cost	\$ 0.00	\$ 0.00
19. Medi-Cal Inpatient Days (Adj)	0	0
20. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
21. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
22. Total Inpatient Days (Adj)	0	0
23. Average Per Diem Cost	\$ 0.00	\$ 0.00
24. Medi-Cal Inpatient Days (Adj)	0	0
25. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
26. Total Inpatient Routine Cost (Sch 8, Line ____, Col 27)	\$ 0	\$ 0
27. Total Inpatient Days (Adj)	0	0
28. Average Per Diem Cost	\$ 0.00	\$ 0.00
29. Medi-Cal Inpatient Days (Adj)	0	0
30. Cost Applicable to Medi-Cal	\$ 0	\$ 0
<hr/>		
31. Medi-Cal Routine Cost (Sum of Lines 5,10,15,20,25,30)	\$ 0	\$ 0

(To Contract Sch 4)

## SCHEDULE OF MEDI-CAL ANCILLARY COSTS

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No:  
HSC00454W

		TOTAL ANCILLARY COST*	TOTAL ANCILLARY CHARGES (Adj)	RATIO COST TO CHARGES	MEDI-CAL CHARGES (Contract Sch 6)	MEDI-CAL COST
<b>ANCILLARY COST CENTERS</b>						
37.00	Operating Room	\$ 82,272,262	\$ 387,034,271	0.212571	\$ 40,762,334	\$ 8,664,890
38.00	Recovery Room	15,237,265	45,869,362	0.332188	3,146,625	1,045,272
39.00	Delivery Room and Labor Room	5,065,131	17,796,903	0.284607	1,891,408	538,309
40.00	Anesthesiology	15,427,779	106,630,503	0.144684	11,573,939	1,674,569
41.00	Radiology-Diagnostic	64,797,266	361,804,811	0.179095	23,198,515	4,154,727
42.00	Radiology-Therapeutic	20,834,194	165,548,280	0.125850	412,574	51,922
43.00	Radioisotope	10,217,592	55,069,447	0.185540	466,413	86,538
44.00	Laboratory	62,084,620	430,702,060	0.144147	54,799,691	7,899,238
44.01	Laboratory Path	19,220,373	51,122,931	0.375964	2,840,575	1,067,953
46.00	Whole Blood and Packed Red Blood	25,613,493	31,666,035	0.808863	4,146,122	3,353,646
49.00	Respiratory Therapy	20,136,813	85,271,487	0.236149	22,114,305	5,222,281
50.00	Physical Therapy	9,055,806	26,651,309	0.339788	3,836,035	1,303,440
52.01	Renal Room	3,507,290	20,020,093	0.175188	558,346	97,816
53.00	Electrocardiology	6,717,972	41,900,249	0.160333	5,524,756	885,798
53.01	Cardiac Cath	13,743,568	50,720,299	0.270968	5,367,622	1,454,453
54.00	Electroencephalography	1,911,094	18,026,152	0.106018	4,906,892	520,218
55.00	Medical Supplies Charged to Patients	141,251,854	339,346,611	0.416247	53,493,474	22,266,474
56.00	Drugs Charged to Patients	110,987,720	584,211,843	0.189979	91,701,646	17,421,346
57.00	Renal Dialysis	6,440,526	20,936,579	0.307621	2,992,388	920,521
58.00	ASC (Non-District Part)	7,637,276	62,439,438	0.122315	0	0
59.00	Other Special Services	13,949,681	14,646,680	0.952412	0	0
59.01	HEMO Perfusion Services	1,033,070	2,613,104	0.395342	0	0
60.01	Dermatology Clinic	7,558,022	10,457,989	0.722703	0	0
60.02	General Medicine Clinic	45,885,393	59,032,897	0.777285	0	0
60.03	Ophthalmology Clinic	6,410,313	7,337,531	0.873634	0	0
60.04	Orthopedic Clinic	8,181,236	3,440,937	2.377619	0	0
60.05	Otolaryngology/Ent Clinic	3,706,917	4,188,045	0.885119	0	0
60.06	Pediatrics Clinic	15,015,390	15,336,442	0.979066	0	0
60.07	Urology Clinic	3,291,486	1,649,744	1.995149	0	0
60.08	Cancer Center	28,532,904	23,992,812	1.189227	0	0
60.09	Lakeside Senior Medical Center	963,473	677,503	1.422094	0	0
60.10	Surgery Clinic	10,426,557	2,135,458	4.882586	0	0
60.11	OB/GYN Clinic	19,772,239	16,382,326	1.206925	0	0
60.12	Lakeshore Clinic	2,929,038	2,915,534	1.004632	0	0
60.13	Psychiatric Clinic	131	0	0.000000	0	0
60.14	Santa Rosa Clinic	254,574	110,228	2.309520	0	0
60.15	Neurology Clinic	8,348,472	4,648,595	1.795913	0	0
60.16	Valley Care Pediatric Clinic	787,770	312,570	2.520298	0	0
61.00	Emergency	20,449,234	71,498,154	0.286011	6,212,491	1,776,839
62.01	Observation Beds - Distinct	3,049,897	2,112,624	1.443653	0	0
63.00	Psoriasis Day Care	656,594	1,883,066	0.348684	0	0
64.00	Home Program Dialysis	378,776	1,509,223	0.250974	0	0
	TOTAL	\$ 843,741,060	\$ 3,149,650,125		\$ 339,946,150	\$ 80,406,250

(To Contract Sch 3)

\* From Schedule 8, Column 25

## ADJUSTMENTS TO MEDI-CAL CHARGES

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

Provider No:  
HSC00454W

ANCILLARY CHARGES		REPORTED	ADJUSTMENTS (Adjs 5, 9)	AUDITED
37.00	Operating Room	\$ 36,539,487	\$ 4,222,847	\$ 40,762,334
38.00	Recovery Room	2,696,121	450,504	3,146,625
39.00	Delivery Room and Labor Room	3,272,131	(1,380,723)	1,891,408
40.00	Anesthesiology	10,886,234	687,705	11,573,939
41.00	Radiology-Diagnostic	23,728,820	(530,305)	23,198,515
42.00	Radiology-Therapeutic	390,166	22,408	412,574
43.00	Radioisotope	683,788	(217,375)	466,413
44.00	Laboratory	49,550,270	5,249,421	54,799,691
44.01	Laboratory Path	2,073,939	766,636	2,840,575
46.00	Whole Blood and Packed Red Blood	2,807,259	1,338,863	4,146,122
49.00	Respiratory Therapy	25,750,614	(3,636,309)	22,114,305
50.00	Physical Therapy	3,982,596	(146,562)	3,836,035
52.01	Renal Room	3,659,709	(3,101,363)	558,346
53.00	Electrocardiology	4,670,884	853,872	5,524,756
53.01	Cardiac Cath	5,136,951	230,671	5,367,622
54.00	Electroencephalography	4,689,364	217,528	4,906,892
55.00	Medical Supplies Charged to Patients	48,426,822	5,066,652	53,493,474
56.00	Drugs Charged to Patients	85,201,847	6,499,799	91,701,646
57.00	Renal Dialysis	36,488	2,955,900	2,992,388
58.00	ASC (Non-District Part)	372,608	(372,608)	0
59.00	Other Special Services	387,102	(387,102)	0
59.01	HEMO Perfusion Services	1,141,938	(1,141,938)	0
60.01	Dermatology Clinic	6,694	(6,694)	0
60.02	General Medicine Clinic	547,800	(547,800)	0
60.03	Ophthalmology Clinic	9,066	(9,066)	0
60.04	Orthopedic Clinic	744	(744)	0
60.05	Otolaryngology/Ent Clinic	3,123	(3,123)	0
60.06	Pediatrics Clinic			0
60.07	Urology Clinic	564	(564)	0
60.08	Cancer Center	7,993	(7,993)	0
60.09	Lakeside Senior Medical Center			0
60.10				0
60.10	Surgery Clinic	2,565	(2,565)	0
60.11	OB/GYN Clinic	30,664	(30,664)	0
60.12	Lakeshore Clinic	88	(88)	0
60.13	Psychiatric Clinic			0
60.14	Santa Rosa Clinic			0
60.15	Neurology Clinic			0
60.16	Valley Care Pediatric Clinic	149	(149)	0
61.00	Emergency	3,437,309	2,775,182	6,212,491
62.01	Observation Beds - Distinct	86,637	(86,637)	0
64.00	Home Program Dialysis	13,215	(13,215)	0
TOTAL MEDI-CAL ANCILLARY CHARGES		\$ 320,231,749	\$ 19,714,401	\$ 339,946,150

(To Contract Sch 5)



Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

TRIAL BALANCE EXPENSES	NET EXP FOR COST ALLOC (From Sch 10) 0.00	OLD CAP BLDG & FIXTURES 1.00	OLD CAP MOVABLE EQUIP 2.00	OLD CAP LONG COST 2.01	NEW CAP BLDG & FIXTURES 3.00	NEW CAP MVBLE EQUIP 4.00	ALLOC COST 4.04	ALLOC COST 4.05	ALLOC COST 4.06	ALLOC COST 4.07	ALLOC COST 4.08	ALLOC COST 4.09
<b>GENERAL SERVICE COST CENTER</b>												
1.00 New Capital Related Costs - Building and Fixtures	3,443,529											
2.00 New Capital Related Costs - Moveable Equipments	0	0										
2.01 Old Capital Related Costs Long	5,734,954	0	0									
3.00 New Capital Rel Costs Building and Fixtures	26,513,674	0	0	0								
4.00 New Capital Related Costs - Moveable Equipments	0	0	0	0	0							
4.04	0	0	0	0	0	0						
4.05	0	0	0	0	0	0	0					
4.06	0	0	0	0	0	0	0	0				
4.07	0	0	0	0	0	0	0	0	0			
4.08	0	0	0	0	0	0	0	0	0	0		
4.09	0	0	0	0	0	0	0	0	0	0	0	
4.10	0	0	0	0	0	0	0	0	0	0	0	0
5.00 Employee Benefits	3,033,067	13,133	0	0	101,115	0	0	0	0	0	0	0
6.01 Non-Patient Telephones	0	0	0	0	0	0	0	0	0	0	0	0
6.02 Data Processing	0	0	0	0	0	0	0	0	0	0	0	0
6.03 Purchasing/Receiving	0	0	0	0	0	0	0	0	0	0	0	0
6.04 Admitting	0	0	0	0	0	0	0	0	0	0	0	0
6.05 Cashiering/Account Receivable	0	0	0	0	0	0	0	0	0	0	0	0
6.00 Other Administrative and General	151,786,459	153,316	0	48,633	1,180,468	0	0	0	0	0	0	0
7.00 Maintenance and Repairs	0	0	0	0	0	0	0	0	0	0	0	0
8.00 Operation of Plant	35,105,052	151,769	0	216,793	1,168,559	0	0	0	0	0	0	0
9.00 Laundry and Linen Service	3,749,045	2,249	0	17,017	17,317	0	0	0	0	0	0	0
10.00 Housekeeping	12,935,687	33,852	0	89,764	260,646	0	0	0	0	0	0	0
11.00 Dietary	5,745,311	64,088	0	77,460	493,449	0	0	0	0	0	0	0
12.00 Cafeteria	8,394,879	49,616	0	0	382,023	0	0	0	0	0	0	0
14.00 Nursing Administration	19,323,814	13,000	0	13,416	100,091	0	0	0	0	0	0	0
15.00 Central Services and Supply	21,123,179	106,192	0	315,207	817,630	0	0	0	0	0	0	0
16.00 Pharmacy	31,758,961	34,421	0	12,233	265,029	0	0	0	0	0	0	0
17.00 Medical Records and Library	17,391,093	50,213	0	0	386,622	0	0	0	0	0	0	0
18.00 Social Service	2,784,954	2,543	0	0	19,580	0	0	0	0	0	0	0
22.00 Item and Residents Services - Salary and Fringe	35,614,911	0	0	0	0	0	0	0	0	0	0	0
24.00 Paramedical Ed Program	0	1,418	0	0	10,922	0	0	0	0	0	0	0
24.01 Paramedical Ed Pharmacy Residents	37,875	0	0	0	0	0	0	0	0	0	0	0
24.02 Dietary Interns	187,888	0	0	0	0	0	0	0	0	0	0	0
<b>INPATIENT ROUTINE SERVICES CENTER</b>												
25.00 Adults and Pediatrics	143,608,860	512,260	0	2,682,176	3,944,176	0	0	0	0	0	0	0
26.00 Intensive Care Unit	47,405,720	110,496	0	116,896	850,772	0	0	0	0	0	0	0
27.00 Coronary Care Unit	11,860,687	24,030	0	0	185,021	0	0	0	0	0	0	0
28.00 Burn Intensive Care Unit	0	0	0	0	0	0	0	0	0	0	0	0
28.01 Neurosurgery Intensive Care	11,361,020	22,794	0	3,107	175,500	0	0	0	0	0	0	0
29.00	0	0	0	0	0	0	0	0	0	0	0	0
29.01 Neonatal Intensive Care Unit	26,792,186	33,101	0	3,566	254,862	0	0	0	0	0	0	0
30.00	0	0	0	0	0	0	0	0	0	0	0	0
31.00 Subprovider	0	0	0	0	0	0	0	0	0	0	0	0
31.01 Subprovider 2	0	0	0	0	0	0	0	0	0	0	0	0
33.00 Nursery	1,993,548	5,991	0	0	46,129	0	0	0	0	0	0	0
<b>ANCILLARY COST CENTERS</b>												
37.00 Operating Room	53,032,898	190,509	0	460,843	1,466,837	0	0	0	0	0	0	0
38.00 Recovery Room	11,889,679	29,445	0	0	226,713	0	0	0	0	0	0	0
39.00 Delivery Room and Labor Room	3,557,931	10,695	0	70,293	82,343	0	0	0	0	0	0	0
40.00 Anesthesiology	11,394,147	7,811	0	23,319	60,141	0	0	0	0	0	0	0
41.00 Radiology-Diagnostic	45,414,348	205,513	0	314,060	1,582,359	0	0	0	0	0	0	0
42.00 Radiology-Therapeutic	13,561,262	107,466	0	267,351	827,438	0	0	0	0	0	0	0
43.00 Radioisotope	7,483,653	23,052	0	103,957	177,494	0	0	0	0	0	0	0
44.00 Laboratory	49,510,606	74,920	0	141,805	576,852	0	0	0	0	0	0	0
44.01 Laboratory Path	13,440,487	53,739	0	0	413,764	0	0	0	0	0	0	0
46.00 Whole Blood and Packed Red Blood	19,534,680	21,242	0	0	163,555	0	0	0	0	0	0	0



Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

TRIAL BALANCE EXPENSES	ALLOC COST 4.10	EMPLOYEE BENEFITS 5.00	NON PAT PHONE 6.01	DATA PROCESSING 6.02	PURCHASING & RECEIVING 6.03	ADMITTING 6.04	CASHIERING 6.05	ACCUMULATE COST	ADMINIS- TRATIVE & GENERAL 6.00	MAINT & REPAIRS 7.00	OPER PLANT 8.00	LAUNDRY & LINEN 9.00
<b>GENERAL SERVICE COST CENTER</b>												
1.00 New Capital Related Costs - Building and Fixtures												
2.00 New Capital Related Costs - Moveable Equipments												
2.01 Old Capital Related Costs Long												
3.00 New Capital Rel Costs Building and Fixtures												
4.00 New Capital Related Costs - Moveable Equipments												
4.04												
4.05												
4.06												
4.07												
4.08												
4.09												
4.10												
5.00 Employee Benefits	0											
6.01 Non-Patient Telephones	0	0										
6.02 Data Processing	0	0	0									
6.03 Purchasing/Receiving	0	0	0	0								
6.04 Admitting	0	0	0	0	0							
6.05 Cashiering/Account Receivable	0	0	0	0	0	0						
6.00 Other Administrative and General	0	429,238	0	0	0	0	0	153,598,115				
7.00 Maintenance and Repairs	0	0	0	0	0	0	0	0	0			
8.00 Operation of Plant	0	29,800	0	0	0	0	0	36,671,973	4,978,241	0		
9.00 Laundry and Linen Service	0	5,756	0	0	0	0	0	3,791,383	514,682	0	48,684	
10.00 Housekeeping	0	90,813	0	0	0	0	0	13,410,762	1,820,518	0	494,795	0
11.00 Dietary	0	122,458	0	0	0	0	0	6,502,766	882,754	0	804,424	0
12.00 Cafeteria	0	0	0	0	0	0	0	8,826,518	1,198,205	0	537,015	0
14.00 Nursing Administration	0	58,462	0	0	0	0	0	19,508,782	2,648,328	0	159,890	0
15.00 Central Services and Supply	0	77,750	0	0	0	0	0	22,439,958	3,046,237	0	1,600,237	19,251
16.00 Pharmacy	0	89,615	0	0	0	0	0	32,160,259	4,365,773	0	390,053	609
17.00 Medical Records and Library	0	49,768	0	0	0	0	0	17,877,696	2,426,907	0	543,479	0
18.00 Social Service	0	10,489	0	0	0	0	0	2,817,566	382,486	0	27,524	0
22.00 Item and Residents Services - Salary and Fringe	0	2,027	0	0	0	0	0	35,616,938	4,835,019	0	0	0
24.00 Paramedical Ed Program	0	1,602	0	0	0	0	0	771,455	104,725	0	15,353	0
24.01 Paramedical Ed Pharmacy Residents	0	1,657	0	0	0	0	0	39,532	5,367	0	0	0
24.02 Dietary Interns	0	5,142	0	0	0	0	0	193,030	26,204	0	0	0
<b>INPATIENT ROUTINE SERVICES CENTER</b>												
25.00 Adults and Pediatrics	0	486,181	0	0	0	0	0	151,233,652	20,530,052	0	9,381,053	1,796,664
26.00 Intensive Care Unit	0	144,713	0	0	0	0	0	48,628,597	6,601,359	0	1,363,129	440,981
27.00 Coronary Care Unit	0	34,881	0	0	0	0	0	12,104,619	1,643,209	0	260,086	77,728
28.00 Burn Intensive Care Unit	0	0	0	0	0	0	0	0	0	0	0	0
28.01 Neurosurgery Intensive Care	0	34,125	0	0	0	0	0	11,596,545	1,574,237	0	251,147	83,695
29.00	0	0	0	0	0	0	0	0	0	0	0	0
29.01 Neonatal Intensive Care Unit	0	79,142	0	0	0	0	0	27,162,856	3,687,373	0	363,363	98,680
30.00	0	0	0	0	0	0	0	0	0	0	0	0
31.00 Subprovider	0	0	0	0	0	0	0	0	0	0	0	0
31.01 Subprovider 2	0	0	0	0	0	0	0	0	0	0	0	0
33.00 Nursery	0	6,882	0	0	0	0	0	2,052,551	278,635	0	64,845	26,863
<b>ANCILLARY COST CENTERS</b>												
37.00 Operating Room	0	160,145	0	0	0	0	0	55,311,233	7,508,530	0	2,721,182	464,408
38.00 Recovery Room	0	45,520	0	0	0	0	0	12,191,357	1,654,983	0	318,694	209,394
39.00 Delivery Room and Labor Room	0	12,284	0	0	0	0	0	3,733,546	506,831	0	216,301	46,384
40.00 Anesthesiology	0	18,637	0	0	0	0	0	11,504,055	1,561,682	0	117,897	2,544
41.00 Radiology-Diagnostic	0	130,246	0	0	0	0	0	47,646,526	6,468,042	0	2,673,584	291,280
42.00 Radiology-Therapeutic	0	29,082	0	0	0	0	0	14,792,598	2,008,103	0	1,545,568	58,107
43.00 Radioisotope	0	11,428	0	0	0	0	0	7,799,585	1,058,798	0	398,210	13,993
44.00 Laboratory	0	150,949	0	0	0	0	0	50,455,131	6,849,312	0	1,013,730	908
44.01 Laboratory Path	0	39,615	0	0	0	0	0	13,947,605	1,893,395	0	581,633	2,851
46.00 Whole Blood and Packed Red Blood	0	21,884	0	0	0	0	0	19,741,361	2,679,901	0	229,911	0

## STATE OF CALIFORNIA

## COMPUTATION OF COST ALLOCATION (W/S B)

## SCHEDULE 8.1

Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

	TRIAL BALANCE EXPENSES	ALLOC COST 4.10	EMPLOYEE BENEFITS 5.00	NON PAT PHONE 6.01	DATA PROCESSING 6.02	PURCHASING & RECEIVING 6.03	ADMITTING 6.04	CASHIERING 6.05	ACCUMULATE COST	ADMINIS- TRATIVE & GENERAL 6.00	MAINT & REPAIRS 7.00	OPER PLANT 8.00	LAUNDRY & LINEN 9.00
49.00	Respiratory Therapy	0	56,678	0	0	0	0	0	16,617,316	2,255,810	0	138,275	34
50.00	Physical Therapy	0	31,496	0	0	0	0	0	7,275,504	987,654	0	383,160	572
52.01	Renal Room	0	8,180	0	0	0	0	0	2,837,243	385,157	0	65,476	14,922
53.00	Electrocardiology	0	15,577	0	0	0	0	0	5,220,162	708,640	0	231,881	10,657
53.01	Cardiac Cath	0	17,935	0	0	0	0	0	10,084,813	1,369,019	0	595,597	44,457
54.00	Electroencephalography	0	7,208	0	0	0	0	0	1,555,554	211,167	0	19,393	2,511
55.00	Medical Supplies Charged to Patients	0	0	0	0	0	0	0	111,925,265	15,193,917	0	0	0
56.00	Drugs Charged to Patients	0	0	0	0	0	0	0	73,140,866	9,928,913	0	0	0
57.00	Renal Dialysis	0	13,074	0	0	0	0	0	4,988,817	677,235	0	177,843	4,692
58.00	ASC (Non-District Part)	0	14,571	0	0	0	0	0	4,986,851	676,968	0	350,308	95,465
59.00	Other Special Services	0	0	0	0	0	0	0	12,223,278	1,659,317	0	0	0
59.01	HEMO Perfusion Services	0	2,110	0	0	0	0	0	790,767	107,347	0	0	0
60.01	Dermatology Clinic	0	19,327	0	0	0	0	0	4,900,151	665,198	0	359,500	87,315
60.02	General Medicine Clinic	0	113,593	0	0	0	0	0	30,686,024	4,165,645	0	1,822,673	130,663
60.03	Ophthalmology Clinic	0	25,353	0	0	0	0	0	4,373,593	593,718	0	275,009	396
60.04	Orthopedic Clinic	0	28,435	0	0	0	0	0	5,503,760	747,139	0	418,158	10,534
60.05	Otolaryngology/Ent Clinic	0	10,092	0	0	0	0	0	2,420,841	328,631	0	187,969	510
60.06	Pediatrics Clinic	0	33,821	0	0	0	0	0	9,052,522	1,228,885	0	668,295	14,197
60.07	Urology Clinic	0	8,075	0	0	0	0	0	2,197,927	298,370	0	118,907	0
60.08	Cancer Center	0	68,758	0	0	0	0	0	18,433,328	2,502,334	0	1,061,000	38,481
60.09	Lakeside Senior Medical Center	0	3,546	0	0	0	0	0	825,784	112,101	0	0	301
60.10	Surgery Clinic	0	33,722	0	0	0	0	0	7,842,286	1,064,595	0	339,324	0
60.11	OB/GYN Clinic	0	62,367	0	0	0	0	0	14,601,219	1,982,124	0	836,922	25,295
60.12	Lakeshore Clinic	0	9,876	0	0	0	0	0	2,472,853	335,691	0	0	4,222
60.13	Psychiatric Clinic	0	0	0	0	0	0	0	0	0	0	0	0
60.14	Santa Rosa Clinic	0	613	0	0	0	0	0	221,085	30,012	0	0	0
60.15	Neurology Clinic	0	18,399	0	0	0	0	0	4,987,399	677,042	0	326,597	4,168
60.16	Valley Care Pediatric Clinic	0	1,933	0	0	0	0	0	684,523	92,924	0	0	0
61.00	Emergency	0	55,849	0	0	0	0	0	14,608,656	1,983,133	0	825,559	166,870
62.01	Observation Beds - Distinct	0	8,197	0	0	0	0	0	2,403,288	326,248	0	176,480	23,849
63.00	Psoriasis Day Care	0	967	0	0	0	0	0	529,012	71,814	0	0	21,305
63.50	RHC	0	0	0	0	0	0	0	0	0	0	0	0
63.60	FQHC	0	0	0	0	0	0	0	0	0	0	0	0
64.00	Home Program Dialysis	0	1,016	0	0	0	0	0	321,473	43,640	0	0	0
71.00	Home Health Agency/I&R Services (70 & 71)	0	20,940	0	0	0	0	0	6,894,519	935,935	0	0	0
82.00	Lung Acquisition	0	1,994	0	0	0	0	0	2,380,991	323,221	0	7,222	0
83.00	Kidney Acquisition	0	20,183	0	0	0	0	0	16,859,514	2,288,688	0	147,113	0
84.00	Liver Acquisition	0	7,159	0	0	0	0	0	7,575,342	1,028,357	0	0	0
85.00	Heart Acquisition	0	1,895	0	0	0	0	0	1,189,077	161,418	0	3,737	0
85.01	Pancreas Acquisition	0	425	0	0	0	0	0	1,128,415	153,183	0	0	12
85.02	Intestinal Acquisition	0	0	0	0	0	0	0	0	0	0	0	0
86.00	Other Organ Acquisition	0	14,096	0	0	0	0	0	4,039,741	548,397	0	17,777	0
87.06	Hospice	0	0	0	0	0	0	0	0	0	0	0	0
<b>NONREIMBURSABLE COST CENTERS</b>													
96.00	Gift, Flower, Coffee Shop	0	1,480	0	0	0	0	0	606,238	82,297	0	51,563	0
98.00	Physicians' Private Offices	0	0	0	0	0	0	0	184	25	0	0	0
98.01	Non Reimbursable	0	12,743	0	0	0	0	0	17,859,270	2,424,406	0	5,661,771	0
98.02	Non Reimbursable Observation GCRC	0	1,469	0	0	0	0	0	484,506	65,772	0	169,763	3,475
98.03	GCRC / PCRC	0	3,463	0	0	0	0	0	950,418	129,020	0	43,104	0
98.04	GCRC / PCRC	0	5,822	0	0	0	0	0	1,661,704	225,577	0	48,053	15,511
98.05	NRCC - Physician Billing	0	1,027	0	0	0	0	0	1,027	139	0	0	0
98.06	Special Events/Comm Relations	0	1,480	0	0	0	0	0	498,695	67,698	0	0	0
98.07	Other Nonreimbursable Cost	0	0	0	0	0	0	0	0	0	0	0	0
100.00	CIP-MB/ SF HEP B Clinic	0	2,077	0	0	0	0	0	100,987	13,709	0	0	0
<b>TOTAL</b>		<b>0</b>	<b>3,147,314</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1,285,071,345</b>	<b>153,598,116</b>	<b>0</b>	<b>41,650,214</b>	<b>4,354,750</b>

Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

TRIAL BALANCE EXPENSES	HOUSEKEEP 10.00	DIETARY 11.00	CAFETERIA 12.00	NURSING ADMIN 14.00	CENTRAL SERVICE & SUPPLY 15.00	PHARMACY 16.00	MEDICAL RECORDS & LIBRARY 17.00	SOCIAL SERVICE 18.00	I&R SERVICE SALARY & FRK 22.00	PARAMED ED PROGRAM 24.00	PARAMED ED PHARMACY 24.01	DIETARY INTERNS 24.02
<b>GENERAL SERVICE COST CENTER</b>												
1.00 New Capital Related Costs - Building and Fixtures												
2.00 New Capital Related Costs - Moveable Equipments												
2.01 Old Capital Related Costs Long												
3.00 New Capital Rel Costs Building and Fixtures												
4.00 New Capital Related Costs - Moveable Equipments												
4.04												
4.05												
4.06												
4.07												
4.08												
4.09												
4.10												
5.00 Employee Benefits												
6.01 Non-Patient Telephones												
6.02 Data Processing												
6.03 Purchasing/Receiving												
6.04 Admitting												
6.05 Cashiering/Account Receivable												
6.00 Other Administrative and General												
7.00 Maintenance and Repairs												
8.00 Operation of Plant												
9.00 Laundry and Linen Service												
10.00 Housekeeping												
11.00 Dietary	307,746											
12.00 Cafeteria	205,444	0										
14.00 Nursing Administration	61,169	0	257,208									
15.00 Central Services and Supply	612,198	0	342,069	0								
16.00 Pharmacy	149,222	0	394,269	0	39,751							
17.00 Medical Records and Library	207,917	0	218,957	0	25	0						
18.00 Social Service	10,530	0	46,149	0	0	0	0					
22.00 Intern and Residents Services - Salary and Fringe	0	0	8,919	0	0	0	0	0				
24.00 Paramedical Ed Program	5,873	0	7,047	0	56	0	0	0	0			
24.01 Paramedical Ed Pharmacy Residents	0	0	7,290	0	0	0	0	0	0	0		
24.02 Dietary Interns	0	0	22,625	0	0	0	0	0	0	0	0	
<b>INPATIENT ROUTINE SERVICES CENTER</b>												
25.00 Adults and Pediatrics	3,588,880	7,221,332	2,139,001	11,740,093	673,375	86,640	3,506,416	1,743,745	7,297,269	661,133	9,012	205,532
26.00 Intensive Care Unit	521,488	398,642	636,677	3,517,086	355,600	25,332	1,370,770	681,686	1,642,307	113,891	4,919	11,346
27.00 Coronary Care Unit	99,500	181,969	153,465	879,941	111,858	8,715	347,340	172,732	0	30,245	0	5,179
28.00 Burn Intensive Care Unit	0	0	0	0	0	0	0	0	0	0	0	0
28.01 Neurosurgery Intensive Care	96,081	117,896	150,135	864,608	87,347	6,789	373,397	185,691	12,464	19,376	0	3,356
29.00	0	0	0	0	0	0	0	0	0	0	0	0
29.01 Neonatal Intensive Care Unit	139,011	485,553	348,193	1,798,141	135,065	5,741	960,967	477,890	885,673	23,629	0	13,820
30.00	0	0	0	0	0	0	0	0	0	0	0	0
31.00 Subprovider	0	0	0	0	0	0	0	0	0	0	0	0
31.01 Subprovider 2	0	0	0	0	0	0	0	0	0	0	0	0
33.00 Nursery	24,807	34	30,280	185,486	7,045	464	45,267	22,511	0	0	0	1
<b>ANCILLARY COST CENTERS</b>												
37.00 Operating Room	1,041,034	0	704,600	2,013,102	6,600,285	228,726	1,757,073	0	3,915,143	0	6,944	0
38.00 Recovery Room	121,922	0	200,269	0	68,379	8,883	208,240	0	255,144	0	0	0
39.00 Delivery Room and Labor Room	82,749	0	54,047	331,076	12,573	828	80,795	0	0	0	0	0
40.00 Anesthesiology	45,104	0	81,994	0	359,496	696,116	484,085	0	574,807	0	0	0
41.00 Radiology-Diagnostic	1,022,825	0	573,031	0	1,005,633	526,454	1,642,536	0	2,947,355	0	0	0
42.00 Radiology-Therapeutic	591,283	0	127,948	0	28,486	39,000	751,563	0	891,538	0	0	0
43.00 Radioisotope	152,342	0	50,280	0	318,763	28,981	250,006	0	146,635	0	0	0
44.00 Laboratory	387,819	0	664,138	0	677,865	11,481	1,955,318	0	68,918	0	0	0
44.01 Laboratory Path	222,514	0	174,291	0	277,150	191	232,090	0	1,888,653	0	0	0
46.00 Whole Blood and Packed Red Blood	87,956	0	96,283	0	67,942	2,487,198	143,759	0	79,183	0	0	0

## STATE OF CALIFORNIA

## COMPUTATION OF COST ALLOCATION (W/S B)

## SCHEDULE 8.2

Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

	TRIAL BALANCE EXPENSES	HOUSEKEEP 10.00	DIETARY 11.00	CAFETERIA 12.00	NURSING ADMIN 14.00	CENTRAL SERVICE & SUPPLY 15.00	PHARMACY 16.00	MEDICAL RECORDS & LIBRARY 17.00	SOCIAL SERVICE 18.00	I&R SERVICE SALARY & FRK 22.00	PARAMED ED PROGRAM 24.00	PARAMED ED PHARMACY 24.01	DIETARY INTERNS 24.02
49.00	Respiratory Therapy	52,899	0	249,359	0	427,704	8,298	387,119	0	0	0	0	0
50.00	Physical Therapy	146,584	0	138,568	0	2,299	473	120,993	0	0	0	0	0
52.01	Renal Room	25,049	0	35,991	0	45,540	7,023	90,888	0	0	0	0	0
53.00	Electrocardiology	88,710	0	68,530	0	7,942	14,534	190,220	0	176,695	0	0	0
53.01	Cardiac Cath	227,856	0	78,907	0	983,384	55,955	230,262	0	73,317	0	0	0
54.00	Electroencephalography	7,419	0	31,714	0	1,501	0	81,836	0	0	0	0	0
55.00	Medical Supplies Charged to Patients	0	0	0	0	12,592,094	0	1,540,579	0	0	0	0	0
56.00	Drugs Charged to Patients	0	0	0	0	0	25,265,713	2,652,228	0	0	0	0	0
57.00	Renal Dialysis	68,037	0	57,522	0	51,780	319,551	95,049	0	0	0	0	0
58.00	ASC (Non-District Part)	134,016	0	64,108	0	473,178	75,825	283,465	0	497,091	0	0	0
59.00	Other Special Services	0	0	0	0	584	8	66,494	0	0	0	0	0
59.01	HEMO Perfusion Services	0	0	9,283	0	113,810	0	11,863	0	0	0	0	0
60.01	Dermatology Clinic	137,533	0	85,031	0	31,198	91,338	47,478	0	1,153,281	0	0	0
60.02	General Medicine Clinic	697,294	0	499,786	0	240,449	198,383	268,000	0	7,135,238	9,924	31,313	0
60.03	Ophthalmology Clinic	105,210	0	111,544	0	32,284	225,392	33,311	0	659,856	0	0	0
60.04	Orthopedic Clinic	159,973	0	125,105	0	4,646	43,019	15,621	0	1,153,281	0	0	0
60.05	Otolaryngology/Ent Clinic	71,911	0	44,399	0	8,886	9,625	19,013	0	615,132	0	0	0
60.06	Pediatrics Clinic	255,668	0	148,799	0	25,987	947,184	69,625	0	2,604,230	0	0	0
60.07	Urology Clinic	45,490	0	35,529	0	4,271	6,494	7,490	0	577,007	0	0	0
60.08	Cancer Center	405,903	0	302,506	0	57,655	5,622,773	108,924	0	0	0	0	0
60.09	Lakeside Senior Medical Center	0	0	15,602	0	987	5,623	3,076	0	0	0	0	0
60.10	Surgery Clinic	129,814	0	148,361	0	3,563	6,913	9,695	0	882,007	0	0	0
60.11	OB/GYN Clinic	320,179	0	274,389	0	29,577	139,089	74,373	0	1,489,074	0	0	0
60.12	Lakeshore Clinic	0	0	43,451	0	2,907	56,678	13,236	0	0	0	0	0
60.13	Psychiatric Clinic	0	0	0	0	128	3	0	0	0	0	0	0
60.14	Santa Rosa Clinic	0	0	2,697	0	278	0	500	0	0	0	0	0
60.15	Neurology Clinic	124,945	0	80,949	0	6,029	104,746	21,104	0	2,015,492	0	0	0
60.16	Valley Care Pediatric Clinic	0	0	8,506	0	392	6	1,419	0	0	0	0	0
61.00	Emergency	315,831	0	245,713	933,979	103,529	106,417	324,590	0	824,086	10,869	0	0
62.01	Observation Beds - Distinct	67,515	0	36,064	0	5,575	1,288	9,591	0	0	0	0	0
63.00	Psoriasis Day Care	0	0	4,253	0	718	20,944	8,549	0	0	0	0	0
63.50	RHC	0	0	0	0	0	0	0	0	0	0	0	0
63.60	FQHC	0	0	0	0	0	0	0	0	0	0	0	0
64.00	Home Program Dialysis	0	0	0	0	6,811	0	6,852	0	0	0	0	0
71.00	Home Health Agency/I&R Services (70 & 71)	0	0	0	0	8,013	2	22,674	0	0	35,443	0	0
82.00	Lung Acquisition	2,763	0	8,773	0	277,273	0	31,714	0	0	0	0	0
83.00	Kidney Acquisition	56,280	0	88,798	0	827,796	0	175,020	0	0	0	0	0
84.00	Liver Acquisition	0	0	31,495	0	660,502	0	84,341	0	0	0	0	0
85.00	Heart Acquisition	1,430	0	8,335	0	93,057	0	13,576	0	0	0	0	0
85.01	Pancreas Acquisition	0	0	1,871	0	92,212	0	11,255	0	0	0	0	0
85.02	Intestinal Acquisition	0	0	0	0	0	0	0	0	0	0	0	0
86.00	Other Organ Acquisition	6,801	0	62,018	0	532	0	0	0	0	0	0	0
87.06	Hospice	0	0	0	0	0	0	0	0	0	0	0	0
<b>NONREIMBURSABLE COST CENTERS</b>													
96.00	Gift, Flower, Coffee Shop	19,726	0	6,513	0	0	51	0	0	0	0	0	0
98.00	Physicians' Private Offices	0	0	0	0	6	0	0	0	0	0	0	0
98.01	Non Reimbursable	2,166,006	0	56,064	121,623	0	0	0	0	0	0	0	0
98.02	Non Reimbursable Observation GCRC	64,946	0	6,464	0	1,351	151	0	0	0	0	0	0
98.03	GCRC / PCRC	16,490	0	15,237	93,338	2,215	454	12,117	0	0	0	0	0
98.04	GCRC / PCRC	18,383	92,264	25,614	156,904	4,396	328	21,189	0	0	0	0	2,626
98.05	NRCC - Physician Billing	0	0	4,520	0	0	0	0	0	0	0	0	0
98.06	Special Events/Comm Relations	0	0	6,513	0	0	88	0	0	0	0	0	0
98.07	Other Nonreimbursable Cost	0	0	0	0	0	0	0	0	0	0	0	0
100.00	CIP-MB/ SF HEP B Clinic	0	0	9,137	0	219	4,027	31	0	0	0	0	0
				0									
	TOTAL	<u>15,726,076</u>	<u>8,497,689</u>	<u>10,767,182</u>	<u>22,635,376</u>	<u>28,059,950</u>	<u>37,499,937</u>	<u>21,274,979</u>	<u>3,284,255</u>	<u>40,460,876</u>	<u>904,510</u>	<u>52,189</u>	<u>241,859</u>

Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

	POST	TOTAL
TRIAL BALANCE	STEP-DOWN	COST
EXPENSES	ADJUSTMENT	
SUBTOTAL		
	25.00	27.00
<b>GENERAL SERVICE COST CENTER</b>		
1.00 New Capital Related Costs - Building and Fixtures		
2.00 New Capital Related Costs - Moveable Equipments		
2.01 Old Capital Related Costs Long		
3.00 New Capital Rel Costs Building and Fixtures		
4.00 New Capital Related Costs - Moveable Equipments		
4.04		
4.05		
4.06		
4.07		
4.08		
4.09		
4.10		
5.00 Employee Benefits		
6.01 Non-Patient Telephones		
6.02 Data Processing		
6.03 Purchasing/Receiving		
6.04 Admitting		
6.05 Cashiering/Account Receivable		
6.00 Other Administrative and General		
7.00 Maintenance and Repairs		
8.00 Operation of Plant		
9.00 Laundry and Linen Service		
10.00 Housekeeping		
11.00 Dietary		
12.00 Cafeteria		
14.00 Nursing Administration		
15.00 Central Services and Supply		
16.00 Pharmacy		
17.00 Medical Records and Library		
18.00 Social Service		
22.00 Item and Residents Services - Salary and Fringe		
24.00 Paramedical Ed Program		
24.01 Paramedical Ed Pharmacy Residents		
24.02 Dietary Interns		
<b>INPATIENT ROUTINE SERVICES CENTER</b>		
25.00 Adults and Pediatrics	221,813,849	221,813,849
26.00 Intensive Care Unit	66,313,810	66,313,810
27.00 Coronary Care Unit	16,076,585	16,076,585
28.00 Burn Intensive Care Unit	0	0
28.01 Neurosurgery Intensive Care	15,422,763	15,422,763
29.00	0	0
29.01 Neonatal Intensive Care Unit	36,585,954	36,585,954
30.00	0	0
31.00 Subprovider	0	0
31.01 Subprovider 2	0	0
33.00 Nursery	2,738,789	2,738,789
<b>ANCILLARY COST CENTERS</b>		
37.00 Operating Room	82,272,262	82,272,262
38.00 Recovery Room	15,237,265	15,237,265
39.00 Delivery Room and Labor Room	5,065,131	5,065,131
40.00 Anesthesiology	15,427,779	15,427,779
41.00 Radiology-Diagnostic	64,797,266	64,797,266
42.00 Radiology-Therapeutic	20,834,194	20,834,194
43.00 Radioisotope	10,217,592	10,217,592
44.00 Laboratory	62,084,620	62,084,620
44.01 Laboratory Path	19,220,373	19,220,373
46.00 Whole Blood and Packed Red Blood	25,613,493	25,613,493

Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

	POST		
	STEP-DOWN	TOTAL	
TRIAL BALANCE	ADJUSTMENT	COST	
EXPENSES			
	25.00	26.00	27.00
49.00 Respiratory Therapy	20,136,813		20,136,813
50.00 Physical Therapy	9,055,806		9,055,806
52.01 Renal Room	3,507,290		3,507,290
53.00 Electrocardiology	6,717,972		6,717,972
53.01 Cardiac Cath	13,743,568		13,743,568
54.00 Electroencephalography	1,911,094		1,911,094
55.00 Medical Supplies Charged to Patients	141,251,854		141,251,854
56.00 Drugs Charged to Patients	110,987,720		110,987,720
57.00 Renal Dialysis	6,440,526	(616,438)	5,824,088
58.00 ASC (Non-District Part)	7,637,276		7,637,276
59.00 Other Special Services	13,949,681		13,949,681
59.01 HEMO Perfusion Services	1,033,070		1,033,070
60.01 Dermatology Clinic	7,558,022		7,558,022
60.02 General Medicine Clinic	45,885,393		45,885,393
60.03 Ophthalmology Clinic	6,410,313		6,410,313
60.04 Orthopedic Clinic	8,181,236		8,181,236
60.05 Otolaryngology/Ent Clinic	3,706,917		3,706,917
60.06 Pediatrics Clinic	15,015,390		15,015,390
60.07 Urology Clinic	3,291,486		3,291,486
60.08 Cancer Center	28,532,904		28,532,904
60.09 Lakeside Senior Medical Center	963,473		963,473
60.10 Surgery Clinic	10,426,557		10,426,557
60.11 OB/GYN Clinic	19,772,239		19,772,239
60.12 Lakeshore Clinic	2,929,038		2,929,038
60.13 Psychiatric Clinic	131		131
60.14 Santa Rosa Clinic	254,574		254,574
60.15 Neurology Clinic	8,348,472		8,348,472
60.16 Valley Care Pediatric Clinic	787,770		787,770
61.00 Emergency	20,449,234		20,449,234
62.01 Observation Beds - Distinct	3,049,897		3,049,897
63.00 Psoriasis Day Care	656,594		656,594
63.50 RHC	0		0
63.60 FQHC	0		0
64.00 Home Program Dialysis	378,776		378,776
71.00 Home Health Agency/I&R Services (70 & 71)	7,896,586		7,896,586
82.00 Lung Acquisition	3,031,955		3,031,955
83.00 Kidney Acquisition	20,443,210		20,443,210
84.00 Liver Acquisition	9,380,036		9,380,036
85.00 Heart Acquisition	1,470,631		1,470,631
85.01 Pancreas Acquisition	1,386,948		1,386,948
85.02 Intestinal Acquisition	0		0
86.00 Other Organ Acquisition	4,675,265		4,675,265
87.06 Hospice	0		0
<b>NONREIMBURSABLE COST CENTERS</b>			
96.00 Gift, Flower, Coffee Shop	766,389		766,389
98.00 Physicians' Private Offices	215		215
98.01 Non Reimbursable	28,289,140		28,289,140
98.02 Non Reimbursable Observation GCRC	796,428		796,428
98.03 GCRC / PCRC	1,262,392		1,262,392
98.04 GCRC / PCRC	2,272,548		2,272,548
98.05 NRCC - Physician Billing	5,687		5,687
98.06 Special Events/Comm Relations	572,994		572,994
98.07 Other Nonreimbursable Cost	0		0
100.00 CIP-MB/ SF HEP B Clinic	128,109		128,109
TOTAL	<u>1,285,071,345</u>	<u>(616,438)</u>	<u>1,284,454,907</u>

## Provider Name:

UCSF MEDICAL CENTER

	OLD CAP BLDG & FIX (SQ. FT)	OLD CAP MVBLE EQUIP	OLD BLDG & FIX - LONG (SQ. FT)	NEW BLDG & FIXTURES (SQ. FT)	NEW CAP MVBLE EQUIP	STAT						
	1.00	2.00	2.01	3.00	4.00	4.04	4.05	4.06	4.07	4.08	4.09	4.10
<b>GENERAL SERVICE COST CENTERS</b>												
1.00												
2.00												
2.01												
3.00												
4.00												
4.04												
4.05												
4.06												
4.07												
4.08												
4.09												
4.10												
5.00	Employee Benefits	5,629			5,629							
6.01	Non-Patient Telephones											
6.02	Data Processing											
6.03	Purchasing/Receiving											
6.04	Admitting											
6.05	Cashiering/Account Receivable											
6.00	Other Administrative and General	65,716		2,755	65,716							
7.00	Maintenance and Repairs											
8.00	Operation of Plant	65,053		12,281	65,053							
9.00	Laundry and Linen Service	964		964	964							
10.00	Housekeeping	14,510		5,085	14,510							
11.00	Dietary	27,470		4,388	27,470							
12.00	Cafeteria	21,267			21,267							
14.00	Nursing Administration	5,572		760	5,572							
15.00	Central Services and Supply	45,517		17,856	45,517							
16.00	Pharmacy	14,754		693	14,754							
17.00	Medical Records and Library	21,523			21,523							
18.00	Social Service	1,090			1,090							
22.00	Intern and Residents Services - Salary and Fringe											
24.00	Paramedical Ed Program	608			608							
24.01	Paramedical Ed Pharmacy Residents											
24.02	Dietary Interns											
<b>INPATIENT ROUTINE SERVICES CENTER</b>												
25.00	Adults and Pediatrics	219,570		151,941	219,570							
26.00	Intensive Care Unit	47,362		6,622	47,362							
27.00	Coronary Care Unit	10,300			10,300							
28.00	Burn Intensive Care Unit											
28.01	Neurosurgery Intensive Care	9,770		176	9,770							
29.00												
29.01	Nursery ICU	14,188		202	14,188							
30.00												
31.00	Subprovider											
31.01	Subprovider 2											
33.00	Nursery	2,568			2,568							
<b>ANCILLARY COST CENTERS</b>												
37.00	Operating Room	81,658		26,106	81,658							
38.00	Recovery Room	12,621			12,621							
39.00	Delivery Room and Labor Room	4,584		3,982	4,584							
40.00	Anesthesiology	3,348		1,321	3,348							
41.00	Radiology-Diagnostic	88,089		17,791	88,089							
42.00	Radiology-Therapeutic	46,063		15,145	46,063							
43.00	Radioisotope	9,881		5,889	9,881							
44.00	Laboratory	32,113		8,033	32,113							
44.01	Laboratory Path	23,034			23,034							
46.00	Whole Blood and Packed Red Blood	9,105			9,105							



## Provider Name:

UCSF MEDICAL CENTER

	EMP BENE (PROD FTES) 5.00	NON PAT PHONE (# INSTRUMT) 6.01	DATA PROCESS (MACH TIME) 6.02	PURCHASING (COST OF SUPPLIES) 6.03	ADMITTING (GROSS REVENUE) 6.04	CASHIERING (GROSS REVENUE) 6.05	ADMIN & GEN (ACCUM COST)	MAINT & REPAIRS 7.00	OPER PLANT (SQ FT) 8.00	LAUNDRY & LINEN (LB LNDRY) 9.00	HOUSE- KEEPING (SQ FT) 10.00
<b>GENERAL SERVICE COST CENTERS</b>											
1.00											
2.00											
2.01											
3.00											
4.00											
4.04											
4.05											
4.06											
4.07											
4.08											
4.09											
4.10											
5.00											
6.01											
6.02											
6.03											
6.04											
6.05											
7.00							0				
8.00	5,395						36,671,973				
9.00	1,042						3,791,383	1,928			
10.00	16,441						13,410,762	19,595			
11.00	22,170						6,502,766	31,857		31,857	
12.00							8,826,518	21,267		21,267	
14.00	10,584						19,508,782	6,332		6,332	
15.00	14,076						22,439,958	63,373	23,946	63,373	
16.00	16,224						32,160,259	15,447	758	15,447	
17.00	9,010						17,877,696	21,523		21,523	
18.00	1,899						2,817,566	1,090		1,090	
22.00	367						35,616,938				
24.00	290						771,455	608		608	
24.01	300						39,532				
24.02	931						193,030				
<b>INPATIENT ROUTINE SERVICES CENTER</b>											
25.00	88,019						151,233,652	371,511	2,234,810	371,511	
26.00	26,199						48,628,597	53,983	548,522	53,983	
27.00	6,315						12,104,619	10,300	96,683	10,300	
28.00							0				
28.01	6,178						11,596,545	9,946	104,105	9,946	
29.00							0				
29.01	14,328						27,162,856	14,390	122,745	14,390	
30.00							0				
31.00							0				
31.01							0				
33.00	1,246						2,052,551	2,568	33,414	2,568	
<b>ANCILLARY COST CENTERS</b>											
37.00	28,993						55,311,233	107,765	577,662	107,765	
38.00	8,241						12,191,357	12,621	260,458	12,621	
39.00	2,224						3,733,546	8,566	57,695	8,566	
40.00	3,374						11,504,055	4,669	3,164	4,669	
41.00	23,580						47,646,526	105,880	362,314	105,880	
42.00	5,265						14,792,598	61,208	72,277	61,208	
43.00	2,069						7,799,585	15,770	17,405	15,770	
44.00	27,328						50,455,131	40,146	1,129	40,146	
44.01	7,172						13,947,605	23,034	3,546	23,034	
46.00	3,962						19,741,361	9,105		9,105	

## Provider Name:

UCSF MEDICAL CENTER

	EMP BENE (PROD FTES) 5.00	NON PAT PHONE (# INSTRUMT) 6.01	DATA PROCESS (MACH TIME) 6.02	PURCHASING (COST OF SUPPLIES) 6.03	ADMITTING (GROSS REVENUE) 6.04	CASHIERING (GROSS REVENUE) 6.05	ADMIN & GEN (ACCUM COST)	MAINT & REPAIRS 7.00	OPER PLANT (SQ FT) 8.00	LAUNDRY & LINEN (LB LNDRY) 9.00	HOUSE- KEEPING (SQ FT) 10.00
49.00	Respiratory Therapy	10,261					16,617,316	5,476	42	5,476	
50.00	Physical Therapy	5,702					7,275,504	15,174	712	15,174	
52.01	Renal Room	1,481					2,837,243	2,593	18,561	2,593	
53.00	Electrocardiology	2,820					5,220,162	9,183	13,256	9,183	
53.01	Cardiac Cath	3,247					10,084,813	23,587	55,298	23,587	
54.00	Electroencephalography	1,305					1,555,554	768	3,123	768	
55.00	Medical Supplies Charged to Patients						111,925,265				
56.00	Drugs Charged to Patients						73,140,866				
57.00	Renal Dialysis	2,367					4,988,817	7,043	5,836	7,043	
58.00	ASC (Non-District Part)	2,638					4,986,851	13,873	118,746	13,873	
59.00	Other Special Services						12,223,278				
59.01	HEMO Perfusion Services	382					790,767				
60.01	Dermatology Clinic	3,499					4,900,151	14,237	108,608	14,237	
60.02	General Medicine Clinic	20,565					30,686,024	72,182	162,527	72,182	
60.03	Ophthalmology Clinic	4,590					4,373,593	10,891	492	10,891	
60.04	Orthopedic Clinic	5,148					5,503,760	16,560	13,103	16,560	
60.05	Otolaryngology/Ent Clinic	1,827					2,420,841	7,444	634	7,444	
60.06	Pediatrics Clinic	6,123					9,052,522	26,466	17,659	26,466	
60.07	Urology Clinic	1,462					2,197,927	4,709		4,709	
60.08	Cancer Center	12,448					18,433,328	42,018	47,865	42,018	
60.09	Lakeside Senior Medical Center	642					825,784		374		
60.10	Surgery Clinic	6,105					7,842,286	13,438		13,438	
60.11	OB/GYN Clinic	11,291					14,601,219	33,144	31,463	33,144	
60.12	Lakeshore Clinic	1,788					2,472,853		5,251		
60.13	Psychiatric Clinic						0				
60.14	Santa Rosa Clinic	111					221,085				
60.15	Neurology Clinic	3,331					4,987,399	12,934	5,184	12,934	
60.16	Valley Care Pediatric Clinic	350					684,523				
61.00	Emergency	10,111					14,608,656	32,694	207,564	32,694	
62.01	Observation Beds - Distinct	1,484					2,403,288	6,989	29,665	6,989	
63.00	Psoriasis Day Care	175					529,012		26,501		
63.50	RHC						0				
63.60	FQHC						0				
64.00	Home Program Dialysis	184					321,473				
71.00	Home Health Agency/I&R Services (70 & 71)	3,791					6,894,519				
82.00	Lung Acquisition	361					2,380,991	286		286	
83.00	Kidney Acquisition	3,654					16,859,514	5,826		5,826	
84.00	Liver Acquisition	1,296					7,575,342				
85.00	Heart Acquisition	343					1,189,077	148		148	
85.01	Pancreas Acquisition	77					1,128,415		15		
85.02	Intestinal Acquisition						0				
86.00	Other Organ Acquisition	2,552					4,039,741	704		704	
87.06	Hospice						0				
	<b>NONREIMBURSABLE COST CENTERS</b>										
96.00	Gift, Flower, Coffee Shop	268					606,238	2,042		2,042	
98.00	Physicians' Private Offices						184				
98.01	Non Reimbursable	2,307					17,859,270	224,219		224,219	
98.02	Non Reimbursable Observation GCRC	266					484,506	6,723	4,323	6,723	
98.03	GCRC / PCRC	627					950,418	1,707		1,707	
98.04	GCRC / PCRC	1,054					1,661,704	1,903	19,293	1,903	
98.05	NRCC - Physician Billing	186					1,027				
98.06	Special Events/Comm Relations	268					498,695				
98.07	Other Nonreimbursable Cost						0				
100.00	CIP-MB/ SF HEP B Clinic	376					100,987				
	TOTAL	569,795	0	0	0	0	1,131,473,230	0	1,649,443	5,416,728	1,627,920
	COST TO BE ALLOCATED	3,147,314	0	0	0	0	153,598,115	0	41,650,214	4,354,750	15,726,076
	UNIT COST MULTIPLIER - SCH 8	5.523591	0.000000	0.000000	0.000000	0.000000	0.135751	0.000000	25.251078	0.803945	9.660226

Provider Name:

UCSF MEDICAL CENTER

DIETARY (MEALS SERVED) 11.00	CAFTERIA (MEALS SERVED) 12.00	NURSING ADMIN (NURSE FTE) 14.00	CENT SERV & SUPPLY (CST REQ) 15.00	PHARMACY (COSTS REQUIS) 16.00	MED REC (GROSS REVENUE) 17.00	SOC SERV (TIME SPENT) 18.00	I&R SERVICE SALARY & FRI (ASSIGN TIME) 22.00	PARAMED ED PROGRAM (ASSIGN TIME) 24.00	PARAMED ED PHAR RES (ASSIGN TIME) 24.01	DIETARY INTERNS (MEALS SERVE) 24.02
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**GENERAL SERVICE COST CENTERS**

- 1.00 New Capital Related Costs - Building and Fixtur
- 2.00 New Capital Related Costs - Moveable Equipme
- 2.01 Old Capital Related Costs Long
- 3.00 New Capital Rel Costs Building and Fixtures
- 4.00 New Capital Related Costs - Moveable Equipme
- 4.04
- 4.05
- 4.06
- 4.07
- 4.08
- 4.09
- 4.10
- 5.00 Employee Benefits
- 6.01 Non-Patient Telephones
- 6.02 Data Processing
- 6.03 Purchasing/Receiving
- 6.04 Admitting
- 6.05 Cashiering/Account Receivable
- 6.00 Other Administrative and General
- 7.00 Maintenance and Repairs
- 8.00 Operation of Plant
- 9.00 Laundry and Linen Service
- 10.00 Housekeeping
- 11.00 Dietary
- 12.00 Cafeteria
- 14.00 Nursing Administration
- 15.00 Central Services and Supply
- 16.00 Pharmacy
- 17.00 Medical Records and Library
- 18.00 Social Service
- 22.00 Item and Residents Services - Salary and Fringe
- 24.00 Paramedical Ed Program
- 24.01 Paramedical Ed Pharmacy Residents
- 24.02 Dietary Interns

10,584									
14,076									
16,224			357,022						
9,010			222						
1,899									
367									
290			500						
300									
931									

**INPATIENT ROUTINE SERVICES CENTER**

Adults and Pediatrics	429,068	88,019	78,864	6,047,849	251,321	772,365,797	772,365,797	9,953	1,399	632	429,068
Intensive Care Unit	23,686	26,199	23,626	3,193,786	73,482	301,942,472	301,942,472	2,240	241	345	23,686
Coronary Care Unit	10,812	6,315	5,911	1,004,638	25,280	76,509,236	76,509,236		64		10,812
Burn Intensive Care Unit											
Neurosurgery Intensive Care	7,005	6,178	5,808	784,494	19,693	82,248,978	82,248,978	17	41		7,005
Nursery ICU	28,850	14,328	12,079	1,213,070	16,652	211,674,336	211,674,336	1,208	50		28,850
Subprovider											
Subprovider 2											
Nursery	2	1,246	1,246	63,272	1,346	9,971,059	9,971,059				2

**ANCILLARY COST CENTERS**

Operating Room		28,994	13,523	59,279,800	663,481	387,034,272		5,340		487	
Recovery Room		8,241		614,140	25,767	45,869,362		348			
Delivery Room and Labor Room		2,224	2,224	112,925	2,403	17,796,903					
Anesthesiology		3,374		3,228,776	2,019,269	106,630,503		784			
Radiology-Diagnostic		23,580		9,031,989	1,527,120	361,804,811		4,020			
Radiology-Therapeutic		5,265		255,840	113,131	165,548,280		1,216			
Radioisotope		2,069		2,862,940	84,067	55,069,447		200			
Laboratory		27,329		6,088,175	33,305	430,702,060		94			
Laboratory Path		7,172		2,489,196	555	51,122,931		2,576			
Whole Blood and Packed Red Blood		3,962		610,211	7,214,777	31,666,036		108			

## Provider Name:

UCSF MEDICAL CENTER

	DIETARY (MEALS SERVED) 11.00	CAETERIA (MEALS SERVED) 12.00	NURSING ADMIN (NURSE FTE) 14.00	CENT SERV & SUPPLY (CST REQ) 15.00	PHARMACY (COSTS REQUIS) 16.00	MED REC (GROSS REVENUE) 17.00	SOC SERV (TIME SPENT) 18.00	I&R SERVICE SALARY & FRI (ASSIGN TIME) 22.00	PARAMED ED PROGRAM (ASSIGN TIME) 24.00	PARAMED ED PHAR RES (ASSIGN TIME) 24.01	DIETARY INTERNS (MEALS SERVE) 24.02
49.00		10,261		3,841,384	24,071	85,271,487					
50.00		5,702		20,646	1,372	26,651,309					
52.01		1,481		409,015	20,372	20,020,094					
53.00		2,820		71,334	42,159	41,900,249					
53.01		3,247		8,832,170	162,313	50,720,298		241			
54.00		1,305		13,481		18,026,152		100			
55.00				113,094,637		339,346,612					
56.00					73,289,895	584,211,843					
57.00		2,367		465,058	926,942	20,936,578					
58.00		2,638		4,249,803	219,951	62,439,438		678			
59.00				5,249	23	14,646,680					
59.01		382		1,022,173		2,613,104					
60.01		3,499		280,202	264,950	10,457,990		1,573			
60.02		20,566		2,159,573	575,461	59,032,897		9,732	21	2,196	
60.03		4,590		289,959	653,810	7,337,531		900			
60.04		5,148		41,727	124,788	3,440,937		1,573			
60.05		1,827		79,808	27,920	4,188,045		839			
60.06		6,123		233,398	2,747,557	15,336,442		3,552			
60.07		1,462		38,361	18,839	1,649,744		787			
60.08		12,448		517,821	16,310,343	23,992,812					
60.09		642		8,864	16,312	677,503					
60.10		6,105		31,999	20,053	2,135,458		1,203			
60.11		11,291		265,642	403,464	16,382,325		2,031			
60.12		1,788		26,112	164,409	2,915,534					
60.13				1,150	10						
60.14		111		2,500		110,228					
60.15		3,331		54,152	303,843	4,648,595		2,749			
60.16		350		3,519	16	312,570					
61.00		10,111	6,274	929,833	308,692	71,498,153		1,124	23		
62.01		1,484		50,068	3,737	2,112,624					
63.00		175		6,450	60,754	1,883,066					
63.50											
63.60											
64.00				61,170		1,509,223					
71.00				71,967	7	4,994,464			75		
82.00		361		2,490,298		6,985,603					
83.00		3,654		7,434,767		38,552,080					
84.00		1,296		5,932,230		18,578,053					
85.00		343		835,783		2,990,396					
85.01		77		828,191		2,479,122					
85.02											
86.00		2,552		4,779							
87.06											
<b>NONREIMBURSABLE COST CENTERS</b>											
96.00		268			149						
98.00				53							
98.01		2,307	817								
98.02		266		12,135	437						
98.03		627	627	19,892	1,317	2,668,989					
98.04	5,482	1,054	1,054	39,484	952	4,667,357					5,482
98.05		186									
98.06		268			254						
98.07											
100.00		376		1,963	11,680	6,738					
TOTAL	504,905	443,065	152,053	252,017,645	108,778,501	4,686,284,806	1,454,711,878	55,186	1,914	3,660	504,905
COST TO BE ALLOCATED	8,497,689	10,767,182	22,635,376	28,059,950	37,499,937	21,274,981	3,284,254	40,460,876	904,510	52,189	241,859
UNIT COST MULTIPLIER - SCH 8	16.830273	24.301585	148.865044	0.111341	0.344737	0.004540	0.002258	733.172831	472.575529	14.259304	0.479019

## TRIAL BALANCE OF EXPENSES

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

	REPORTED	ADJUSTMENTS (From Sch 10A)	AUDITED
<b>GENERAL SERVICE COST CENTERS</b>			
1.00	New Capital Related Costs - Building and Fixtures	\$ 3,443,529	\$ 0 \$ 3,443,529
2.00	New Capital Related Costs - Moveable Equipments		0 0
2.01	Old Capital Related Costs Long	5,734,954	0 5,734,954
3.00	New Capital Rel Costs Building and Fixtures	26,513,674	0 26,513,674
4.00	New Capital Related Costs - Moveable Equipments		0 0
4.04			0 0
4.05			0 0
4.06			0 0
4.07			0 0
4.08			0 0
4.09			0 0
4.10			0 0
5.00	Employee Benefits	3,033,067	0 3,033,067
6.01	Non-Patient Telephones		0 0
6.02	Data Processing		0 0
6.03	Purchasing/Receiving		0 0
6.04	Admitting		0 0
6.05	Cashiering/Account Receivable		0 0
6.00	Other Administrative and General	151,786,459	0 151,786,459
7.00	Maintenance and Repairs		0 0
8.00	Operation of Plant	35,105,052	0 35,105,052
9.00	Laundry and Linen Service	3,749,045	0 3,749,045
10.00	Housekeeping	12,935,687	0 12,935,687
11.00	Dietary	5,745,311	0 5,745,311
12.00	Cafeteria	8,394,879	0 8,394,879
14.00	Nursing Administration	19,323,814	0 19,323,814
15.00	Central Services and Supply	20,488,105	635,074 21,123,179
16.00	Pharmacy	31,758,961	0 31,758,961
17.00	Medical Records and Library	17,391,093	0 17,391,093
18.00	Social Service	2,784,954	0 2,784,954
22.00	Intern and Residents Services - Salary and Fringe	38,611,536	(2,996,625) 35,614,911
24.00	Paramedical Ed Program	757,513	0 757,513
24.01	Paramedical Ed Pharmacy Residents	37,875	0 37,875
24.02	Dietary Interns	187,888	0 187,888
<b>INPATIENT ROUTINE SERVICES CENTER</b>			
25.00	Adults and Pediatrics	143,608,860	0 143,608,860
26.00	Intensive Care Unit	47,405,720	0 47,405,720
27.00	Coronary Care Unit	11,860,687	0 11,860,687
28.00	Burn Intensive Care Unit		0 0
28.01	Neurosurgery Intensive Care	11,361,020	0 11,361,020
29.00			0 0
29.01	Neonatal Intensive Care Unit	26,792,186	0 26,792,186
30.00			0 0
31.00	Subprovider		0 0
31.01	Subprovider 2		0 0
33.00	Nursery	1,993,548	0 1,993,548
<b>ANCILLARY COST CENTERS</b>			
37.00	Operating Room	53,032,898	0 53,032,898
38.00	Recovery Room	11,889,679	0 11,889,679
39.00	Delivery Room and Labor Room	3,557,931	0 3,557,931
40.00	Anesthesiology	11,394,147	0 11,394,147
41.00	Radiology-Diagnostic	45,414,348	0 45,414,348
42.00	Radiology-Therapeutic	13,561,262	0 13,561,262
43.00	Radioisotope	7,483,653	0 7,483,653
44.00	Laboratory	49,510,606	0 49,510,606
44.01	Laboratory Path	13,440,487	0 13,440,487
46.00	Whole Blood and Packed Red Blood	19,534,680	0 19,534,680

## TRIAL BALANCE OF EXPENSES

Provider Name:  
UCSF MEDICAL CENTER

Fiscal Period Ended:  
JUNE 30, 2009

		REPORTED	ADJUSTMENTS (From Sch 10A)	AUDITED
49.00	Respiratory Therapy	16,449,496	0	16,449,496
50.00	Physical Therapy	6,938,675	0	6,938,675
52.01	Renal Room	2,776,435	0	2,776,435
53.00	Electrocardiology	5,018,206	0	5,018,206
53.01	Cardiac Cath	9,612,921	0	9,612,921
54.00	Electroencephalography	1,532,758	0	1,532,758
55.00	Medical Supplies Charged to Patients	112,560,339	(635,074)	111,925,265
56.00	Drugs Charged to Patients	73,140,866	0	73,140,866
57.00	Renal Dialysis	4,832,797	0	4,832,797
58.00	ASC (Non-District Part)	4,690,711	0	4,690,711
59.00	Other Special Services	12,223,278	0	12,223,278
59.01	HEMO Perfusion Services	788,657	0	788,657
60.01	Dermatology Clinic	4,591,867	0	4,591,867
60.02	General Medicine Clinic	29,136,555	(10,909)	29,125,646
60.03	Ophthalmology Clinic	4,150,075	(22,881)	4,127,194
60.04	Orthopedic Clinic	5,173,157	(33,937)	5,139,220
60.05	Otolaryngology/Ent Clinic	2,259,665	0	2,259,665
60.06	Pediatrics Clinic	8,481,542	0	8,481,542
60.07	Urology Clinic	2,105,889	(11,612)	2,094,277
60.08	Cancer Center	17,513,659	(1,894)	17,511,765
60.09	Lakeside Senior Medical Center	822,238	0	822,238
60.10	Surgery Clinic	7,535,824	0	7,535,824
60.11	OB/GYN Clinic	13,866,155	0	13,866,155
60.12	Lakeshore Clinic	2,462,977	0	2,462,977
60.13	Psychiatric Clinic		0	0
60.14	Santa Rosa Clinic	220,472	0	220,472
60.15	Neurology Clinic	4,707,055	0	4,707,055
60.16	Valley Care Pediatric Clinic	682,590	0	682,590
61.00	Emergency	13,922,659	0	13,922,659
62.01	Observation Beds - Distinct	2,262,497	0	2,262,497
63.00	Psoriasis Day Care	528,045	0	528,045
63.50	RHC		0	0
63.60	FQHC		0	0
64.00	Home Program Dialysis	320,457	0	320,457
71.00	Home Health Agency/I&R Services (70 & 71)	6,873,579	0	6,873,579
82.00	Lung Acquisition	2,373,192	0	2,373,192
83.00	Kidney Acquisition	16,721,085	0	16,721,085
84.00	Liver Acquisition	7,568,183	0	7,568,183
85.00	Heart Acquisition	1,184,179	0	1,184,179
	Reserved			
85.01	Pancreas Acquisition	1,127,990	0	1,127,990
85.02	Intestinal Acquisition		0	0
86.00	Other Organ Acquisition	4,011,356	0	4,011,356
87.06	Hospice		0	0
	<b>NONREIMBURSABLE COST CENTERS</b>			
96.00	Gift, Flower, Coffee Shop	564,368	0	564,368
98.00	Physicians' Private Offices	184	0	184
98.01	Non Reimbursable	13,237,952	81,233	13,319,185
98.02	Non Reimbursable Observation GCRC	346,585	0	346,585
98.03	GCRC / PCRC	912,309	0	912,309
98.04	GCRC / PCRC	1,617,258	0	1,617,258
98.05	NRCC - Physician Billing		0	0
98.06	Special Events/Comm Relations	497,215	0	497,215
98.07	Other Nonreimbursable Cost		0	0
100.00	CIP-MB/ SF HEP B Clinic	98,910	0	98,910
101	TOTAL	\$ 1,288,067,970	\$ (2,996,625)	\$ 1,285,071,345

(To Schedule 8)



Provider Name:

Fiscal Period Ended: JUNE 30, 2009

UCSF MEDICAL CENTER

	TOTAL ADJ (Page 1 & 2)	AUDIT ADJ 1	AUDIT ADJ 2	AUDIT ADJ 3	AUDIT ADJ							
49.00 Respiratory Therapy	0											
50.00 Physical Therapy	0											
52.01 Renal Room	0											
53.00 Electrocardiology	0											
53.01 Cardiac Cath	0											
54.00 Electroencephalography	0											
55.00 Medical Supplies Charged to Patients	(635,074)	(635,074)										
56.00 Drugs Charged to Patients	0											
57.00 Renal Dialysis	0											
58.00 ASC (Non-District Part)	0											
59.00 Other Special Services	0											
59.01 HEMO Perfusion Services	0											
60.01 Dermatology Clinic	0											
60.02 General Medicine Clinic	(10,909)		(10,909)									
60.03 Ophthalmology Clinic	(22,881)		(22,881)									
60.04 Orthopedic Clinic	(33,937)		(33,937)									
60.05 Otolaryngology/Ent Clinic	0											
60.06 Pediatrics Clinic	0											
60.07 Urology Clinic	(11,612)		(11,612)									
60.08 Cancer Center	(1,894)		(1,894)									
60.09 Lakeside Senior Medical Center	0											
60.10 Surgery Clinic	0											
60.11 OB/GYN Clinic	0											
60.12 Lakeshore Clinic	0											
60.13 Psychiatric Clinic	0											
60.14 Santa Rosa Clinic	0											
60.15 Neurology Clinic	0											
60.16 Valley Care Pediatric Clinic	0											
61.00 Emergency	0											
62.01 Observation Beds - Distinct	0											
63.00 Psoriasis Day Care	0											
63.50 RHC	0											
63.60 FQHC	0											
64.00 Home Program Dialysis	0											
71.00 Home Health Agency/I&R Services (70 & 71)	0											
82.00 Lung Acquisition	0											
83.00 Kidney Acquisition	0											
84.00 Liver Acquisition	0											
85.00 Heart Acquisition	0											
Reserved												
85.01 Pancreas Acquisition	0											
85.02 Intestinal Acquisition	0											
86.00 Other Organ Acquisition	0											
87.06 Hospice	0											
<b>NONREIMBURSABLE COST CENTERS</b>												
96.00 Gift, Flower, Coffee Shop	0											
98.00 Physicians' Private Offices	0											
98.01 Non Reimbursable	81,233		81,233									
98.02 Non Reimbursable Observation GCRC	0											
98.03 GCRC / PCRC	0											
98.04 GCRC / PCRC	0											
98.05 NRCC - Physician Billing	0											
98.06 Special Events/Comm Relations	0											
98.07 Other Nonreimbursable Cost	0											
100.00 CIP-MB/ SF HEP B Clinic	0											
101.00 TOTAL	<u>(\$2,996,625)</u>	<u>0</u>	<u>0</u>	<u>(2,996,625)</u>	<u>0</u>							

(To Sch 10)





Provider Name							Fiscal Period		Provider Number		Adjustments
UCSF MEDICAL CENTER							JULY 1, 2008 THROUGH JUNE 30, 2009		HSC00454W		16
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted	
Adj. No.	Audit Report	Cost Report									
		Work Sheet	Part	Title	Line	Col.					
<b>RECLASSIFICATIONS OF REPORTED COSTS</b>											
1	10A	A			15.00	7	Central Services and Supply	\$20,488,105	\$635,074	\$21,123,179	
	10A	A			55.00	7	Medical Supplies Charged to Patients To reconcile the reported expenses to agree with the provider's records. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300 and 2304	112,560,339	(635,074)	111,925,265	
2	10A	A			60.02	7	General Medicine Clinic	\$29,136,555	(\$10,909)	\$29,125,646	
	10A	A			60.03	7	Ophthalmology Clinic	4,150,075	(22,881)	4,127,194	
	10A	A			60.04	7	Orthopedic Clinic	5,173,157	(33,937)	5,139,220	
	10A	A			60.07	7	Urology Clinic	2,105,889	(11,612)	2,094,277	
	10A	A			60.08	7	Cancer Center	17,513,659	(1,894)	17,511,765	
	10A	A			98.01	7	Non Reimbursable To reclassify Part B professional salaries expenses to a nonreimbursable cost center. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300, 2304, and 2328	13,237,952	81,233	13,319,185	

Provider Name							Fiscal Period		Provider Number		Adjustments
UCSF MEDICAL CENTER							JULY 1, 2008 THROUGH JUNE 30, 2009		HSC00454W		16
Report References							Explanation of Audit Adjustments		As Reported	Increase (Decrease)	As Adjusted
Cost Report											
Adj. No.	Audit Report	Work Sheet	Part	Title	Line	Col.					
<u>ADJUSTMENT TO REPORTED COSTS</u>											
3	10A	A			22.00	7	Intern and Residents Service - Salary and Fringes To reconcile the reported Interns and Residents expenses to agree with the provider's general ledger. 42 CFR 413.20 and 413.24 CMS Pub. 15-1, Sections 2300 and 2304	\$38,611,536	(\$2,996,625)	\$35,614,911	

Provider Name							Fiscal Period	Provider Number		Adjustments
UCSF MEDICAL CENTER							JULY 1, 2008 THROUGH JUNE 30, 2009	HSC00454W		16
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Audit Report	Cost Report								
		Work Sheet	Part	Title	Line	Col.				
<b>ADJUSTMENTS TO REPORTED MEDI-CAL SETTLEMENT DATA - DESIGNATED PUBLIC HOSPITAL</b>										
4	DPH 4	D-1	I		9.00	1	Medi-Cal Days - Adults and Pediatrics	31,811	(5,221)	26,590 *
	DPH 4A	D-1	II		42.00	4	Medi-Cal Days - Nursery	560	(36)	524
	DPH 4A	D-1	II		43.00	4	Medi-Cal Days - Intensive Care Unit	5,487	565	6,052
	DPH 4A	D-1	II		44.00	4	Medi-Cal Days - Coronary Care Unit	844	229	1,073
	DPH 4A	D-1	II		45.01	4	Medi-Cal Days - Neurosurgery Intensive Care	974	(829)	145
	DPH 4A	D-1	II		46.01	4	Medi-Cal Days - Neonatal Intensive Care Unit	8,986	(888)	8,098
5	DPH 6	D-4		XIX	37.00	2	Medi-Cal Ancillary Charges - Operating Room	\$36,539,487	\$4,222,847	\$40,762,334
	DPH 6	D-4		XIX	38.00	2	Medi-Cal Ancillary Charges - Recovery Room	2,696,121	450,504	3,146,625
	DPH 6	D-4		XIX	39.00	2	Medi-Cal Ancillary Charges - Delivery Room and Labor Room	3,272,131	(1,380,723)	1,891,408
	DPH 6	D-4		XIX	40.00	2	Medi-Cal Ancillary Charges - Anesthesiology	10,886,234	687,705	11,573,939
	DPH 6	D-4		XIX	41.00	2	Medi-Cal Ancillary Charges - Radiology - Diagnostic	23,728,820	(994,979)	22,733,841 *
	DPH 6	D-4		XIX	42.00	2	Medi-Cal Ancillary Charges - Radiology - Therapeutic	390,166	5,154	395,320 *
	DPH 6	D-4		XIX	43.00	2	Medi-Cal Ancillary Charges - Radioisotope	683,788	(257,515)	426,273 *
	DPH 6	D-4		XIX	44.00	2	Medi-Cal Ancillary Charges - Laboratory	49,550,270	2,619,759	52,170,029 *
	DPH 6	D-4		XIX	44.01	2	Medi-Cal Ancillary Charges - Laboratory - Pathological	2,073,939	766,636	2,840,575
	DPH 6	D-4		XIX	46.00	2	Medi-Cal Ancillary Charges - Whole Blood and Packed Red Blood	2,807,259	1,338,863	4,146,122
	DPH 6	D-4		XIX	49.00	2	Medi-Cal Ancillary Charges - Respiratory Therapy	25,750,614	(4,089,421)	21,661,193 *
	DPH 6	D-4		XIX	50.00	2	Medi-Cal Ancillary Charges - Physical Therapy	3,982,596	(512,830)	3,469,766 *
	DPH 6	D-4		XIX	52.01	2	Medi-Cal Ancillary Charges - Renal Room	3,659,709	(3,101,363)	558,346
	DPH 6	D-4		XIX	53.00	2	Medi-Cal Ancillary Charges - Electrocardiology	4,670,884	853,872	5,524,756
	DPH 6	D-4		XIX	53.01	2	Medi-Cal Ancillary Charges - Cardiac Catheterization Lab	5,136,951	230,671	5,367,622
	DPH 6	D-4		XIX	54.00	2	Medi-Cal Ancillary Charges - Electroencephalography	4,689,364	217,528	4,906,893
	DPH 6	D-4		XIX	55.00	2	Medi-Cal Ancillary Charges - Medical Supplies Charged to Patients	48,426,822	5,066,652	53,493,474
	DPH 6	D-4		XIX	56.00	2	Medi-Cal Ancillary Charges - Drugs Charged to Patients	85,201,847	2,760,892	87,962,739 *
	DPH 6	D-4		XIX	57.00	2	Medi-Cal Ancillary Charges - Renal Dialysis	36,488	2,955,900	2,992,388
	DPH 6	D-4		XIX	58.00	2	Medi-Cal Ancillary Charges - ASC	372,608	(372,608)	0
	DPH 6	D-4		XIX	59.00	2	Medi-Cal Ancillary Charges - Other Special Services	387,102	(387,102)	0
	DPH 6	D-4		XIX	59.01	2	Medi-Cal Ancillary Charges - Hemo-Perfusion Services	1,141,938	(1,141,938)	0
	DPH 6	D-4		XIX	60.01	2	Medi-Cal Ancillary Charges - Dermatology Clinic	6,694	(6,694)	0
	DPH 6	D-4		XIX	60.02	2	Medi-Cal Ancillary Charges - General Medicine Clinic	547,800	(547,800)	0
	DPH 6	D-4		XIX	60.03	2	Medi-Cal Ancillary Charges - Ophthalmology	9,066	(9,066)	0
	DPH 6	D-4		XIX	60.04	2	Medi-Cal Ancillary Charges - Orthopedic Clinic	744	(744)	0

-Continued on next page-

\*Balance carried forward from prior/to subsequent adjustments

Provider Name							Fiscal Period	Provider Number		Adjustments
UCSF MEDICAL CENTER							JULY 1, 2008 THROUGH JUNE 30, 2009	HSC00454W		16
Report References							Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Audit Report	Cost Report								
		Work Sheet	Part	Title	Line	Col.				
<b>ADJUSTMENTS TO REPORTED MEDI-CAL SETTLEMENT DATA - DESIGNATED PUBLIC HOSPITAL</b>										
-Continued from previous page-										
	DPH 6	D-4		XIX	60.05	2	Medi-Cal Ancillary Charges - Otolaryngology	\$3,123	(3,123)	0
	DPH 6	D-4		XIX	60.07	2	Medi-Cal Ancillary Charges - Urology Clinic	564	(564)	0
	DPH 6	D-4		XIX	60.08	2	Medi-Cal Ancillary Charges - Cancer Center	\$7,993	(7,993)	0
	DPH 6	D-4		XIX	60.10	2	Medi-Cal Ancillary Charges - Surgery Clinic	2,565	(2,565)	0
	DPH 6	D-4		XIX	60.11	2	Medi-Cal Ancillary Charges - OB/GYN Clinic	30,664	(30,664)	0
	DPH 6	D-4		XIX	60.12	2	Medi-Cal Ancillary Charges - Lakeshore Clinic	88	(88)	0
	DPH 6	D-4		XIX	60.16	2	Medi-Cal Ancillary Charges - Valley Care Pediatric Clinic	149	(149)	0
	DPH 6	D-4		XIX	61.00	2	Medi-Cal Ancillary Charges - Emergency	3,437,309	2,775,182	6,212,491
	DPH 6	D-4		XIX	62.00	2	Medi-Cal Ancillary Charges - Observation Beds (Non-Distinct)	82,892	(82,892)	0
	DPH 6	D-4		XIX	62.01	2	Medi-Cal Ancillary Charges - Observation Beds (Distinct Part)	3,745	(3,745)	0
	DPH 6	D-4		XIX	64.00	2	Medi-Cal Ancillary Charges - Home Program Dialysis	13,215	(13,215)	0
	DPH 6	D-4		XIX	101.00	2	Medi-Cal Ancillary Charges - Totals	320,231,749	12,004,384	332,236,133 *
6	DPH 2	E-3	III	XIX	10.00	1	Medi-Cal Routine Service Charges	\$401,086,882	(\$29,866,982)	\$371,219,900 *
	DPH 2	E-3	III	XIX	11.00	1	Medi-Cal Ancillary Service Charges	320,231,749	12,004,384	\$332,236,133 *
7	DPH 3	E-3	III	XIX	33.00	1	Medi-Cal Deductibles	\$0	\$77,956	\$77,956 *
	DPH 3	E-3	III	XIX	36.00	1	Medi-Cal Coinsurance	0	1,042,187	1,042,187 *
	DPH 1	E-3	III	XIX	57.00	1	Amount Paid	0	82,485,791	82,485,791 *
To adjust Medi-Cal Settlement Data to agree with the following SURS Paid Claims Summary: Report Date: July 20, 2011 Payment Period: July 1, 2008 through July 18, 2011 Service Period: July 1, 2008 through June 30, 2009 42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64, and 433.139 CMS Pub. 15-1, Sections 2304, 2404, and 2408										

\*Balance carried forward from prior/to subsequent adjustments

Provider Name			Fiscal Period				Provider Number		Adjustments		
UCSF MEDICAL CENTER			JULY 1, 2008 THROUGH JUNE 30, 2009				HSC00454W		16		
Report References			Explanation of Audit Adjustments				As Reported	Increase (Decrease)	As Adjusted		
Adj. No.	Audit Report	Work Sheet								Part	Title
<b>ADJUSTMENTS TO REPORTED MEDI-CAL SETTLEMENT DATA - DESIGNATED PUBLIC HOSPITAL</b>											
8	DPH 4	Not Reported					Medi-Cal Days - Adults and Pediatrics (Administrative Days)	*	26,590	3,693	30,283
9	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Radiology - Diagnostic	*	\$22,733,841	\$464,674	\$23,198,515
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Radiology - Therapeutic	*	395,320	17,254	412,574
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Radioisotope	*	426,273	40,140	466,413
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Laboratory	*	52,170,029	2,629,662	54,799,691
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Respiratory Therapy	*	21,661,193	453,112	22,114,305
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Physical Therapy	*	3,469,766	366,269	3,836,034
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Drugs Charged to Patients	*	87,962,739	3,738,907	91,701,646
	DPH 6	Not Reported					Medi-Cal Ancillary Charges - Total	*	332,236,133	7,710,017	339,946,150
10	DPH 2	Not Reported					Medi-Cal Routine Charges	*	\$371,219,900	\$19,516,009	\$390,735,909
	DPH 2	Not Reported					Medi-Cal Ancillary Charges	*	\$332,236,133	7,710,017	339,946,150
11	DPH 3	Not Reported					Medi-Cal Deductibles	*	\$77,956	\$4,056	\$82,012
	DPH 3	Not Reported					Medi-Cal Coinsurance	*	\$1,042,187	\$29,708	\$1,071,895
	DPH 1	Not Reported					Amount Paid	*	82,485,791	4,886,441	87,372,232
<p>To report and include Medi-Cal Settlement Data related to Administrative Days in accordance with California Section 1115 Waiver and to agree with the following SURS Paid Claims Summary:                      Report Date: July 20, 2011                      Payment Period: July 1, 2008 through July 20, 2011                      Service Period: July 1, 2008 through June 30, 2009                      42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64, and 433.139                      CMS Pub. 15-1, Sections 2304, 2404, and 2408                      CCR, Title 22, Section 51541</p>											

\*Balance carried forward from prior/to subsequent adjustments

Provider Name			Fiscal Period				Provider Number		Adjustments	
UCSF MEDICAL CENTER			JULY 1, 2008 THROUGH JUNE 30, 2009				HSC00454W		16	
Report References										
Adj. No.	Audit Report	Cost Report					Explanation of Audit Adjustments	As Reported	Increase (Decrease)	As Adjusted
		Work Sheet	Part	Title	Line	Col.				
<b><u>ADJUSTMENTS TO REPORTED MEDI-CAL SETTLEMENT DATA - CALIFORNIA CHILDREN SERVICES</u></b>										
12	4	Not Reported				CCS Days - Adults and Pediatrics	0	4	4	
	4	Not Reported				CCS Days - Intensive Care Unit	0	1	1	
13	6	Not Reported				CCS Ancillary Charges - Operating Room	\$0	\$45,175	\$45,175	
	6	Not Reported				CCS Ancillary Charges - Recovery Room	0	3,086	3,086	
	6	Not Reported				CCS Ancillary Charges - Anesthesiology	0	15,872	15,872	
	6	Not Reported				CCS Ancillary Charges - Radiology - Diagnostic	0	537	537	
	6	Not Reported				CCS Ancillary Charges - Laboratory	0	1,755	1,755	
	6	Not Reported				CCS Ancillary Charges - Respiratory Therapy	0	128	128	
	6	Not Reported				CCS Ancillary Charges - Physical Therapy	0	471	471	
	6	Not Reported				CCS Ancillary Charges - Medical Supplies Charged to Patients	0	15,774	15,774	
	6	Not Reported				CCS Ancillary Charges - Drugs Charged to Patients	0	4,758	4,758	
	6	Not Reported				CCS Ancillary Charges - Total	0	87,556	87,556	
14	2	Not Reported				CCS Routine Charges	\$0	\$15,435	\$15,435	
	2	Not Reported				CCS Ancillary Charges	0	87,556	87,556	
15	1	Not Reported				Amount Paid	\$0	\$51,496	\$51,496	
<p>To segregate California Children Services (CCS) Settlement Data as these services are not applicable to California Section 1115 Waiver and to agree with the following SURS Paid Claims Summary:                      Report Date: July 20, 2011                      Payment Period: July 1, 2008 through July 20, 2011                      Service Period: July 1, 2008 through June 30, 2009                      42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64, and 433.139                      CMS Pub. 15-1, Sections 2304, 2404, and 2408</p>										

Provider Name							Fiscal Period							Provider Number		Adjustments
UCSF MEDICAL CENTER							JULY 1, 2008 THROUGH JUNE 30, 2009							HSC00454W		16
Report References							Explanation of Audit Adjustments							As Reported	Increase (Decrease)	As Adjusted
Cost Report																
Adj. No.	Audit Report	Work Sheet	Part	Title	Line	Col.										
<u>ADJUSTMENT TO OTHER MATTERS</u>																
16	DPH 3	Not Reported					Late Billing Cost Reductions - Routine Services To reflect late billing cost reductions applicable to the routine services. 42 CFR 413.20, 413.24, 413.50, 413.53, 413.60, 413.64, and 433.139 CMS Pub. 15-1, Sections 2304, 2404, and 2408 CCR, Title 22, Section 51458.1 W & I Code Section 14115					\$0	\$91,280	\$91,280		